



APPLICATION FORM FOR BUSINESS PERMIT

Municipality of Bauang



Tax Year: _____

<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Additional <input checked="" type="checkbox"/> Transfer <input type="checkbox"/> Ownership <input type="checkbox"/> Location	<input checked="" type="checkbox"/> Amendment <input type="checkbox"/> From Single to Partnership <input type="checkbox"/> From Single to Corporation <input type="checkbox"/> From Partnership to Single <input type="checkbox"/> From Partnership to Corporation <input type="checkbox"/> From Corporation to Single <input type="checkbox"/> From Corporation to Partnership	<input checked="" type="checkbox"/> Mode of Payment <input type="checkbox"/> Annually <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Quarterly
---	--	--

Date of Application	Month	Day	Year	DTI/SEC/CDA Registration No.
---------------------	-------	-----	------	------------------------------

Reference No.	DTI/SEC/CDA Date of Registration
---------------	----------------------------------

Type of Organization <input type="checkbox"/> Single <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Cooperative	CTC No.	TIN
--	---------	-----

Are you enjoying tax incentive from any Government entity? () Yes () No . If YES, please specify the entity _____

Name of Taxpayer

Last Name	First Name	Middle Name
-----------	------------	-------------

Business Name	<input type="checkbox"/> MALE AGE <input style="width: 20px;" type="text"/>	<input type="checkbox"/> FEMALE
---------------	--	---------------------------------

Trade Name/Franchise _____

Name of President/Treasurer of Corporation	Telephone No.
--	---------------

Last Name	First Name	Middle Name
-----------	------------	-------------

Business Address	Owner's Address
------------------	-----------------

House No./Building No.	House No./Building No.
------------------------	------------------------

Building Name	Building Name
---------------	---------------

Unit No.	Unit No.
----------	----------

Street	Street
--------	--------

Barangay	Barangay
----------	----------

Subdivision	Subdivision
-------------	-------------

City/Municipality	City/Municipality
-------------------	-------------------

Province	Province
----------	----------

Tel. No.	CP No.	Tel. No.	CP No.
----------	--------	----------	--------

Email Address	Email Address
---------------	---------------

Property Index Number (PIN) _____

Business Area (in sq. m.)	Total No. Employees in Establishment	No. of Employees Residing in LGU
---------------------------	--------------------------------------	----------------------------------

If place of Business is Rented, please identify the following: Lessor's Name

Last Name	First Name	Middle Name	Monthly Rental
-----------	------------	-------------	-----------------------

Lessor's Address

House No./Building No.	Subdivision
------------------------	-------------

Street	City/Municipality
--------	-------------------

Barangay	Province
----------	----------

Telephone No.	Email Address
---------------	---------------

In case of Emergency	Contact Person/Tel. No./Mobile Phone No./Email Address:
----------------------	---

Business Activity

Classification:	Gross Sales/Receipts (for Renewal)
------------------------	------------------------------------

Code	Line of Business	No. of Units	Capitalization (for New Business)	Essential	Non Essential

Oath of Undertaking:
I undertake to comply with the regulatory requirement and other deficiencies within 30 days from release of business permit.

SIGNATURE OF APPLICANT OVER PRINTED NAME	Position/Title
--	----------------

Annex I : Application for Business

ASSESSMENT					
LOCAL TAXES	REFERENCE	AMOUNT DUE	PENALTY/SURCHARGE	TOTAL	ASSESSED BY
Gross Sale Tax					
Tax on Delivery Vans/Trucks					
Tax on Storage for combustible/Flammable of explosive substances					
Tax on Signboard/Billboards					
REGULATORY FEES AND CHARGES					
Mayors Permit Fee					
Garbage Fee					
Delivery Trucks/Vans Permit Fee					
Sanitary/Inspection Fee					
Building Inspection Fee					
Electrical Inspection Fee					
Mechanical Inspection Fee					
Plumbing Inspection Fee					
Signboard/Billboard Renewal Fee					
Signboard/Billboard Permit Fee					
Storage and Sale of Combustible/Flammable or Explosive Substances					
Others					

VERIFICATION DOCUMENTS				
Description	Office/Agency	REF NO.	Date Issued	Verified By BPLO Staff
() DTI/CDA/SEC Registration	DTI/CDA/SEC			
() Barangay Business Clearance	Barangay			
() Zoning Clearance	MPDC			
() Sanitary/Health Permit	Municipal Health Office			
() Annual Inspection/Occupancy Permit	Engineering Office			
() Environmental Briefing	MENRO			
() Tax Declaration	Municipal Assessor's Office			
() RPT Clearance	Municipal Treasurer's Office			
() Fire Safety Inspection Certificate	Bureau of Fire			
() Market Clearance	<i>Economic Enterprise (MARKET) For Market Establishments</i>			
() BTC Certification	Bauang Tourism Council (BTC)			
	<i>Others applicable requirements pursuant to LOCAL/NATIONAL Laws</i>			
FDA Certification for Bakery and Drugstore Establishments				
Provincial Tax Clearance for Computer shops, Video Shops, Concrete Products and Sand & Gravel				
DOST/DOH Operation Permit, Chemical Analysis & Bacteriological Test for Water Refilling Establishments				
BAI for Agricultural & Meat Products				

Reviewed by:

Recommending Approval:

VIOLETA B. ABENOJA
Municipal Treasurer

VOLTAIRE Q. MALLARE
Licensing Officer I

Instructions: 1. Provide accurate information and print legibly to avoid delays. Incomplete application form shall be returned to the applicant.
2. Ensure that all documents attached to this application form are complete.

Bus. Permit No.	
O.R. No. & Date	

CONTACT NUMBERS (072) LICENSING DIVISION: 072-7100021 TREASURY: 607-2911 MPDC: 607-7526 ENGINEERING: 607-7087 MENRO: 705-3893 MHO(RHU): 607-3809 ASSESSOR: 682-2761 PNP: 705-3754 DTI LA UNION: 888-2455

Date Released	
---------------	--