

Annex 3
TEMPLATE UNIFIED APPLICATION FORM FOR RENEWAL OF BUSINESS PERMIT (ONLINE)²⁴

	Payment			Date of Receipt _____
NEW	Annually			Tracking Number _____
RENEWAL	Bi-annually			Business ID Number _____
ADDITIONAL	Quarterly			
C. BUSINESS INFORMATION AND REGISTRATION				
Please choose one <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> One Person Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Cooperative				
		<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Male <input type="checkbox"/> 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: <input type="checkbox"/> Filipino <input type="checkbox"/> Foreign				
D. BUSINESS OPERATION				
Business Area (in sq.m): _____		Total No. of Employees in Establishment _____		No. of Employees _____
Total Floor Area (in sq.m): _____		<input type="checkbox"/> Male <input type="checkbox"/> Female		Residing within _____
				No. of Delivery Vehicles (If applicable) _____
				Van/Truck _____ Motorcycle _____
Business Office Address: _____				
Business Area Address: House /Bldg. No. _____ Name of Building _____ Lot No. _____ Block No. _____				
Street _____		Barangay _____		Subdivision _____
City/Municipality _____		Province _____		Zip Code _____
Owned? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Tax Declaration No. _____ or Agency Identification No. _____				
Do you have tax incentives from any Government Entity? <input type="checkbox"/> Yes (Please attach a copy of your certificate) <input type="checkbox"/> No				
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 Pls. Specify _____				
Line of Business	Philippine Standard Industrial Code (If Available)	Products/Services	No. of Units	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 _____ Any false or misleading information supplied, or production of fake/falsified documents shall be grounds for appropriate legal action against me and automatically revokes this 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 <u>City/Municipal</u> 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				

²⁴ Items highlighted in yellow can be pre-populated based on the information provided by the applicant during the process of new permit application.