

# UNIFIED APPLICATION FORM FOR NEW BUSINESS PERMIT

		Payment					
<input checked="" type="checkbox"/>	NEW	<input checked="" type="checkbox"/>	Annually		Date of Receipt		
	RENEWAL		Bi-annually		Tracking Number	RBPA-045602000- 2023-02-000019	
	ADDITIONAL		Quarterly		Business ID Number	D-045602-00019	
<b>A. BUSINESS INFORMATION AND REGISTRATION</b>							
Please choose one <input checked="" type="checkbox"/> Single Proprietorship <input type="checkbox"/> One Person Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Cooperative <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Female							
DTI/SEC/CDA Registration Number: <b>FOR REGISTRATION</b>				Tax Identification Number (TIN): <b>000-000-000-0000</b>			
Business Name: <b>JOHNY SEAWEADS BUY AND SELL</b>							
Trade Name/Franchise (If applicable):							
Main Office Address: House/Bldg No. _____ Name of Building _____ Lot No. _____ Block No. _____ Street No. _____ Barangay <b>VILLAMANZANO NORTE</b> Subdivision <b>TIAGA</b> City/Municipality <b>PEREZ</b> Province <b>QUEZON</b> Zip Code <b>4334</b>							
Telephone No.: -		Mobile No.: <b>09124081586</b>		Email Address: <b>alberto.deleon@gmail.com</b>			
(For Sole Proprietorship) Name of Owner		Surname <b>DE LEON</b>		Given Name <b>ALBERTO</b>		Middle Name <b>MANLOGON</b>	
(For Corporations/Cooperative/ Partnerships) Name of President/Officer in Charge:		Surname		Given Name		Middle Name	
For Corporation: <input type="checkbox"/> Filipino <input type="checkbox"/> Foreign							
<b>B. BUSINESS OPERATION</b>							
Business Area (in sq. m) <b>20.00</b>		Total No. of Employees in Establishment Total Floor Area (in sq. m) _____ 0 Male _____ 0 Female		No. of Employees Residing within 0		No. of Delivery Vehicles (If applicable) Van/Truck _____ Motorcycle _____	
<input type="checkbox"/> Same as Main Office Address							
Business Location Address: House/Bldg No. _____ Name of Building _____ Lot No. _____ Block No. _____ Street No. _____ Barangay <b>VILLA NORTE</b> Subdivision <b>SITIO CENTRAL</b> City/Municipality <b>ALABAT</b> Province <b>QUEZON</b> Zip Code <b>4333</b>							
Owned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If Yes, Tax Declaration No. _____ or Property Identification No. _____							
Total Capitalization (PH):							
<b>15,000.00</b>							
Do you have tax incentives from any Government Entity? <input type="checkbox"/> Yes (Please attach a copy of your certificate) <input checked="" type="checkbox"/> No							
Business Activity (Please check one): <input checked="" 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)		Product/Services			
<b>GATHERING OF LAVER AND OTHER EDIBLE SEAWEEDS</b>		<b>021231</b>					
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 <b>Municipality of Alabat</b> . 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.							
<b>DE LEON, ALBERTO MANLOGON</b>							
<b>SIGNATURE OF APPLICANT/OWNER OVER PRINTED NAME</b>							
<b>DESIGNATION/POSITION/TITLE</b>							