



APPLICATION FOR AVAILMENT OF INCENTIVE

(CITY ORDINANCE NO. 323)

COVER SHEET

APPLICANT

NAME OF FIRM:

 OLD NEW

Address/ Location: _____

NAME OF OWNER/ PRESIDENT:

PROPOSED INVESTMENT AREA

APPLICATION

DATE OF APPLICATION

APPLICATION NUMBER

DATE ACCEPTED

FILING FEE

AMOUNT

OR NUMBER

ACTION ON APPLICATION *(To be filled up after Council decision)*

DENIAL APPROVAL RESOLUTION NUMBER DATE:

CERTIFICATE OF REGISTRATION

NO. DATE DATE DELIVERED

Approved Investment Area: _____

INCENTIVE: (to be based on council approval/resolution)



BACOLOD INVESTMENT INCENTIVE

DEPARTMENT OF LOCAL ECONOMIC DEVELOPMENT
AND INVESTMENT PROMOTIONS

BY:

NAME AND SIGNATURE

POSITION