



REPUBLIC OF THE PHILIPPINES  
**CITY OF CALOOCAN**  
BUSINESS PERMITS AND LICENSING OFFICE  
Tel Nos. 8336-56-92 / 8288-88-11 Local 2248/2217  
bplo@caloocancity.gov.ph



**APPLICATION FORM FOR BUSINESS PERMIT (RENEWAL)**

Mode of Payment: ☐ Annually ☐ Semi-Annually ☐ Quarterly

Tax Year: \_\_\_\_\_

**To be filled-up by BPLO:**

Date of receipt: \_\_\_\_\_

Tracking Number: \_\_\_\_\_

BIN: \_\_\_\_\_

<b>A. BUSINESS INFORMATION</b>				
Form of Organization: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> One Person Corporation <input type="checkbox"/> Cooperative				
Business Name: _____				
Trade Name /Franchise: _____				
Contact Person: _____	Tel./Mobile No.: _____		Email Address: _____	
(For Sole Proprietorship) or (For Corporations/Partnerships/Cooperatives) Name of Owner / President/Officer in Charge:	Surname	Given Name	Middle Name	Last Name
Total Floor Area (in sq.m.): _____	Total No. of Employees in Establishment: _____		No. of Employees Residing within LGU: _____	No. of Delivery Vehicles: _____
	Male: _____	Female: _____		
Business Address: House/Bldg. No. _____ Name of Building _____ Block No. _____ Lot No. _____ Street _____ Barangay _____ Subdivision _____ City/Municipality _____ Province _____ ZIP Code _____				
Line of Business: _____				
Amendment:	Business Area:	From _____	To _____	
	No. of Employees:	From _____	To _____	
	Business Line:	From _____	To _____	
Additional Line of Business: _____				

I, \_\_\_\_\_ of legal age, proprietor/duly authorized representative of \_\_\_\_\_ (business name), with business address at \_\_\_\_\_, Caloocan City, and with Business Identity Number \_\_\_\_\_ hereby declares:

1. That the Quarterly Gross Sales/Receipt as per BIR Quarterly VAT Returns are as follows:

1<sup>st</sup> Quarter \_\_\_\_\_

2<sup>nd</sup> Quarter \_\_\_\_\_

3<sup>rd</sup> Quarter \_\_\_\_\_

2. That the Monthly Gross Sales/Receipt as per BIR Monthly VAT Returns are as follows:

October \_\_\_\_\_

November \_\_\_\_\_

December \_\_\_\_\_

(A Certified True Copy of the Quarterly VAT and Monthly VAT must be attached hereto which forms as integral part hereof)

3. That the **TOTAL GROSS SALES** is in the amount of PhP \_\_\_\_\_,

4. That I attest to the truth of the foregoing statements and I have hereunto affixed my signature this \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Declarant

\_\_\_\_\_  
Position