Our-as <mark>t</mark> Bantay	RALITY OF BELLEVILLE OF SHEET
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APPLICATION FORM FOR BUSINESS PERMIT

TAX YEAR:_____
MUNICIPALITY OF BANTAY

UF CONTROL NO.:	
Bus. Permit No:	_
Bus. Plate No.:	

				В	Bus. Plate No.:	
TRANSACTION TYPE: New Renew Additional TRANSFER: Ownership Location Date of Application:		Fr Fr Fr Fr	om Single to Partner om Single to Partner om Single to Corpo om Partnership to Som Partnership to Som Corporation to Som Corporation to Som Corporation to C/CDA Registration	ration Single Corporation Single Partnership	MODE OF PAYMENT Annually Semi-Annual Quarterly	
Type of Organization: Single Partnership		DTI/SEC	DTI/SEC/CDA Registration Date:			
Corporation Cooperative		CTC No				
Are you enjoying tax incentive from a NAME OF TAXPAYER: Last Name:	ny Governmen First Na	•	Yes No Please	specify the er Middle	,	
Birthday:	THSCIVU	ine.		IVIIdale	ivairie.	
Business Name:						
Trade Name/Franchise:						
Name of President/Treasurer of corpo	oration: First Name	:		Middle I	Name:	
BUSINESS ADDRESS			OWN	IER'S ADDRES	SS	
House/Building No.:		House/	Building No.:			
Building Name:			g Name:			
Unit No.:		Unit No	Unit No.:			
Street:		Street:				
Barangay:		Baranga				
Subdivision:			Subdivision:			
City/Municipality:			City/Municipality:			
Province: Telephone/Mobile No.:		Provinc	e: one/Mobile No.:			
E-mail Address:		-	Address:			
Property Index Number (PIN):		L-IIIaii A	ruui ess.			
Business Area (in sq. m.): No. of em	ployees in Est Femal		No. of Employees residing in LGU:		No. of Delivery Vehicles:	
If place of business is rented, please ic Last Name: First	lentify the Less	sor's Name a	nd Address: Middle Name	:	Monthly Rental:	
House/Bldg. No.:		Subdivi	sion:			
Street:		City/Mu	ınicipality:			
Barangay:			Province:			
Tel./Mobile Phone No.:	1= 1 2 - 1		Address:			
In case of emergency, Contact Person					2 1 1 15 2 10	
Business Activity	No. of	Capitalization (for New Business)			Receipts (for Renewal)	
Code Line of Business	Units	HIDI)	w Dusilless)	Essential	Non-Essential	
	OATH	OF UNDE	RTAKING			
I undertake to comply with the regulatory requirements and other deficiencies within 30 days from release of the business permit.						
SIGNATURE OF APPLICANT OVER PRINTE			 E	PC	OSITION/TITLE	

	ASSESSI	/IENTS	
LOCAL TAXES	COMPUTATION C	F TAX DUE	TOTAL
Preceding Year's Gross Sales			
For Newly Started Business (1/20 of			
1% of Capital Investment)			
REGULATORY FEES AND CHARGES			
Mayor's Permit Fee			
Sanitary Inspection Fee			
Medical/Health Clearance Fee			
Occupational Fee			
Plate			
Sticker			
Barangay Clearance			
Others			
Total Regulatory Fee			
SURCHARGE, INTEREST AND			
PENALTY:			
(If paid after January 20, except when			
deadline is extended or if business is			
newly opened)			
20% Surcharge on tax, fees, charges			
Interest of 2% per month on taxes,			
fee, charges and surcharges			
Penalty charge on Mayor's Permit			
AMOUNT OF SURCHARGE, PENALTY			
& INTEREST			
Less: (if any)			
Tax Credit Refund			
Specify:			
Total			
GRAND TOTAL			
GRAND TOTAL	CATION OF DOCUM	/ENTS/REOUI	REMENTS
GRAND TOTAL VERIFICATION	CATION OF DOCUM		
GRAND TOTAL VERIFIE Description	Office/Agency	/IENTS/REQUI	REMENTS VERIFIED BY:
CRAND TOTAL VERIFIED Description Barangay Business Clearance			
VERIFICATION Description Barangay Business Clearance Cedula	Office/Agency Barangay (Where Business is Located)		
Description Barangay Business Clearance Cedula Zoning Locational Clearance	Office/Agency Barangay (Where Business is Located) MPDC		
Description Barangay Business Clearance Cedula Zoning Locational Clearance Sanitary/Health Clearance	Office/Agency Barangay (Where Business is Located) MPDC RHU		
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