



City of Reading Citizens Service Center
815 Washington Street
Reading Pennsylvania 19601-3690
1(877) 727-3234
www.readingpa.gov
Email: csc@readingpa.gov
License Fee - \$55.00

ITINERANT REGISTRATION QUESTIONNAIRE

<u>For City Use Only</u>	
Prior Year <input type="checkbox"/>	Itinerant <input type="checkbox"/>
% of Completion <input type="checkbox"/>	

Account Number	

Clerk	Date

The following information is necessary for our records and will be held in strict confidence.
All applicable questions (1-27) must be fully answered and clearly printed.

1. Business Name: _____	2. FEIN: _____
3. Business Phone: _____	4. Fax: _____
5. E-Mail: _____	6. Website: _____
7. Mailing Address Where all Forms are to be Sent: _____	
8. Will you be working in the City of Reading 15 or more days?: _____	

9. Start Date of Construction or Business Activity within the City of Reading: _____
10. Expected Completion Date of Construction or Activity within the City of Reading (If applicable): _____
11. Describe Business Activity/Construction Type: _____
12. Site of Construction or Complete Work Address Within the City of Reading: _____

<u>If You Are Not a Contractor, Skip Questions 12 – 13.</u>
13. Dollar-Amount of Contract: _____
14. Is Revenue Recognized by Percentage of Completion? () yes, () no. If yes, Enter Projected Revenue Recognition Dates: _____

<u>15. Organization & Type of Business:</u>		
Proprietorship _____	LLP/LP _____	S-Corp _____
Partnership _____	LLC _____	C-Corp _____
Association _____	Fiduciary _____	Date of Incorporation _____

16. Accounting Basis: (__ Cash) (__ Accrual)	17. Accounting Year: (__ Calendar) (__ Fiscal)
18. No. Of Employees (W-2 Recipients*) _____	19. Monthly Payroll \$ _____
<i>(*W-2s & Monthly Payroll for individual(s) employed at City of Reading job site only)</i>	

<u>SUBCONTRACTORS</u>			
20. Please list entities who will be hired for this job as Independent Contractors, Subcontractors, or 1099 Recipients. Please use additional sheets if necessary.			
CONTACT NAME	BUSINESS NAME	MAILING ADDRESS	TELEPHONE & E-MAIL ADDRESS
_____	_____	_____	_____
CONTACT NAME	BUSINESS NAME	MAILING ADDRESS	TELEPHONE & E-MAIL ADDRESS
_____	_____	_____	_____
CONTACT NAME	BUSINESS NAME	MAILING ADDRESS	TELEPHONE & E-MAIL ADDRESS
_____	_____	_____	_____
CONTACT NAME	BUSINESS NAME	MAILING ADDRESS	TELEPHONE & E-MAIL ADDRESS
_____	_____	_____	_____
CONTACT NAME	BUSINESS NAME	MAILING ADDRESS	TELEPHONE & E-MAIL ADDRESS
_____	_____	_____	_____

PLEASE COMPLETE ITEMS #20-23 ONLY IF BUSINESS IS A SOLE PROPRIETORSHIP:

21. Owner's Name: _____ 22. Owner's SSN: _____
 23. Owner's Home Address: _____
 24. Owner's Date of Birth: _____
 (mm/dd/yyyy)

25. IF BUSINESS IS A PARTNERSHIP, LLC, LLP, LP, OR CORPORATION (C or S), PLEASE COMPLETE BELOW:

Partners', Members', Or Officers' Names	Title	Birth Date	Social Security Number	Home Address

26. Name of Previous Owner (If Any): _____
 27. Previous Business Address (If Any): _____

28. I Hereby Certify That All Information And Statements Herein Are True and Correct.
If this form is not signed in the Citizens' Service Center it must be NOTARIZED.

X

Proprietor/Partner/Member(s)/Officer(s) Signature **Date**

X

Partner/Member(s)/Officer(s) Signature **Date**

NOTE: The facts set forth herein are made subject to the penalties of 18 PA C.S. Sec. 4904 relative to unsworn falsifications to authorities.

*If Business Is A Partnership, All Partners Must Verify Questionnaire Either By Personal Appearance At This Office For The Purpose Of Signing This Questionnaire Or By Separate Notarized Statement.

The business privilege license and business privilege tax are an annual license/tax. If you expect to do business in the City of Reading and have not received an annual license and tax notice, it is your responsibility to notify us for the necessary forms.

All contractors must register separately with the City of Reading's tax collectors as follows:

The following local payroll tax is levied by the City of Reading, PA and administered/collected by Berks Earned Income Tax Bureau:

- **Earned Income Tax**-Must be deducted for all individuals employed at the employer's City of Reading location. The 2024 rate is 3.6% for all City of Reading residents; and 1% for most non-city residents. Contact Berks Earned Income Tax or see the tax rates on our website: www.readingpa.gov to confirm.

Berks Earned Income Tax Bureau
1125 Berkshire Blvd, Suite 115
Wyomissing, PA 19610
610.372.8439
www.beitb@berkseit.com

The following taxes are levied by the City of Reading, PA and administered/collected by Keystone Collections Group:

- **Local Services Tax**-This payroll tax must be deducted at the rate of \$1.00 per week per individual employed at the employer's City of Reading location.
- **Business Privilege Tax**-rates determined by business type, based on the gross receipts for the job/ project. See above for a detailed explanation.

Keystone Collections Group
PO Box 559
Irwin, PA 15642
1 888 328 0561, Spanish 724 978 2866
<https://keystonecollects.com>