

31 Relationship Date (MM/DD/YYYY)			32 Address Type <input type="checkbox"/> Residence <input type="checkbox"/> Place of Business <input type="checkbox"/> Employer Address		
33 Address Unit/Room/Floor/Building No. Building Name/Tower Lot/Block/Phase/House No. Street Name Subdivision/Village/Zone [Address Fields]			Barangay Town/District Municipality/City Province ZIP Code		
34 Preferred Contact Type <input type="checkbox"/> Landline Number <input type="checkbox"/> Fax Number <input type="checkbox"/> Mobile Number Email Address (required) [Contact Fields]					
Part V – Business Information					
35 Single Business Number/Philippine Business Number					
36 Primary/Secondary Industries (attach additional sheet/s, if necessary)					
Industry	Trade/Business Name			Regulatory Body	
Primary					
Secondary					
Industry	Business Registration Number	Business Registration Date (MM/DD/YYYY)	PSIC Code (To be filled out by BIR)		Line of Business
Primary					
Secondary					
37 Incentives Details					
37A Investment Promotion (e.g., PEZA, BOI)		37B Legal Basis (e.g., R.A., E.O.)		37C Incentive Granted (e.g., Exempt from IT, VAT, etc.)	
[Promotion Fields]		[Legal Basis Fields]		[Granted Fields]	
37D No. of Years	37E Incentive Start Date (MM/DD/YYYY)				37F Incentive End Date (MM/DD/YYYY)
38 Details of Registration/Accreditation					
38A Registration/Accreditation Number		38B Effectivity Date (MM/DD/YYYY) FROM [Date] TO [Date]			38C Date Issued (MM/DD/YYYY)
[Registration Number]		[Effectivity Date]			[Issued Date]
38D Registered Activity		38E Tax Regime (Regular, Special, Exempt)		38F Activity Start Date (MM/DD/YYYY)	38G Activity End Date (MM/DD/YYYY)
[Activity]		[Tax Regime]		[Start Date]	[End Date]
Part VI – Facility Details					
39 Facility Details (PP-Place of Production/Plant; SP-Storage Place; WH-Warehouse; SR-Showroom; GG-Garage; BT-Bus Terminal; RP-Real Property for Lease with No Sales Activity)					
39A Facility Code (To be filled out by BIR)		39B Facility Type <input checked="" type="checkbox"/> F <input type="checkbox"/> PP <input type="checkbox"/> SP <input type="checkbox"/> WH <input type="checkbox"/> SR <input type="checkbox"/> GG <input type="checkbox"/> BT <input type="checkbox"/> RP <input type="checkbox"/> Others (specify) [Text]			
39C Facility Address Unit/Room/Floor/Building No. Building Name/Tower Lot/Block/Phase/House No. Street Name Subdivision/Village/Zone Barangay Town/District Municipality/City Province ZIP Code					
Part VII – Tax Types					
40 Tax Types (this portion determines your tax liability/ies) (To be filled out by BIR)					
Form Type			ATC		
Income Tax			<input type="checkbox"/> Value-Added Tax		
<input type="checkbox"/> Individual Income Tax			<input type="checkbox"/> Excise Tax		
<input type="checkbox"/> Capital Gains – Real Property			<input type="checkbox"/> Alcohol Products		
<input type="checkbox"/> Capital Gains – Stocks			<input type="checkbox"/> Automobile & Non-Essential Goods		
Withholding Tax			<input type="checkbox"/> Cosmetic Procedures		
<input type="checkbox"/> Compensation			<input type="checkbox"/> Mineral Products		
<input type="checkbox"/> Expanded			<input type="checkbox"/> Petroleum Products		
<input type="checkbox"/> Final			<input type="checkbox"/> Sweetened Beverages		
<input type="checkbox"/> Fringe Benefits			<input type="checkbox"/> Tobacco Products		
<input type="checkbox"/> Value-Added Tax			<input type="checkbox"/> Tobacco Inspection & Monitoring Fees		
<input type="checkbox"/> Other Percentage Tax			<input type="checkbox"/> Vapor Products		
<input type="checkbox"/> ONETT not subject to CGT			Documentary Stamp Tax (DST)		
<input type="checkbox"/> Percentage Tax on Winnings & Prizes			<input type="checkbox"/> Regular		
<input type="checkbox"/> On Interest Paid on Deposits and Yield on Deposits/Substitutes			<input type="checkbox"/> One-Time Transactions (ONETT)		
Percentage Tax					
<input type="checkbox"/> Stocks			<input type="checkbox"/> Transfer Tax		
<input type="checkbox"/> Stocks-Initial Public Offering (IPO)			<input type="checkbox"/> Donor's Tax		
<input type="checkbox"/> Overseas Dispatch And Amusement Taxes			<input type="checkbox"/> Estate Tax		
<input type="checkbox"/> Under Special Laws			Miscellaneous Tax (specify)		
<input type="checkbox"/> Other Percentage Taxes under NIRC (specify)			Others (specify)		

