		APPLICA	ATION FORI TAX YEA CITY OF N	R : 2017	IESS PERMIT				
INSTRUCTIONS:			0	IIALULUU					
Provide accurate inform     to the applicant				•	be returned				
2. Ensure that all documer  I. APPLICANT SECTION	its attached to this	s form (if any) are o	complete and pro	perly filled out.					
1. BASIC INFO	RMATION								
■ New ■ Renew	val	Mode of P	Payment :	☐ Annually	/ Semi-Annually	v -	Quart	orly	
Date of Application:			ayment.	Annually	DTI/SEC/CDA Registr		Quart	SITY	
TIN No.					DTI/SEC/CDA Registr				
Type of Business:	Single	Partne	rship	Corporation	Cooperativ				
Amendment: From	Single	Partne		Corporation		-			
То	Single	Partne		Corporation					
Are you enjoying tax incention	ve from any Gov	vernment Entity		Yes    The second Position of the second Posi	No Please speci	fy the entity?			
	1	=:	name of 18	axpayer/ Registr	ant				
Last Name:	st Name: First Name:				Middle Name:				
Business Name:									
Trade name/ Franchise:									
2. OTHER INFO									
Note: For real Business Adress:	<u>newal applicati</u>	i <u>ons, d</u> o not fill u	up this section	unless certain i	information have chang	ged.			
Busilless Auress.									
Postal Code:					Email Address:				
Telephone No.:					Mobile No:				
Owner's Address:									
Postal Code:					Email Address:				
Telephone No.:					Mobile No:				
In case of emergency, provi	de name of con	itact person:							
Telephone/ Mobile No:	Email Address:								
Business Area (in sq m.): Total No.of Employees in Est					ablishment: No.of Employees Residing within LGU:				
Note: Fill Up Only If Busin	ess Place is Re	ented							
Lessor's Full Name: Lessor's Full Address:									
Lessor's Full Telephone/Mol	bile No.:								
Lessor's Email Address:									
Monthly Rental:									
3. BUSINESS ACT	VITY		Canita	limatia n	Cross/9	Calan Bassint	o (For Bon	nowal)	
Line of Business	No.of Units		Capitalization (For New Business)		Essentia		es Receipts (For Renewal)  Non-Essential		
					Loscitie	A1	1401	I-L33CHtlai	
I DECLARE UNDER PENAI and authentic records. Furth from release of business pe	ner, I agree to co					_			
		S	SIGNATURE C		/TAXPAYER OVER PF	RINTED NAMI —	E		
A 11 11 5 6 5 1				F 0 3 1 1					
Application Form for Busi II. LGU SECTION ( Do No		Section)							
1. VERIFICATION OF DO	•	<u>Jection</u>							
Description			Office Agency			Yes	No	Not Needed	
Occupancy Permit (For New)			Office of the Building Official						
Barangay Clearance (For Renewal)			Barangay						
Sanitary Permit/Health Clearance			City Health Office						
City Environmental Certificate  Market Clearance (For Stall Holders)			Bulacan Environmental and Natural Resources Office Malolos Public Market			?		+	
Valid Fire Safety Inspection Certificate			Bureau of Fire Protection					-	
Customer Feedback: Kam					sagot.				
Lubos na nasiyahan	Nasiyahan	n 😑 Nakunte	ento 😞	Di Nasiyahan	Lubos na nadisr	maya			

Komentaryo / Mungkahi: Verified by: BPLO "Every risk is worth taking as long as it's for a good cause, and contributes to a good life"