



# UNIFIED APPLICATION FORM FOR BUSINESS PERMIT

## Payment

- NEW
- RENEWAL
- ADDITIONAL

- Annually
- Bi-annually
- 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 Corporations / 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. \_\_\_\_\_

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  Branch Office  Admin Office Only  Warehouse  Others Pls. Specify \_\_\_\_\_

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

I DECLARE UNDER PENALTY OF PERJURY that all information in this application are true and correct based on my personal knowledge and authentic records submitted to the MUNICIPALITY OF TAYTAY RIZAL. 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 Municipal Government may be processed, profiled or shared to requesting parties or for the purpose of any court, legal process, examinations, inquiry and audit or investigation of any authority.

\_\_\_\_\_  
SIGNATURE OF APPLICANT / OWNER OVER PRINTED NAME

\_\_\_\_\_  
DESIGNATION / POSITION / TITLE