

REPUBLIC OF THE PHILIPPINES

CITY OF SAN JOSE DEL MONTE, BULACAN

BUSINESS PERMITS & LICENSING OFFICE

APPLICATION FOR BUSINESS PERMIT & LICENSE FOR PARTNERSHIP & CORPORATION

	1								
MODE OF PAYMENT		STATUS		MISSION ORD	ER NO				
Annually	∐ New				DATE (MM/DD/YY)				
☐ Bi-Annually		☐ Renewal	Renewal (MM/DD/YY) ACCOUNT NUMBER:						
Pursuant to provisions of Sec. 117 of the 2012 San Jose del Monte City Revenue Code, Tax Ordinance No. C-011. I have the honor to apply for a business permit to operate my business and hereby submits the following:									
BUSINESS NAME / TRADE NAME									
TAXPAYER'S NAME		last name		first name middle name					
(Print Name of Partnership/ Corpor PRESIDENT	ration)				TREASURER				
		if within a blo	g specify stall, room	Street No. street name		Barangay			
BUSINESS LOCATION		ii waani u sa	g speeny stan, room	Sirect Ivo.					
(Indicate exact address)				LOT AND BLOC	L NO				
PROPERTY INDEX NO. AUTHORIZED REPRES			POSITION	I NO.	<u>. </u>				
(Name of Business Firm Official Sig			Official Capacity						
HOME ADDRESS OF REPRESENTATIVE		Street No.	Street No. Street Name		Barangay		City/Min.		
SEC DECISTRATION NUMBER					DATE ISSUED				
SEC REGISTRATION NUMBER DATE ISSUED									
TAXPAYER'S IDENTIFICATION NUMBER (TIN)									
TELEPHONE NUMBER	SECHIDITY	CURITY NUMBER (SSS)		EMAIL ADDRESS		NO. OF EMPLOYEES			
IF EWIFLOTER, EWIFLO			NUMBER (333)		IO THE BURNESS I				<u> </u>
IF BUSINESS ESTABLISHMENT IS RENTED	SINCE WHEN MONTHLY REN	ITAI			IS THE BUSINESS USING A SIGN BOARD		[] Yes		[] No
	FROM WHOM	VIAL			AREA OF SIGNBO	DARD	163		110
					IS THE BUSINESS USING A DELIVE		RY VAN		
	ADDRESS				MAKE OF VEHICLE			PLATE #	
		EXISTIN	G KIND OF BU	SINESS	MAYOR'S PERM	IT NO.	BUSINESS L	OCATION	
IF YOU HAVE OTHER E	2,001	EXISTING KIND OF BOOMESO				200200 2			
BUSINESS PERMIT / LICENSE									
KIND OR NATURE OF F	TIVITY APP	TY APPLIED		AREA	CAPITALIZATION		GROSS SALES/RECEIPTS		
KIND OR NATURE OF BUSINESS/ACTIVITY APPLIED (Indicate if Business is Additional or Principal & Specify Exact Nature)				(NO./QTY)	(SQ. MTS.)	(for new business)		(for renewal)	
, and the state of				(1100,411)	(0 4 0.)	· `	P		,
					<u>'</u>				
TOTALS					P				
Chauld the DDI O diseas	vers / finds on / false	haad (a) and/ar		(a) in this application	n 100/a agree to the in		annallation of th	a huainaaa narm	oit O license and
Should the BPLO discovers / finds any falsehood (s) and/or misrepresentation(s) in this application. I/We agree to the immediate cancellation of the business permit & license and or closure of the establishment without notice and hearing and shall not file any case of whatever kind to question the closure establishment and / or withdrawal / cancellation of the permit license. Should I, We violate any of the undertakings and/or commitments, I/We agree to pay a surcharge of twenty-five percent (25%) of the amount due and an interest of two percent									
(2%) per month of the unpaid taxes including surcharges until such amount is fully paid. THIS APPLICATION AND/OR BPLO PERMIT/LICENSE DOES NOT EXEMPT APPLICANT/PERMITTEE FROM COMPLYING WITH THE REQUIREMENTS AND OR SECURING THE PERMITS/LICENSES BY OTHER AGENCIES/AUTHORITIES REQUIRED BY EXISTING LAWS/ORDINANCES/RULES AND REGULATIONS AND HEREBY UNDERTAKE TO									
COMPLY THEREOF	THER ADENOIS	AOTHORITIES	NEQUINED BT E	AIGTING LAWG/OI	(DINAIVOES/NOLES AI	ND INEGO	LATIONS AND I	ILKEDI ONDE	INTAILE TO
I have read this form, preclude the existence of ot				-				-	
applicable laws.									
IN WITNESS WHEREOF, I/WE set my/our hand/s this day of,at									
DOCUMENTS CHECKED / VERIFIED: (To be filled up by the Personnel)									
REMARKS:					SIGNATURE OVER PRINTED NAME OF APPLICANT(S)				
					SUBSCRIBED AND SWORN to before me thisday of				
Signature over printed name					at				
ASSESSED BY: (To be filled up by the BPLO Personnel)					ACTION TAKEN/REMARKS:				
REMARKS:									
					CHIEF OF OFFICE				
Signature					BUSINESS PERMIT AND LICENSING OFFICE				