



UNIFIED APPLICATION FORM FOR **NEW** BUSINESS PERMIT (ONLINE)

NEW
 RENEWAL
 ADDITIONAL

Payment
 Annually
 Bi-annually
 Quarterly

Date of Receipt _____
Tracking Number _____
Business ID Number _____

A. BUSINESS INFORMATION AND REGISTRATION
Please choose one Sole Proprietorship One Person Corporation Partnership Corporation Cooperative
 Male Female Male Female

DTI/SEC/GDA Registration Number: _____ Tax Identification Number (TIN): _____

Business Name: _____

Trade Name / Franchise (If Applicable): _____

Main Office Address: House / Bldg No. _____ Name of Building _____ Lot No. _____ Block No. _____
Street _____ Barangay _____ Subdivision _____
City/Municipality _____ Province _____ Zip Code _____

Telephone No.: _____ Mobile No. _____ Email Address: _____

(For Sole Proprietorship) Name of Owner:	Surname	Given Name	Middle Name	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): _____ Total No. of Employees in Establishment _____ No. of Employees _____ No. of Delivery Vehicles (if applicable) _____
Total Floor Area (in sq.m): _____ Male _____ Female _____ Residing within _____ Van/Truck _____ Motorcycle _____

Same as Main Office Address
Business Location Address: House / Bldg. No. _____ Name of Building _____ Lot No. _____ Block No. _____
Street _____ Barangay _____ Subdivision _____
City/Municipality _____ Province _____ Zip Code _____

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

Total Capitalization (PH): _____

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)	Products / Services

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 TAYTAY RIZAL. 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 Municipal Government may be processed, profiled or shared to requesting parties or for the purpose of any court, legal process, examinations, inquiry and audit or investigation of any authority.

SIGNATURE OF APPLICANT / OWNER OVER PRINTED NAME

DESIGNATION / POSITION / TITLE