Tax Account Change Form

ownership change, entity type, etc.

Select the reason you are using this form. You only need to complete the section of this form that meets your needs. All applicants must complete Section 1.

I need to update an address or other contact information,



Save time, do this online: tax-services@phila.gov

Mail completed form to:

Philadelphia, PA 19105-1401

Questions? (215) 686-6600

revenue@phila.gov

PO Box 1401

Philadelphia Department of Revenue

You can update or close tax accounts online. You will need a user name and password for the Philadelphia Tax Center.

I need to open or close a tax account (including Earnings or School Income tax)

1 Contact Information—All requests must complete this section

Form completed by (print)

Date and

Email address

Signature

2 To update your business address or information

Current	business	name

Corrected	husiness	name

Current business street address

Current business city, state, and zip code

Philadelphia Tax ID Number (PHTIN)							
Employer Identification Number (EIN) (if applicable)							
		—					
Social Security Number							
			_				
Spouse Social Security Number (if applicable)							
			_		_		

Corrected business street address

Corrected business city, state, and zip code

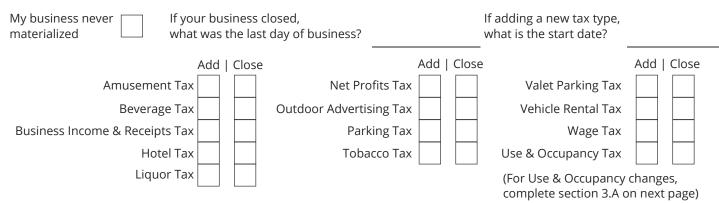
Philadelphia Tax ID Number (PHTIN)

Employer Identification Number (EIN) (if applicable)

Social Security Number

Spouse Social Security Number (if applicable)

3 To add or close a business tax account Use this section if you already have a PHTIN



3.A Complete if closing or opening a Use & Occupancy Account

Property Street Address	Mailing street address (if different from property address					
Property City, state, and zip code	Mailing city, state, and zip code					
OPA Number Date of Cancelation (if closing the account) Date of Cancelation (if closing the account) Select the reason for cancelation Sold Name of new property owner Vacant Residential Other reason: Other reason	Use & Occupancy Account Number OR Date of Purchase (if opening the account)					
Current registered taxpayer name	Corrected taxpayer name					
Current registered taxpayer street address	Corrected registered taxpayer street address					
Current registered taxpayer city, state, and zip code	Corrected taxpayer city, state, and zip code					
Social Security Number Date of cancelation (if closing the account) Date of cancelation (if closing the account) To update or close a School Incon Also use this section if your spouse is deceased and						
Current registered taxpayer name	Corrected taxpayer name					
Current registered taxpayer street address	Corrected registered taxpayer street address					
Current registered taxpayer city, state, and zip code	Corrected taxpayer city, state, and zip code					
Social Security Number	Corrected Social Security Number Corrected Social Security Number Corrected Spouse Social Security Number (if applicable)					
Date of cancelation (if closing the account)	Select the reason for cancelation					
	No longer live in Philadelphia No taxable income					

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Spouse now filing separately

Spouse deceased