CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE

CHANGE FORM

USE THIS FORM TO REPORT:

- Name and/or mailing address change
- Close of business
- Incorrect Social Security or Federal ID Number
- Death of a taxpayer
- Add or cancel a City or School Tax liability
- Need for a new coupon book

MAIL THE COMPLETED CHANGE FORM TO:
CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE
P.O. BOX 1410
PHILADELPHIA, PA 19105-1410
OR FAX TO: 215-686-6635
(If submitting by fax, do not mail this form.)

DEPARTMENT OF REVENUE CONTACT INFORMATION
PHONE: 215-686-6600
E-MAIL: revenue@phila.gov
INTERNET: phila.gov/revenue

A single change form can be used for all tax types for which you are liable. Clearly **print** or **type** all applicable items.

CURRENT REGISTRATION INFORMATION MUST BE COMPLETED FOR ALL CHANGE REQUESTS.

Currently Registered Taxpayer Name and Address

City Account Number

Employer Identification Number

Social Security Number

Spouse's Social Security Number

PART 1. BUSINESS AND WAGE TAXES

For a change of entity, use this form to cancel your account. You must apply for a new Philadelphia Tax Account Number and Business Privilege License. See the contact information above to obtain the application.

TYPE OF ORGANIZATION *(CHECK ONE)*

A) ☐ **SOLE PROPRIETOR**

B) ☐ **CORPORATION**

C) ☐ **ESTATE/TRUST**

D) ☐ **LIMITED LIABILITY COMPANY (LLC)**
INDICATE FILING BASIS WITH THE INTERNAL REVENUE SERVICE

SOLE PROPRIETORSHIP ◯ CORPORATION ◯ PARTNERSHIP ◯

E) ☐ **PARTNERSHIP** Check here if any member is a corporation. ☐

GENERAL PARTNERSHIP ◯ LIMITED PARTNERSHIP ◯
LIMITED LIABILITY PARTNERSHIP ◯

F) ☐ **JOINT VENTURE** Check here if any member is a corporation. ☐

Business Name and Address

Employer Identification Number

Social Security Number

Telephone #

Fax #

Contact Person

E-mail Address

To request a new coupon book, add a tax, or if your business has closed, complete the appropriate information below.

ADD A NEW TAX TYPE

Enter start date

BUSINESS CLOSED OR NO LONGER HAVE TAXABLE WAGES

Enter the last day of business

If your business never materialized, check here: ☐

	ADD	CANCEL	COUPONS		ADD	CANCEL	COUPONS
AMUSEMENT TAX	◯	◯	◯	OUTDOOR ADVERTISING TAX	◯	◯	◯
BUSINESS PRIVILEGE TAX	◯	◯	◯	PARKING TAX	◯	◯	◯
HOTEL TAX	◯	◯	◯	VALET PARKING TAX	◯	◯	◯
LIQUOR TAX	◯	◯	◯	VEHICLE RENTAL TAX	◯	◯	◯
NET PROFITS TAX	◯	◯	◯	WAGE TAX	◯	◯	◯

PART 2. SCHOOL INCOME TAX

Corrected Taxpayer's Name

Corrected Social Security Number

Corrected Spouse's Name

Spouse's Corrected Social Security Number

New Address

Telephone #

Fax #

E-mail Address

Taxpayer's Name

Social Security Number

Reason for Cancelation

Moved out of Philadelphia ☐ Spouse Filing Separately ☐

Deceased ☐ No taxable Income ☐

Cancelation Date

Spouse's Name

Spouse's Social Security Number

Reason for Cancelation

Moved out of Philadelphia ☐ Spouse Filing Separately ☐

Deceased ☐ No taxable Income ☐

Cancelation Date

PART 3. BUSINESS USE and OCCUPANCY TAX

Property Address

Business U&O Tax Account Number

Property Account Number

Mailing Address (If different from Property Address)

Telephone #

Fax #

E-mail Address

Reason for Cancelation

Sold * ☐ Residential ☐

Vacant ☐ Tax Exempt ☐

Cancelation Date

Name of New Property Owner

Date of Purchase

**** If the property has been sold, you must provide documentation. For example, a copy of the settlement sheet or deed.***

PART 4. EMPLOYEE EARNINGS TAX

Taxpayer's Name

Corrected Social Security Number

New Address

Telephone #

Fax #

E-mail Address

If you are canceling this account, complete the appropriate information below.

Reason for Cancelation

Moved out of Philadelphia ☐ Employer now withholding tax ☐

Deceased ☐ No longer employed ☐

Cancelation Date