BUSINESS PERMITS AND LICENSING OFFICE

Application Form for Business

Tax Year _____

BIN No. _____

Plate No. _____

☐New ☐Renewal ☐Additional

☐ Transfer ☐ Ownership ☐ Location

Amendment

☐ From Single to Partnership
☐ From Single to Corporation
☐ From Partnership to Single
☐ From Partnership to Corporation
☐ From Corporation to Single
☐ From Corporation to Partnership

Mode of Payment

☐ Annually
☐ Biannually
☐ Quarterly

Date of Application	DTI/SEC/CDA Registration No.
Reference No.	DTI/SEC/CDA Date of Registration
Kind of Organization	TIN
Are you enjoying tax incentive from any Government Entity? ( ) yes ( ) no If yes, please specify the entity _____	

Name of Taxpayer

Last Name First Name Middle Name

Business Name		
Trade Name/Franchise		
Business Address	**Owner's Address**	
Tel. No./Email Address	Tel. No./Email Address	
Property Index Number (PIN)		
Business Area (in sqm)	**Total Number of Employees in Establishment:** *Male* *Female*	**Total Number of Employees Residing in the City:** *Male* *Female*
If Place of Business is Rented, please identify the following:	Monthly Rental	
Lessor's Name		
Lessor's Address	Tel. No./Mobile Phone No./Email Address	

Business Activity

Code	Line of Business	No. of Units	Capitalization *(for new business)*	Gross Sales / Receipts *(for renewal)*	
				Essential	Non-Essential

_____
Signature of Applicant over Printed Name

_____
Position/Title

For Corporation, only responsible person (President, Chief Accountant and Corporate Secretary) should sign the form. In case of Liaison Officer or any authorized representative, kindly present an authorization letter signed by the identified responsible person of the corporation.

VERIFICATION OF DOCUMENTS

Description	Office / Agency	Date Issued	VERIFIED BY:
Barangay Business Clearance	Barangay		
Locational Clearance	Zoning Administrator		
Sanitary / Health Clearance	City Health Office		
Occupancy Permit	Building Official		
Fire Safety Clearance	Bureau of Fire Protection		
Market Stall Clearance	Market Supervisor		
POSO Clearance	POSO Chief		
Others, please specify:			

RECOMMENDING APPROVAL:

ANTONIO A. VELICARIA JR.
Chief, BPLO

BY AUTHORITY OF THE CITY MAYOR:
APPROVED:

RUFINO RONALDO Z. SAN JUAN VI
City Administrator

Instructions:

1. Provide accurate information and print legibly to avoid delays. Incomplete application form will be returned to the applicant.
2. Ensure that all documents attached to this application form are complete and properly filled out.

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