



**UNIFIED APPLICATION FORM FOR BUSINESS PERMIT
RENEWAL APPLICATION**

	Payment
NEW	Annually
RENEWAL	Bi-Annually
ADDITIONAL	Quarterly

Date of Receipt _____

Tracking Number _____

Business ID Number _____

A. BUSINESS INFORMATION AND REGISTRATION

Please choose one Sole Proprietorship One Person Corporation Partnership Corporation Cooperative
 Male Female Male Female

DTI/SEC/CDA Registration Number: _____

Tax Identification Number (TIN): _____

Business Name: _____

Trade Name/Franchise (If applicable) _____

Main Office Address: House/Bldg No. _____ Name of Building _____ Lot No. _____ Block No. _____
 Street _____ Barangay _____ Subdivision _____
 City/Municipality _____ Province _____ Zip Code _____

Telephone No.: _____

Mobile No. _____

Email Address _____

(For Sole Proprietorship) Name of Owner:	Surname	Given Name	Middle Name	Suffix
(For Corporation/Cooperative / Partnerships) Name of President/Officer in Charge	Surname	Given Name	Middle Name	Suffix

For Corporation Filipino Foreign

B. BUSINESS OPERATION

Business Area (in sq. m.): _____ Total No. of employees in Establishment _____ No. of Employees _____ No. of Delivery Vehicles (if applicable) _____
 Total Floor Area (in sq. m.): _____ Male _____ Female _____ Residing within _____ Van/Truck _____ Motorcycle _____

Same as Main Office Address

Business Location Address: House/Bldg. No. _____ Name of Building _____ Lot No. _____ Block No. _____
 Street _____ Barangay _____ Subdivision _____
 City/Municipality _____ Province _____ Zip Code _____

Owned? Yes No If yes, Tax Declaration No. _____ or Property Identification No. _____

If no: Lessor's Name : _____ Contact Number: _____

Do you have tax incentives from any Government Entity? Yes (Please attach a copy of your certificate) No

Business Activity (Please check one): Main Office Brach Office Admin Office Only Warehouse Others Pls. Specify _____

Line of Business	Philippine Standard Industrial Code (If applicable)	Products/Services	No. of Units	Last Year's Gross Sales/Receipts

I DECLARE UNDER THE PENALTY OF PERJURY that all information in this application is true and correct based on my personal knowledge and authentic records submitted to the _____. Any false or misleading information supplied, or production of fake/falsified documents shall be grounds for appropriate legal action against me and automatically revokes the permit. I hereby agree that all personal data (as defined under the Data Privacy Law of 2012 and its implementing Rules and Regulations) and account transaction information or records with the City/Municipal Government may be processed, profiled or shared to requesting parties or for the purpose of any court, legal process, examination, inquiry and audit or investigation of any authority.

SIGNATURE OF APPLICANT/OWNER OVER PRINTED NAME

DESIGNATION/POSITION/TITLE



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 Male Female Male Female

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Street _____ Barangay _____ Subdivision _____
City/Municipality _____ Province _____ Zip Code _____

Telephone No.: _____ Mobile No. _____ Email Address _____

(For Sole Proprietorship) Surname _____ Given Name _____ Middle Name _____ Suffix _____
Name of Owner:

(For Corporation/Cooperative / Partnerships) Surname _____ Given Name _____ Middle Name _____ Suffix _____
Name of President/Officer in Charge

Birthday & Birthplace: _____ Nationality: _____ Religion: _____ Gender: _____ Civil Status: _____

For Corporation Filipino Foreign

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Street _____ Barangay _____ Subdivision _____
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Owned? Yes No If yes, Tax Declaration No. _____ or Property Identification No. _____

If no: Lessor's Name: _____ Contact Number: _____

Do you have tax incentives from any Government Entity? Yes (Please attach a copy of your certificate) No

Business Activity (Please check one): Main Office Brach Office Admin Office Only Warehouse Others Pls. Specify _____

Line of Business	Philippine Standard Industrial Code (If applicable)	Products/Services	No. of Units	Capitalization

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