

**APPLICATION FOR HOME OCCUPATION PERMIT**

Township of Upper St. Clair  
1820 McLaughlin Run Rd., Upper St. Clair, PA 15241  
Phone: 412.831.9000 ext. 233 or 263 FAX: 412.854.0773 www.twpusc.org

**ZON NO:** \_\_\_\_\_

*Type of Use: HO  
Type of Review: F  
Occupancy/Use: CHG*

*I (We) hereby make application for a home occupation permit:*

**Property Address:**

**Applicant(s) Name & Address:**

**City**

**Zip**

**Home Phone:**

**Business Phone:**

**Cell Phone:**

*If Applicant is other than Owner, specify relationship (i.e. tenant, relative) and have Owner complete Owner's Affidavit on Page 2.*  
**Relationship:**

**Owner(s) Name & Address:**

**City**

**Zip**

**Home Phone:**

**Business Phone:**

**Cell Phone:**

**Current and/or Former Use of Property:**

**PLEASE PROVIDE A BRIEF DESCRIPTION OF HOME OCCUPATION:**

**Fee: \$20.00**

**Cash Rec. No. or  
Check No. & Bank Name:**

**APPLICANT'S AFFIDAVIT**

*I have read and understand the Township's Home Occupation Standards as set forth in Chapter 130 of the Township Code and agree to conduct home occupation activities in strict accordance with said provisions.*

COMMONWEALTH OF PENNSYLVANIA : SS  
COUNTY OF ALLEGHENY :

Before me, the undersigned authority in and for the Commonwealth and County aforesaid, personally appeared \_\_\_\_\_, who by me first duly sworn according to law, depose(s) and say(s) that he, she or they (is, are) (a, the) Resident(s) of the above-described property, and that all of the statements contained above are true and correct.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Resident's Signature of Affidavit

*OWNER'S AFFIDAVIT*

COMMONWEALTH OF PENNSYLVANIA : SS  
COUNTY OF ALLEGHENY :

Before me, the undersigned authority in and for the Commonwealth and County aforesaid, personally appeared \_\_\_\_\_, who by me first duly sworn according to law, depose(s) and say(s) that he, she or they (is, are) (a, the) Owner(s) of the above-described property, and that (he, she, or they) have no objection to the filing of this application for home occupation and conduction of said home occupation, subject to approval by the Township of Upper St. Clair.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Owner's Signature of Affidavit

**BUSINESS/EMPLOYER REGISTRATION FORM**

TOWNSHIP OF UPPER ST. CLAIR TAX OFFICE  
1820 McLaughlin Run Rd., Upper St. Clair, PA 15241  
412.831.9000

**Employers and businesses must complete in full, sign and return within fifteen (15) days of the start of business within the Township to the Township Tax Office, address above. All questions must be answered completely. The following information will be held in strict confidence.**

<b>Employer Name:</b>	<b>Federal Identification Number:</b>
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<b>Trade Name or Familiar Name:</b>
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<b>Upper St. Clair/Pittsburgh Area Address:</b>
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<b>Local Contact:</b>	<b>Local Phone Number:</b>
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<b>Alternate Mailing Address:</b>
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<b>Alternate Contact:</b>	<b>Alternate Phone Number:</b>
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<b>Nature of Business</b>	<b>Date Began:</b>
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<b>Type of Organization:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Individual (self employed) <input type="checkbox"/> Partnership	<b>Number of Local Employees:</b>
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<b>Does the business contract with an outside organization for any retail or wholesale sales operations conducted within the Township? [for example, a department store's fine jewelry department is leased to an outside vendor who is responsible for paying any sales and mercantile taxes on their own].</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, list name, business name, address and contact person on a separate sheet.
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<b>Do you withhold quarterly earned income taxes for Upper St. Clair residents: <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, submit a list of employees, complete with names, addresses and social security numbers. If your business is located in Upper St. Clair, you are required to withhold local tax for Township residents.</b>
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<b>Do you <input type="checkbox"/> own or <input type="checkbox"/> rent your office space? If you own the property, please indicate the names and addresses of your tenants on a separate sheet.</b>
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<i>I certify that all information and statements herein are true, correct and complete</i> <b><u>SIGNATURE &amp; TITLE:</u></b>	<b><u>DATE:</u></b>
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**FOR TOWNSHIP USE ONLY:**

EIT  OPT  RE  SEWAGE  MERCANTILE  CD  OTHER

# REQUEST FOR REGISTRATION

## TAX INFORMATION FOR SELF-EMPLOYED INDIVIDUALS, BUSINESS OWNERS & EMPLOYERS

As you conduct business operations in the Township, please be advised of the various taxes that the Township collects from employers and businesses.

### **EMERGENCY AND MUNICIPAL SERVICES TAX** –

This is an annual \$52.00 tax paid by all employees, regardless of residency, who earned more than \$3,200.00 in income. [www.twp.org/finance/taxes/ems/index.htm](http://www.twp.org/finance/taxes/ems/index.htm)

### **EARNED INCOME AND NET PROFITS TAX** -

Earned Income and Net Profits Tax is a 1.3% (0.80% Township; 0.5% School District) tax on earned income and compensation (W-2 income from salaries or wages) and net profits from a business, profession, or farm (Federal Schedules C, E, F, and K-1 (1065) and other forms of earned income as defined by the Local Tax Enabling Act. [www.twp.org/finance/taxes/earned/index.htm](http://www.twp.org/finance/taxes/earned/index.htm)

### **MERCANTILE TAX** –

The School District levies and the Township collects the tax on gross wholesale and retail sales. The taxes are due by October 1, for the year ended June 30. Tax forms are mailed in July of each year. [www.twp.org/finance/taxes/mercantile/index.htm](http://www.twp.org/finance/taxes/mercantile/index.htm)

### **REAL ESTATE TAXES** –

These taxes, levied by the Township and the School District, are based on the assessed value of real property and a millage rate. The Township and School real estate tax statements are mailed annually. The Township statements are mailed May 1 and payments at discount are due by June 30. Payments at the face amount are due by August 31. Any unpaid taxes as of September 1 are subject to a 10% penalty. The School statements are mailed July 1 and payments at discount are due by August 31. Payments at the face value amount are due by October 31. The unpaid taxes as of November 1 are subject to a 10% penalty. [www.twp.org/finance/taxes/realestate.htm](http://www.twp.org/finance/taxes/realestate.htm)

### **OTHER REQUIREMENTS** –

The names, addresses and contact persons of any leased departments that operate within your facility or store. If you are a property owner, you are required to register your tenants annually and report any change of tenants monthly.

Please complete the attached registration form so that we can update our records. If you should have any questions regarding the tax collection procedures, please contact the Upper St. Clair Tax Office at 412-831-9000.