

**Corry Earned Income Tax**  
JOANNE M. SMITH, RECEIVER  
P.O. BOX 385

**Local Services Tax**  
JOANNE M. SMITH, RECEIVER  
100 S. CENTER STREET

# City of Corry

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## EMPLOYER - INCOME TAX REGISTRATION

A review of businesses in your area indicates that you may employ one or more persons. To comply with Act 511 of The Pennsylvania State Legislature (and the law in your local taxing district), you are required to answer the following questions. All information will be held in strict confidence.

**BUSINESS NAME:** \_\_\_\_\_

**FEDERAL EMPLOYER ID #:** \_\_\_\_\_

**NAME(S) OF THE OWNER(S):** \_\_\_\_\_

**PAYROLL CONTACT:** \_\_\_\_\_

**BUSINESS TELEPHONE #:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**MAILING ADDRESS WHERE ALL FORMS ARE TO BE SENT:**  
\_\_\_\_\_

**NUMBER OF EMPLOYEES: (Include both full and part-time)** \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

**DATE BUSINESS STARTED:** \_\_\_\_\_

I HEREBY CERTIFY THAT ALL INFORMATION AND STATEMENTS HEREIN ARE TRUE AND CORRECT.

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_