

UNIFIED APPLICATION FORM FOR NEW BUSINESS PERMIT

		Payment			
✓	NEW	✓	Annually	Date of Receipt	
	RENEWAL		Bi-annually	Tracking Number	
	ADDITIONAL		Quarterly	Business ID Number	
				RBPA-045602000-2023-02-000019	
				D-045602-00019	

A. BUSINESS INFORMATION AND REGISTRATION

Please choose one ☒ Single Proprietorship ☐ One Person Corporation ☐ Partnership ☐ Corporation ☐ Cooperative

☒ Male ☐ Female ☐ Male ☐ Female

DTI/SEC/CDA Registration Number: **FOR REGISTRATION**

Tax Identification Number (TIN): **000-000-000-00000**

Business Name: **JOHNY SEAWEADS BUY AND SELL**

Trade Name/Franchise (If applicable):

Main Office Address: House/Bldg No. _____ Name of Buidling _____ Lot No. _____ Block No. _____

Street No. _____ Barangay **VILLAMANZANO NORTE** Subdivision **TIAGA**

City/Municipality **PEREZ** Province **QUEZON** Zip Code **4334**

Telephone No.: - Mobile No.: **09124081586** Email Address: **alberto.deleon@gmail.com**

(For Sole Proprietorship) Name of Owner	Surname DE LEON	Given Name ALBERTO	Middle Name MANLOGON	Suffix
(For Corporations/Cooperative/ Partnerships) Name of President/Officer in Charge:	Surname	Given Name	Middle Name	Suffix

For Corporation: ☐ Filipino ☐ Foreign

B. BUSINESS OPERATION

Business Area (in sq. m) **20.00** Total No. of Employees in Establishment No. of Employees No. of Delivery Vehicles (If applicable)

Total Floor Area (in sq. m) _____ 0 _____ Male _____ 0 _____ Female Residing within _____ 0 _____ Van/Truck _____ Motorcycle

☐ Same as Main Office Address

Business Location Address: House/Bldg No. _____ Name of Buidling _____ Lot No. _____ Block No. _____

Street No. _____ Barangay **VILLA NORTE** Subdivision **SITIO CENTRAL**

City/Municipality **ALABAT** Province **QUEZON** Zip Code **4333**

Owned? ☐ Yes ☒ No If Yes, Tax Declaration No. _____ or Property Identification No. _____

Total Capitalization (PH): **15,000.00**

Do you have tax incentives from any Government Entity? ☐ Yes (Please attach a copy of your certificate) ☒ No

Business Activity (Please check one): ☒ Main Office ☐ Branch Office ☐ Admin Office only ☐ Warehouse ☐ Others Pls. Specify

Line of Business	Philippine Standard Industrial Code (If Available)	Product/Services
GATHERING OF LAVER AND OTHER EDIBLE SEaweeds	021231	

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 **Municipality of Alabat**. Any false or misleading information supplied, or production of fake/falsified documents shall be grounds for appropriate legal action against me and automatically revokes the 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 City/Municipal 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.

DE LEON, ALBERTO MANLOGON

SIGNATURE OF APPLICANT/OWNER OVER PRINTED NAME

DESIGNATION/POSITION/TITLE