



Republic of the Philippines
Province of Eastern Samar
Municipality of Guiuan
BUSINESS PERMITS AND LICENSING OFFICE
Office of the Municipal Mayor
APPLICATION FORM FOR BUSINESS PERMIT
For Tax Year 202__

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. APPLICATION SECTION

1. BASIC INFORMATION

New Renewal Mode of Payment: Annually Semi-Annually Quarterly

Date of Application: DTI/SEC/CDA/DOLE Registration No.:

T.I.N.: 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. Please Specify the entity.
No

NAME OF TAXPAYER / REGISTRANT

Last Name: First Name: Middle Name:

Registered Name (For Juridical Person):

Business Name:

Trade Name / Franchise:

2. OTHER INFORMATION

(Note: For renewal application, do not fill 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 Emp. in Establishment: No. of Emp. Residing in Guiuan

Note: Fill up only if Business Place is Rented:

Lessor's Full Name:

Lessor's Full Address:

Lessor's Full Tel/Cell No.: Email Add: Monthly Rental:

3. BUSINESS ACTIVITY

| Line of Business | No. of Units | Capitalization (for New Business) | Gross Sales/Receipts (for renewal) | |
|------------------|--------------|--------------------------------------|------------------------------------|---------------------|
| | | | Essential Comm. | Non-Essential Comm. |
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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 requirement and other deficiencies within 30 days from release of the business permit.

Signature of Applicant/Taxpayer over printed name

Position/Title

Date of Birth