

**MECHANICAL DEVICE TAX FORM**

**FEE DUE: December 31st**

FALLS TOWNSHIP  
 188 LINCOLN HIGHWAY, STE 100  
 FAIRLESS HILLS, PA 19030  
 215-949-9000

**APPLICATION AND INFORMATION SHEET**

Company (Location of machine)

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_



Vendor (If applicable)

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_

If you have any questions or need additional forms,  
 go to [www.FallsTwp.com](http://www.FallsTwp.com) or call 215-949-9000 ext. 234.

OFFICE USE ONLY

DESCRIPTION OF DEVICE	QUANTITY	SERIAL #/ MANUFACTURER	TAX DUE PER UNIT	RECEIPT #	STICKER #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Revised 09.24.21

\$ \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 TOTAL PAID DATE PAID

If no device taxed under this ordinance is existing on your premises or under your control at another location in Falls Township, please note on this form.  
 Then, sign this form and return it to Falls Township.

**MECHANICAL DEVICE TAX**

I, the undersigned, do hereby certify, that all the above information is true and complete.

\_\_\_\_\_  
 TOWNSHIP CODE INSPECTOR

- Amusement..... \$120 per unit
- Juke Box..... \$110 per unit
- Vending..... \$ 22 per unit
- News box..... \$ 15 per unit

\_\_\_\_\_  
 TAXPAYER SIGNATURE

DATE

DATE