



CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE

City of Philadelphia
e-file Signature Authorization

▶ Do not send to the City of Philadelphia.
▶ This is not a tax return. Keep this form for your records.

2025

Taxpayer's Name

SSN/EIN

Part I Tax Return Information – Tax Year Ending December 31, 2025 (Whole Dollars Only)

Business Income & Receipts Tax

1	Tax Due for the 2025 Business Income & Receipts Tax (Form 2025 BIRT, Line 5)	1	
2	MANDATORY 2026 BIRT Estimated Payment (Form 2025 BIRT, Line 6)	2	
3	Total Due by 4/15/2026 (Line 5 plus Line 6)	3	

Net Profits Tax

Total Due by 4/15/2026 (Form 2025 NPT, Line 11)	NPT	
---	-----	--

School Income Tax

Total Due by 4/15/2026 (Form 2025 SIT, Line 12)	SIT	
---	-----	--

Part II Taxpayer Declaration and Signature Authorization

Under penalties of perjury, I declare that I have examined a copy of my electronic tax return and accompanying schedules and statements for the tax year ending December 31, 2025, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the City of Philadelphia and to receive from the City of Philadelphia (a) an acknowledgement of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return. If applicable, I authorize the City of Philadelphia and its designated financial agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my City taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic tax return and, if applicable, my electronic funds withdrawal consent.

Taxpayer's Personal Identification Number (PIN): (check one box only)

- ☐ I authorize _____ to enter my PIN as my signature on my tax year 2025 electronically filed tax return.
- ☐ I will enter my PIN as my signature on my tax year 2025 electronically filed tax return.

Signature _____ Date _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication—Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

As a participant in the Practitioner PIN Program, I certify the above numeric entry is my PIN, which is my signature on the tax year 2025 electronically filed tax return for the taxpayer indicated above. I confirm I am participating in the Practitioner PIN Program in accordance with the requirements established for this program.

ERO's signature _____ Date _____

**ERO must retain this form and the supporting documents for 3 years.
DO NOT SUBMIT THIS FORM TO THE CITY OF PHILADELPHIA.**