

APPLICATION FORM FOR BUSINESS PERMIT TAX YEAR _____ CITY OF ILAGAN, ISABELA

PLD-BP-001-0

	THE P		CITY OF ILA	GAN, ISAI	BELA						
INSTRUCTIONS:											
	formation an	d print l	egibly to avoid dela	ys. Incomp	lete applicat	ion form will be return	ned t	o the applicant			
2. Ensure that all docu											
I. APPLICANT SECTI	ON										
1. BASIC INFORM	MATION										
New Ren	New Renewal		Mode of Payment:		ually	Semi-Annually		Quarterly			
Date of Application:	ate of Application: DTI/SEC/CDA Registration No.:										
TIN No. :						A Registration Date. :					
Type of Business:	Single		Partnership	Corpor		Cooperative					
Amendment: From	Single		Partnership	Corpor	ation	·		,			
То	Single		Partnership	Corpor	ation						
Are you enjoying tax i		m any				lo Please speci	fy th	e entity?			
			Name of Taxp		gistrant	9					
Last Name:		Firs	st Name:			Middle Name:	:				
Business Name:											
Trade Name / Franch	nise:										
2. OTHER INFOR	RMATION										
Note: For ren	ewal applic	ation, o	lo not fill up this s	ection un	ess certain	informayion have c	hang	ged.			
Business Address:				V		-					
Postal Code:				Email Address:							
Telephone No. :				Mobile	No.:						
Owner's Address:											
Postal Code:			= -	Email Address:							
Telephone No. :	Mobile No. :										
In case of emergency, p		e of cont	act person:								
Telephone/Mobile No.		,		Email A							
Business Area (in sq m.):		Total N	No. of Employees in	Establishr	nent:	No. of Employed	No. of Employees Residing within LGU:				
Note: Fill Up Only If Bus	siness Place	is Rente	d								
Lessor's Full Name:											
Lessor's Full Address:											
Lessor's Full Telephone	/Mobile No.	:									
Lessor's Email Address:											
Monthly Rental:											
3. BUSINESS ACT	VITY										
Line of Business No. of U		Inits	nits Capitalizatio			Gross/Sales Receipts	iross/Sales Receipts (for Renewal)				
			(for New Bus	iness)		ssential		Non-Essential			
						-					
	-										
I DECLARE HAIDED DEMAN	TV OF BERMEN	V 4h 4l-	- favoralus lug				d a	hantia records			
I DECLARE UNDER PENAL Further, I agree to comply											
, artifer, ragice to willply	, with the leg	aiawiy (syan ement and othe	i denciencie	s within 30 d	ays from release of the	nasiii	ess beriine			

SIGNATURE OF APPLICANT/TAXPAYER OVER PRINTED NAME

POSITION/TITLE

ANNEX 1 (Page 2 of 2) Application Form	for Busine	ess Permit			PI	L D-BP- 001-0
II. LGU SECTION (Do not Fill Up This Sect	ion)					
1. VERIFICATION OF DOCUMENTS	,					
Description		Office/Agency	Yes	No	Not Needed	
Occupancy Permit (For New)	Office o	f the Building Official	1.00			
Barangay Clearance	Baranga					
Sanitary Permit/Health Clearance		olth Office				
City Environmental Certificate		ironment and Natural Reso				
Market Clearance (For Stall Holders)		f the City Market Administr				
Valid Fire Safety Inspection Certificate		of Fire Protection		-		
Zoning Clearance	_	nning and Development Of	-			
Police Clearance			-			
Police Clearance	Philippii	pine National Police Verified by: BPLO				
		_	verified by: i			
2. ASSESSMENT OF APPLICABLE FEES	+ (please	see attached Computerized	Tax Order of Payme	ent)		
Local Taxes	,,	Amount Due	Penalty/Surch			Total
Gross Sales Tax			,,			
Tax on Delivery Vans/Trucks						
Tax on Storage for Combustible/Flammable of	of					
Explosive Substance						
Tax on Signboard/Billboards						
REGULATORY FEES AND CHARGES						
Mayor's Permit Fee						
Garbage Charges						
Delivery Trucks/Vans Permit Fee						
Sanitary Inspection Fee					-	
Building Inspection Fee						
Electrical Inspection Fee						
Mechanical Inspection Fee Plumbing Inspection Fee						
Signboard/Billboard Renewal Fee					-	
Signboard/Billboard Renewal Fee						
Storage and Sale of Combustible/						
Flammable of Explosive Substance						
Others						
TOTAL FEES for LGU						
FIRE SAFETY INSPECTION FEI	E (10%)					
ASSESSED BY: CTO		FSIF Assessment Approved by: BFP				
III. CITY FIRE STATION SECTION						
			DATE:			
APPLICATION NO.: (TO BE FILLED UP BY APPLICANT/OWNER)	•					
Name of Applicant/Owner:						
Total Floor Area:	Contact	No.:				
Address of Establishment:						
Signature of Applicant/Owner						
Certified by:			FIRE SAFETY INS	PECTION		
Customer Relations Officer			FEE ASSESSMEN	IT:		

Important Notice: As per Section 12 of the implementing Rules and Regulations of the Fire Code of 2008, certain establishments (e.g. building lessors, fire, earthquake and explosion hazard insurance companies, and vendors of firefighting equipment, appliances and devices maybe required to pay additional charges and fees other than the Fir Safety Inspection Fees. These shall be collected during inspections or in another process to be communicated by representations of the Bureau of Fire Protection (BFP).