



CITY OF TANGUB
Tax Year 2024
**UNIFIED APPLICATION FORM FOR NEW OF
BUSINESS PERMIT**

		Payment					
	NEW	Annually				Date of Receipt	_____
	RENEWAL	Bi-annually				Tracking Number	_____
	ADDITIONAL	Quarterly				Business ID Number	_____

A. BUSINESS INFORMATION AND REGISTRATION				
Please choose one		Sole Proprietorship	One Person Corporation	
		Male Female	Partnership Male Female	
DTI/SEC/CDA 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 (insq.m):	Total No. of Employees in Establishment	No. of Employees	No. of Delivery Vehicles (if applicable)
Total Floor Area (insq.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			

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 _____. 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 City/Municipal Government may be processed, profiled or shared to requesting parties or for the purpose of any court, legal process, examination, inquiry and audit or investigation of any authority.

SIGNATURE OF APPLICANT/OWNER OVER PRINTED NAME

RUBY E. BACALING

City Administrator / BPLO