Part VIII – Invoices**41 BIR Printed Invoices**

41A Do you intend to use BIR Printed Invoices?		41B Type	41C No. of Booklets	41D Serial Number
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> VAT <input type="checkbox"/> NON-VAT		Start End

42 Authority to Print Invoices

42A Printer's Name			
42B Printer's TIN		42C Printer's Accreditation Number	42D Date of Accreditation (MM/DD/YYYY)
-	-	-	-

42E Registered Address

Unit/Room/Floor/Building No.	Building Name/Tower	Lot/Block/Phase/House No.	Street Name	Subdivision/Village/Zone
Barangay	Town/District	Municipality/City	Province	ZIP Code

42F Contact Number (Landline/Cellphone No.)	42G Email Address

42H Manner of Invoices	<input type="checkbox"/> Bound	<input type="checkbox"/> Loose Leaf
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42I Description of Invoices (Attach additional sheet/s, if necessary)		TYPE		No. of Boxes/Booklets		No. of Sets per Box/Booklet	Serial No.		No. of Copies per Set
		VAT	Non-VAT	Loose	Bound		Start	End	

Part IX – For Employee with Two or More Employers (Multiple Employments) Within the Calendar Year

43 Type of Multiple Employments	<input type="checkbox"/> Successive Employments (With previous employer/s within the calendar year)	<input type="checkbox"/> Concurrent Employments (With two or more employers at the same time within the calendar year)
(If successive, enter previous employer/s; if concurrent, enter secondary employer/s) (Attach additional sheet/s, if necessary)		

43A Name of Employer	<input type="checkbox"/> Primary Employer	43B TIN of Employer

43C Name of Employer	<input type="checkbox"/> Primary Employer	43D TIN of Employer

Primary/Current Employer Information

44 Relationship Start Date (MM/DD/YYYY)	45 Contact Type	<input type="checkbox"/> Landline Number	<input type="checkbox"/> Fax Number	<input type="checkbox"/> Mobile Number	Email Address (required)

46 Declaration I declare, under the penalties of perjury, that this application has been made in good faith, verified by me and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under the authority thereof. Further, I give my consent to the processing of my information as contemplated under the *Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.	Receiving Office and Date of Receipt
_____ Taxpayer/Authorized Representative (Signature over Printed Name)	

Part X – Payment Order Form for New Business Registrant
(For BIR Payment Acceptance Only. Not to be filed in AABs)

BIR Form No. 0605 (Part of BIR Form No. 1901)	47 Taxpayer's Identification Number (TIN)		Branch Code	48 RDO Code	49 For the Year
	-	-	-		
50 Taxpayer's Name					

Payment Details (To be filled out by BIR-Revenue Collection Officer)

51 Date of Payment (MM/DD/YYYY)					
e ROR/ROR No.	ATC	Particulars			
52	MC200	BIR Printed Invoices			52A
53	Add: Penalties	Surcharge	Interest	Compromise	
	53A	53B	53C	53D	
54	Total Amount Payable (Sum of Items 52A and 53D)			54A	

Documentary Requirements:

SELF-EMPLOYED INDIVIDUALS

For Sole Proprietor/Professional/Professionals not regulated by the Professional Regulation Commission (PRC):

- 1. □ Any government-issued ID (e.g., PhilID/ePhilID, Passport, Driver's License/eDriver's License) that shows the name, address and birthdate of the applicant. In case the ID has no address, any proof of residence or business address; (1 photocopy) or

In case of the practice of profession regulated by PRC:

- Valid PRC ID and government ID showing address or proof of residence or business address. (1 photocopy)

Note: IDs shall be presented and should be readable, untampered and contains consistent information with the documents submitted upon application.

- 2. BIR Printed Invoices (BPI) (Available for sale at the New Business Registrant Counter); or
- Final clear sample of OWN Invoices. (1 original)
(Sample layout is also available at the New Business Registrant Counter)

Note: In case taxpayer-applicant will opt to print its own invoices, taxpayer-applicant should choose an Accredited Printer who will print the invoices.

FEES TO BE PAID

- 1. □ Payment of P30.00 Loose Stamp/s (DST) to be affixed on the Certificate of Registration.

Note: If the P30.00 loose DST was already paid online, the proof of payment (1 photocopy) shall be submitted.

