					ation Form f	or Business					
					YEAR NICIPALITY (OF ANAO					
		New		14101	JNICIPALITY OF ANAO Amendment: Mode of Paymen						
	Renewal				From Single to Partnership				Annually		
	Additional					From Single to Corporation				Bi-Annually	
						From Partnership to Single Qua					
		Transfer:			From Partnership to Corporation						
	Ownership					From Corporation to Single					
		Location			From Corporation to Partnership						
Date of App					DTI/SEC/CDA Registration No.:						
Reference N	No.:				DTI/SEC/CDA Date of Registration:						
Type of Organi	ization:□Sin	ngle □Partnership	□Corp. □Coop		CTC No. TIN:						
Are you enjo	ying tax inc	centive from any	Government	Entity? { } yes	{) no Pleas	se specify the	entity:				
Name of Ta	xpayer:										
Last Name:				First Name:				Middle Name			
Date of Birt	h:			Civil Status:				Citizenship:			
Business Na	me:							•			
Trade Name	e/Franchis	se:									
		Treasurer of Co	rnoration:								
Last Name:		Treasurer or co	poration.		First Namo					MI	
Last Name.		Decade and Addis			First Name: M.I.						
	511 21	Business Addr	ess		Owner's Address						
House No./					House No./Bldg. No.						
Building Na	me				Building Name						
Unit No.					Unit No.						
Street					Street						
Barangay					Barangay						
Subdivision					Subdivision						
Municipality					City/Municipality Zip Code:						
Province					Province						
Contact No.					Contact No.						
Email Address					Email Address						
Index Num					Email Addi						
Business Area				nployees of Esta			No. of Emplo	yees residing in LGU	: Monthly Re	antal·	
If Place of B	usiness is	Rented, please	e identify the	following: Le	essor's Nam	e			-	ziitai.	
First Name:				Middle Nam	ie:			M.I.			
Lessor's Ad	dress										
House No./	Bldg. No.				Subdivision	1					
Street					City/Municipality						
Barangay					Province						
Contact No.					Email Address:						
In case of e	mergency	<i>'</i> :	Contact Per	son/Tel. No.,	/Mobile Pho	ne No./emai	il address:				
Business Activity			Capitalization	Gross Sales / Receipts (for renewal)							
Code Line of Business		No. of Units	(for new business)	Essential			Non-Essential				
2000		Line of Dustilless				233011001		100	on Essericial		
								ļ			
I undert	take to co	mply with the I	regulatory re		ath of Under and other de	=	thin 30 days	s from release of	the busines.	s permit.	
SIGNATURE OF APPLICANT OVER PRINTED NAME					POSITION/TITLE						

		Application	Form for Business			
		Арр	lication No.			_
LOCAL TAXES	LOCAL TAXES			PENALTY/ SURCHARGE	TOTAL	ASSESSED BY
Gross Sales Tax						
Tax on Delivery Vans/Trucks						
Tax on Storage for Combustible/Flammable or Explos	sive Substances					
Fire Safety Inspection Certificate						
REGULATORY FEES AND CHARGES						
Mayor's Permit Fee						
Garbage Charges						
Delivery Trucks/Vans Permit Fee						
Sanitary Inspection Fee						
Health inspection Fee						
Weight and Measures Fee						
Calling/Occupation						
Building Inspection Fee						
Electrical Inspection Fee						
Mechanical Inspection Fee						
Plumbing Inspection Fee						
Signboard/Billboard Renewal Fee						
Signboard/Billboard Permit Fee						
Storage and Sale of Combustible/Flammable or Explo						
Others:						
		VERIFICATIO	N OF DOCUMENTS	5		
Description	Description Offic			Verified by: (BPLO Staff)		
Barangay Clearance						
Sanitary/Health Clearance						
Zoning Clearnce						
Occupancy Permit Bldg. Offi		icial				
Fire Safety Inspection Certificate	re Safety Inspection Certificate BFP					
Others:	PNP					
FERDINAND P. CLAR	CELIA S. IGNACIO					
Assessment Reviewed	Approval Recommended by:					
						•
Instructions:						
1. Provide accurate information and print	legibly to avoi	d delays. Incompl	ete application form	will be returned t	o the applicant.	
2. Ensure that all documents attached to	this applicatior	n form are comple	ete and properly filled	out.		

DATE AND TIME RECEIVED:

DATE AND TIME APPROVED:

DATE AND TIME RELEASED: