Republic of the Philippines
Office of the City Mayor
Permits and Licensing Division
City of Bacolod
Application Form for Business Permit
Year _____

INSTRUCTIONS:
1. Provide accurate information and print legibly to avoid delays. Incomplete application form will be returned to the applicant.
2. Ensure that all documents attached to this form (if any) are complete and properly filled out.

I. APPLICATION SECTION

1. BASIC INFORMATION

Business Status	Type of Business	Single		Mode of Payment
☐ New		Partnership		☐ Annually
☐ Renewal		Corporation. / Assn.		☐ Bi-Annually
☐ Additional		Cooperative		☐ Quarterly

Date of Application: _____   DTI/SEC/CDA Registration No.: _____

Application No.: _____   DTI/SEC/CDA Date of Registration: _____

Amendment: From ☐ Single   ☐ Partnership   ☐ Corporation
            To   ☐ Single   ☐ Partnership   ☐ Corporation

Are you enjoying tax incentive from any Government Entity?   Yes ☐   No ☐   Please specify

Name of Taxpayer/Registrant

Last Name:	First Name:	Middle Name:

Business Name:

Trade name/Franchise:

2. OTHER INFORMATION
Note: **For renewal applications**, do not fill up this section unless certain information have changed.

Business Address:

Postal Code:	Email Address:
Telephone No.:	Mobile No.:

Owner's Address:

Postal Code:	Email Address:
Telephone No.:	Mobile No.:

In case of emergency, provide name of contact person:

Telephone/Mobile No.:	Email Address:

Business Area (in sq.m.):	Total No. of Employees in Establishment:	Total No. of Employees Residing within LGU:
_____	_____	_____

Note: Fill Up Only If Business Place is Rented

Lessor's Full Name:

Lessor's Full Address:

Lessor's Full Telephone/Mobile No.:

Monthly rental:

3. BUSINESS ACTIVITY

Line of Business	No. of Units	Capitalization (for new Business)	Gross Sales/Receipts (for renewal)	
			Essential	Non-essential

I declare under the penalties of perjury that the foregoing information are true based on my personal knowledge and authentic records. Further, I agree to comply with the regulatory requirement and other deficiencies within 30 days from release of the business permit.

_____   _____
SIGNATURE OF APPLICANT/TAXPAYER OVER PRINTED NAME   POSITION/TITLE