Appendix A: City of Philadelphia Tax Status and Clearance Statement

## CITY OF PHILADELPHIA TAX AND REGULATORY STATUS AND CLEARANCE STATEMENT

## FOR APPLICANTS

## THIS IS A CONFIDENTIAL TAX DOCUMENT NOT FOR PUBLIC DISCLOSURE

This form must be completed and returned with Applicant's proposal in order for Applicant to be eligible for award of a contract with the City. Failure to return this form will disqualify Applicant's proposal from further consideration by the Contracting Department. The City of Philadelphia, acting through its Department of Revenue and the Department of Licenses and Inspections, will utilize the information contained in the completed form to review the tax and Philadelphia Code compliance records of the person and/or entity identified below as part of the proposal evaluation process and will report their findings to the Contracting Department and the City's authorized investigatory agents. By signing the certification statement below as Applicant or an authorized representative of Applicant, you represent that Applicant is current and in compliance with, has made or intends to make satisfactory arrangements with the City to come into compliance with the tax and regulatory provisions of The Philadelphia Code.

|                            | Applicant Name   |   |                                       |                                  |                                   |                          |                    |
|----------------------------|--|---|---------------------------------------|----------------------------------|-----------------------------------|--------------------------|--------------------|
|                            | Contact Name and Title   |   |                                       |                                  |                                   |                          |                    |
|                            | Street Address   |   |                                       |                                  |                                   |                          |                    |
|                            | City, State, Zip Code  |   |                                       |                                  |                                   |                          |                    |
|                            | Phone Number   |   |                                       |                                  |                                   |                          |                    |
|                            | Federal Employers Identification Number or Social Security Number: |   |                                       |                                  |                                   |                          |                    |
|                            | Philadelphia Business Tax Account Number (if none, state "none")   |   |                                       |                                  |                                   |                          |                    |
|                            |  | usiness Privilege License Number f none, state "none")                                      |                                       |                                  |                                   |                          |                    |
|                            | (if none, state "none")  |   |                                       |                                  |                                   |                          |                    |
| rangei<br>ty (in<br>violat |  | pove has all required<br>ne current with respeaxes collected by the<br>y arrangements to cu | ect to the paymen<br>City on behalf o | t of City taxes of the School Di | or other indeb<br>strict of Phila | otedness o<br>adelphia), | wed to<br>and is 1 |