APPLICATION FORM FOR BUSINESS PERMIT
TAX YEAR 20____
MUNICIPALITY OF MAGALANG (PAMPANGA)

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

☐ NEW ☐ RENEW	Mode of Payment	☐ Annually	☐ Semi-Annually	☐ Quarterly	
Date of Application:		DTI/SEC/CDA Registration No.:			
TIN No.:		DTI/SEC/CDA Date of Registration:			
Type of Business:	☐ Single	☐ Partnership	☐ Corporation	☐ Cooperative	
Amendment From:	☐ Single	☐ Partnership	☐ Corporation		
To:	☐ Single	☐ Partnership	☐ Corporation		
Are you enjoying tax incentive from any Government Entity?	☐ Yes *If yes, please specify the entity:*				
	☐ No				

Name of Taxpayer/Registrant

Last Name:	First Name:	Middle Name:
Owner's Address:		
Business Name:		
Trade Name/Franchise:		

2. OTHER INFORMATION

Note: For renewal applicants, do not fill up this section unless certain information have changed.

Business Address:		
Postal Code:	Email Address:	
Telephone No.:	Mobile No.:	
In case of emergency, provide the name of contact person:		
Telephone/Mobile No.:	Email Address:	
Business Area *(in sq. m.):*	Total No. of Employee in Establishment	No. of Employee Residing within the LGU
	Male _____ Female _____	

3. BUSINESS ACTIVITY

Note: Fill up only if business place is rented

Lessor's Full Name:				
Lessor's Full Address:				
Lessor's Full Telephone/Mobile No.:				
Lessor's Email Address:			Monthly Rental:	

Line of Business	No. of Unit/s	Capitalization *(if new business)*	Gross/Sales Receipt *(for Renewal)*	
			Essential	*Non-Essential*

I DECLARE UNDER PENALTY 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.

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SIGNATURE OF APPLICANT/TAX PAYER
OVER PRINTED NAME