



Date of Application:		DTI/SEC/CDA Reg. No.:		DTI/SEC/CDA Reg. Date:	
Kind of Ownership: <input type="checkbox"/> Single Proprietor <input type="checkbox"/> Partnership		<input type="checkbox"/> Stock Corp. <input type="checkbox"/> CDA Reg. COOP		<input type="checkbox"/> Non-Profit/Non-Stock Corp. <input type="checkbox"/> Non-CDA Reg. COOP	
<input type="checkbox"/> Corporation <input type="checkbox"/> Others _____					
Name of President/Treasurer of Corporation:			TIN:		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Corporation			Name of Accounting Firm Retained:		
Are you enjoying Tax Incentives from any Government Entity? <input type="checkbox"/> Yes <input type="checkbox"/> No Pls. specify the entity _____					
<b>Name of Applicant</b> <small>(Indicate name of company, if Corporation or Partnership)</small>		<u>Last Name</u>		<u>First Name</u>	
				<u>Middle Name</u>	
Name of Spouse:					
Corporate Name:					
Trade Name:					
Name of Representative/Manager:					
Tel. No. (Mobile):					
Email address:					
Business Address: (House No. & Street)			Owner's Home Address: (House No. & Street)		
Barangay:			Barangay:		

Business Area (in sq. m.)		Total no. of Employees		Do you have a privately owned warehouse? <input type="checkbox"/> Yes <input type="checkbox"/> No – Pls. indicate Location and Floor area (in sq. m.)	
Business Activity (Please check one): <input type="checkbox"/> Main Office <input type="checkbox"/> Branch Office <input type="checkbox"/> Admin Office Only <input type="checkbox"/> Warehouse <input type="checkbox"/> Others _____					
If the place of business is rented, pls. identify the following:		No. of employees residing in <b>Cag. de Oro</b> :		Do you have any Delivery Van/ Trucks? If yes, how many?	
Name of Lessor:					
Address of Lessor:					
Tel. No. of Lessor:		<b>REMARKS:</b>			
Amount of monthly rental:					

<b>BUSINESS ACTIVITY</b>		
Nature of Business	Number of Units/Branches	Capital

**I DECLARE UNDER PENALTY OF PERJURY** that all information in this application is true and correct based on my personal knowledge and authentic records submitted to the **Business Permits & Licensing Division**. 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 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**

**VERIFIED ONLINE VIA BCAS:**

OBO \_\_\_\_\_  CPDO \_\_\_\_\_  RCB \_\_\_\_\_  CITY TOURISM \_\_\_\_\_  VETERINARY \_\_\_\_\_  OTHERS \_\_\_\_\_

**RECOMMENDING APPROVAL:**

\_\_\_\_\_  
**City Treasurer**

\_\_\_\_\_  
**Business Permits & Licensing Division**

**SKETCH OF BUSINESS LOCATION (you may attach your Google Maps location sketch)**

**REQUIREMENTS FOR APPLICATION:**

For New Application	For Renewal of Business	For Change of Business Name	For Transfer of Location	For Transfer of Ownership
<p><b>Basic Requirements:</b></p> <p><input type="checkbox"/> Cert. Of Occupancy</p> <p><input type="checkbox"/> Contract of Lease (if applicant is renting)</p> <p><input type="checkbox"/> Art. Of Inc./SEC Reg. if applicable/ Secretary's Certificate/CDA</p> <p><input type="checkbox"/> DTI Registration</p> <p><input type="checkbox"/> Home Owner's Association Certificate (if inside subd.)</p>	<p><b>Basic Requirements:</b></p> <p><input type="checkbox"/> Latest Business Permit</p> <p><input type="checkbox"/> ITR/Audited Financial Statement</p>	<p><input type="checkbox"/> Letter Request</p> <p><input type="checkbox"/> Existing Business Permit</p> <p><input type="checkbox"/> DTI Registration or amended SEC Reg./Secretary's Certificate</p>	<p><input type="checkbox"/> Letter Request</p> <p><input type="checkbox"/> Existing Business Permit</p> <p><input type="checkbox"/> Location Sketch</p>	<p><b>PLEASE PROCEED TO TAX MAPPING DIVISION</b></p>
<p><input type="checkbox"/> <i>Additional Requirements (To be submitted within the year)</i></p> <p>Depends on the Nature of Business:</p> <p>BFP (FSIC), DOE cert., DOH-FDA, CITY VET., RCB, BSP, etc.</p>		<p><input type="checkbox"/> Amendment fee ₱150</p>	<p><input type="checkbox"/> Amendment fee ₱150</p>	