

UF-1 2019

CFD

NON-RESIDENT SPORTS FACILITY

USAGE FEE

CITY OF PITTSBURGH

Rev 09/18

CITY ID	FEDERAL ID
FEE PERIOD	QUARTER

Due on or before

Amended Return	Return No Longer Needed
SIGNATURE _____	
TITLE _____ DATE _____	
PHONE _____	
E-MAIL ADDRESS _____	
PREPARER'S NAME _____	
PREPARER'S PHONE _____	
<small>I hereby certify, swear and aver that all statements herein are true and correct to the best of my knowledge and belief, being duly apprised of my duty under the law to submit honest and complete information or be subject to the penalties provided by law.</small> OMISSION OF THE ABOVE APPLICABLE INFORMATION CONSTITUTES AN INCOMPLETE RETURN	

Make name/address corrections above
USE BLACK INK ONLY ON THIS FORM

EVENT DATE(S): _____ **EVENT FACILITY:** _____

NUMBER OF EMPLOYEES FOR WHOM USAGE FEE IS BEING REMITTED: _____

ATTACH A LIST INCLUDING THE SOCIAL SECURITY NUMBER, NAME, ADDRESS, PITTSBURGH INCOME AND THE AMOUNT WITHHELD FOR EACH EMPLOYEE.

COMPENSATION ALLOCABLE TO PITTSBURGH IS ALL FORMS OF COMPENSATION BASED ON PROFITS OR OTHERWISE, EARNED BY A PERSON OR PERSONAL REPRESENTATIVE FOR SERVICES RENDERED IN A PUBLICLY FUNDED FACILITY.

1.	COMPENSATION ALLOCABLE TO PITTSBURGH	
2.	ADJUSTMENTS – attach explanation	
3.	COMPENSATION SUBJECT TO FEE – subtract Line 2 from Line 1	
4.	AMOUNT DUE – multiply Line 3 by 3% - (.03)	
5.	PENALTY – City penalty 1% per month or fraction thereof	
6.	TOTAL DUE – add Lines 4 & 5	
TOTAL REMITTANCE WITH THIS RETURN		
Make check payable to: TREASURER, CITY OF PITTSBURGH – DO NOT SEND CASH Mail to: USAGE FEE DUE – 414 GRANT ST RM 206 – PITTSBURGH PA 15219-2476 A \$30.00 fee will be assessed for any check returned from the bank for any reason.		

For assistance call 412-255-2962.

