



**KEYSTONE**  
collections group®

PO Box 489 • Irwin PA 15642

Phone: (724) 978-2867 • Fax: (412) 927-3646

KeystoneCollects.com

**WILKINS TOWNSHIP**  
**2025 BUSINESS PRIVILEGE & MERCANTILE TAX**

**LICENSE APPLICATION**

**DUE DATE: JANUARY 15, 2025**

**ACCOUNT #:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**UPON RECEIPT OF LICENSE APPLICATION WITH REMITTANCE FOR THE SAME, VALIDATED BUSINESS LICENSE WILL BE RETURNED. A SEPARATE LICENSE IS REQUIRED FOR EACH PHYSICAL BUSINESS LOCATION WITHIN THE TAXING JURISDICTION.**

**License Fee Schedule**

Indicate Business Type(s). Check all that apply:

- ☐ Business Privilege (Services and/or Rentals)
- ☐ Retail (sale of tangible goods, commodities, food, beverages, or place of amusement)
- ☐ Wholesale (sale of tangible goods to another vendor)

If only one tax type	\$25.00
If two tax types	\$50.00
If all three tax types	\$50.00

**Amount Remitted**      **\$** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Federal Tax ID#:** \_\_\_\_\_

**Owner(s) Name(s):** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Nature of Business:** \_\_\_\_\_

**Date Operation began in Municipality:** \_\_\_\_\_

**Physical Location of Business:** \_\_\_\_\_

Please make check payable and remit to:

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**PO Box 489, Irwin PA, 15642**

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**Toll Free: (888) 328-0561**  
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