



2020

SPRINGFIELD TOWNSHIP CONTRACTOR'S BUSINESS
PRIVILEGE TAX RETURN

Date: _____

Name of Business: _____

Business Address: _____

Type of Business: _____

Name of True Owner(s): _____

Address of True Owner(s): _____

Phone No. of True Owner(s): _____

Location of Job: _____

Contract Price: _____

Rate: Contract Price X 3 mills (.003) = \$ _____ (Tax Due)

I declare under penalty of law that all statements made here are true, correct,
and complete to the best of my knowledge and belief

Signature _____

Official Title _____