- Procured printing cost of BPI, if opted to use.

Additional documents, if applicable:

- 1. If transacting through a Representative:
 - 1.1 Special Power of Attorney (SPA) executed by the taxpayer-applicant indicating specific transaction; [1 original for first submission, if authorized to more than one transaction, submit certified true copy (together with the original copy for presentation and validation only)]
 - 1.2 Any government-issued ID of the taxpayer and authorized representative; (1 photocopy, both with one specimen signature)
- 2. DTI Certificate (if with business name); (1 photocopy)
- 3. Work Visa (9g) for Foreign Nationals; (1 photocopy)
- 4. Service Contract showing the amount of income payment, for Job Order or Service Contract Agreement with NGAs, LGUs, GOCCs, GFIs; (1 photocopy)
- 5. Franchise Documents (e.g., Certificate of Public Convenience) (for Common Carrier); (1 photocopy)
- 6. Certificate of Authority, if Barangay Micro Business Enterprises (BMBe) registered entity; (1 photocopy)
- 7. Proof of Registration/Permit to Operate BOI/BOI-ARMM, PEZA, BCDA, TIEZA/TEZA, SBMA, etc. (1 photocopy)

ESTATE AND TRUST

For Estate with properties subject to Estate taxes or Estate under judicial settlement:

- 1. Death Certificate of the decedent; (1 photocopy)
- For Trust (irrevocable):
- 2. Irrevocable Trust Agreement; (1 photocopy)

Additional documents, if applicable:

- 1. If transacting through a Representative:
 - 1.1 Special Power of Attorney (SPA) executed by the taxpayer-applicant indicating specific transaction; [1 original for first submission, if authorized to more than one transaction, submit certified true copy (together with the original copy for presentation and validation only)]
 - 1.2 Any government-issued ID of the taxpayer/trustee/trustor in the trust agreement and authorized representative; (1 photocopy, both with one specimen signature)
- 2. If transacting through an Administrator or Executor or Heir:
 - 2.1 Document/s to prove as the administrator or executor or heir; (1 original)
 - 2.2 Any government-issued ID of the administrator or executor. (1 photocopy, both with one specimen signature)

BRANCH AND FACILITY

REGISTRATION OF BRANCH

- 1. BIR Printed Invoices (BPI) (Available for sale at the New Business Registrant Counter);
or
- Final clear sample of OWN Invoices. (1 original)
(Sample layout is also available at the New Business Registrant Counter)

Note: In case taxpayer-applicant will opt to print its own invoices, taxpayer-applicant should choose an Accredited Printer who will print the invoices.

FEES TO BE PAID

- 1. □ Payment of P30.00 Loose Stamp/s (DST) to be affixed on the Certificate of Registration.
- Note: If the P30.00 loose DST was already paid online, the proof of payment (1 photocopy) shall be submitted*
- Procured printing cost of BPI, if opted to use.

REGISTRATION OF FACILITY

- 1. BIR Form No. 1901. (2 originals)

ADDITIONAL DOCUMENTS FOR BRANCH/FACILITY, IF APPLICABLE:

- 1. If transacting through a Representative:
 - 1.1 Special Power of Attorney (SPA) executed by the taxpayer-applicant indicating specific transaction; [1 original for first submission, if authorized to more than one transaction, submit certified true copy (together with the original copy for presentation and validation only)]
 - 1.2 Any government-issued ID of the taxpayer and authorized representative; (1 photocopy, both with one specimen signature)
- 2. DTI Certificate (if with business name); (1 photocopy) (For Branch only)
- 3. Franchise Documents (e.g., Certificate of Public Convenience) (for Common Carrier); (1 photocopy) (for Branch only)
- 4. Franchise Agreement; (1 photocopy) (For Branch only)
- 5. Certificate of Authority, if Barangay Micro Business Enterprises (BMBe) registered entity; (1 photocopy) (For Branch only)
- 6. Proof of Registration/Permit to Operate BOI/BOI-ARMM, PEZA, BCDA, TIEZA/TEZA, SBMA, etc. (1 photocopy) (For Branch only)

POSSESSION OF MORE THAN ONE TAXPAYER IDENTIFICATION NUMBER (TIN) IS CRIMINALLY PUNISHABLE PURSUANT TO THE PROVISIONS OF THE NATIONAL INTERNAL REVENUE CODE OF 1997, AS AMENDED

For Voluntary Payment

Stamp of BIR Receiving Office
and Date of Receipt

I declare, under the penalties of perjury that this document has been made in good faith, verified by me and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under the authority thereof.

Signature over Printed Name of Taxpayer/Authorized Representative

Title/Position of Signatory