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APPLICATION FORM FOR BUSINESS PERMIT

Date Time in Time out 2023 **TAX YEAR** Assessment **PILAR** CITY/ MUNICIPALITY **Payment** Release **INTRODUCTION:** CTC NO.: **DATE ISSUED:** 1. Provide accurate information and print legibly to avoid delays. Incomplete AMOUNT: 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. **ISSUED AT:** . 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 Expiry Date: Type of Business: Single Partnership Corporation Cooperative Amendments: Single Partnership from: Corporation Corporation to: Single Partnership No please specify entity? Are you enjoying Tax Incentive from any Government Entity? Yes Name Of Taxpayers / Registrant: First Name: Last Name: Middle Name: **Business Name:** Trade Name/Franchise: 2. OTHER INFORMATION **Business Address: Email Address** Postal Code: Mobile No. Telephone No. Owners Address: Postal Code: **Email Address** Telephone No. Mobile No. In case of emergency, provide name of contact person: Telephone/Mobile No. **Email Address** Total No. of Employees in Establishment: Business Area (in sq m.): No. of Employees Residing within 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 Capitalization Gross/Sales Receipts (for Renewal) Line of Business No. of Units Non-Essential for New Business 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 deficiency within 30 days from release of the business permit.

SIGNATURE OF APPLICANT/TAX PAYERS OVER	PRINTED NAME

POSITION/TITLE

(Page 2 of 2) Application Form for Business Permit II. LGU SECTION (Do Not Fill Up This Section)						
1. VERIFICATION OF DOCUMENTS						
Description	Office/Agency		Yes	No	Not Needed	
Occupancy Permit (For New)	Office of The Building Office	rial	163	140	Not Needed	
Barangay Clearance (For Renew)						
Sanitary Permit/Health Clearance	Barangay Municipal Health Office					
Environmental Compliance Certificate	·					
•	Community Environment and Natural Resources Office Office of the Municipal Market Administrator					
Market Clearance (For Stall Holders)		t Administrator				
Valid Fire Safety Inspection Certificate	Bureau of Fire Protection					
	Verified by: BPLO					
2. ASSESSMENT OF APPLICABLE FEES		_		1		
Local Taxes	Amount Due	Penalty/Surcha	arge		Total	
Gross Sales Tax/Business Tax						
Mayor's Permit Fee						
Sanitary Inspection Fee						
Garbage Fee						
•						
Business Establishment Permit (B.E.P)						
Liquor Fee						
Tobacco Fee						
ax on Signboard/Billboards					<u></u>	
Occupational Tax						
Permit Fee for the Conduct of Group Activities	†					
Permit Fee for Agricultural Machinery and other Heavy Equipment						
	+					
Permit Fee on Pedalled Cart						
Permit Fee on Videoke / Billiard						
Permit Fee on Mobile						
Storage and Sale of Combustible/Flamable or Explosive Substance						
25% Surcharge						
Penalty						
Others						
TOTAL FEES for LGU						
FIRE SAFETY INSPECTION FEE (15%)						
Assessed by: FO2 Roselyn D Mangawang	FSIF Assessme	nt Approved by: F	O3 Sai	dee V	Book	
III. CITY/MUNICIPALITY FIRE STATION SECTION		DAT	E			
APPLICATION NO.: (TO BE FILLED UP BY APPLICANT/OWNER						
Name of Applicant or Owner:						
Name of Business:						
Total Floor Area:						
Address of Establishment						
Address of Establishinetif						
Signature of Applicant/Owner	_					
Certified by: FO3 Saidee V Book		-				
Customer Relations Officer / Collecting Agent		FIRE SAFETY INSP	PECTIO	N		
Time and Date Received:	FEE ASSESSMEN					
Important Notice: As per section 12 implementing rules and regulation earthquake, and explosion hazard insurance companies, and vendors additional charges and fees other than the Fire Safety Inspection Fee communicated by representatives of the Bureau of Fire Protection (B	s of fire fighting equipment, s. These shall be collected d	appliances and device	es) may	y be req	uired to pay	