

## APPLICATION FORM FOR BUSINESS PERMIT

TAX YEAR 2021

CITY/MUNICIPALITY OF UBAY

**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 form (if any) are complete and properly filled out.

**I. APPLICANT SECTION****1. BASIC INFORMATION**
 New  Renewal **Mode of payment**  Annually  Semi Annually  Quarterly
**Date of Application:** DTI/SEC/CDA Registration No.:

TIN No.: DTI/SEC/CDA # Date of Registration:

**Type of Business :**  Single  Partnership  Corporation  Cooperative

**Amendment : From**  Single  Partnership  Corporation

**To**  Single  Partnership  Corporation

 are you enjoying tax incentive from any Government Entity ?  Yes  No Please specify the entity ?
**Name of Taxpayer /Registrant**
**Last Name :** **First Name :** **Middle Name :**
**Business Name :** **Address:****Trade Name / Franchise :****2. OTHER INFORMATION****Note : For renewal applications, do not fill up this section unless certain information have changed.****Business Address :****Postal Code :** **Email Address :****Telephone No.:** **Mobile No.:****Owner's Address :****Postal Code :** **Email Address :****Telephone No.:** **Mobile No.:****In case of emergency, provide name of contact person:****Telephone / Mobile No.:** **Email Address :**
**Business Area (in sq.m.):** **Total No. of Employees in Establishment :** **No. of Employees Residing within LGU:**
**Note: Fill up Only if Business Place is Rented****Lessor's Full Name :****Lessor's Full Address :****Lessor's Full Telephone /Mobile No.:****Lessor's Email Address:****Monthly Rental:****3. BUSINESS ACTIVITY**

Line of Business	No. of Units	Capitalization (for new Business)	Gross/Sales Receipts (for Renewal)		
			Banking/Finance	Essential	Non-Essential

I DECLARE UNDER PENALTY OF PERJURY that the foregoing information are true based on my personal knowledge and authentic records. Further, I agree to comply with the regulatory requirements and other deficiencies within 30 days from release of the business permit.

SIGNATURE OF APPLICANT/TAXPAYER OVER PRINTED NAME

POSITION /TITLE