

APPLICATION FORM FOR BUSINESS PERMIT

TAX YEAR _____

MUNICIPALITY OF MARILAO

Tel. Nos.: (044) 896-2931 loc. 1106
0943-701-5779

www.marilao.gov.ph

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 attach to this form (if any) are complete and properly filled out.

I. APPLICANT SECTION

1. BASIC INFORMATION

 New Renewal Closure Transfer: Location Business Name
Mode of Payment: Annually Semi-Annually Quarterly

Date of Application: _____ DTI/SEC/CDA Registration No. _____

TIN: _____

Type of Business: Single Partnership Corporation CooperativeAmendments: From Single Partnership Corporation CooperativeTo Single Partnership Corporation CooperativeAre you enjoying tax incentive from any Government Entity? Yes No Please specify the entity _____

Name of Taxpayer/Registrant _____

Last Name: _____ First Name: _____ Middle Name _____

Business Name: _____

Trade name/Franchise: _____

2. OTHER INFORMATION

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

Business Address: _____

Postal Code: _____ Email Address: _____

Telephone No.: _____ Mobile No.: _____

Owner's Address: _____

Postal Code: _____ Email Address: _____

Telephone No.: _____ Mobile No.: _____

In case of emergency, provide name of contact person: _____

Telephone/Mobile No.: _____ Email Address: _____

Business Area (in sq.m.) _____ Total No. of Employees in Establishment: _____ No. of Employees Residing within LGU: _____

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: _____

3. BUSINESS ACTIVITY

Line of Business	No. of Units	Capitalization (for 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.

Signature of Applicant/Taxpayer over Printed Name_____
Position/Title

ANNEX 1 (Page 2 of 2) Application Form for Business Permit

II. LGU SECTION (Do Not Fill Up This Form)

1. VERIFICATION OF DOCUMENTS

Description	Office/Agency	Yes	No	Not Needed
Occupancy Permit (For New)	Engineering's Office			
Barangay Business Clearance (For Renewal)	Barangay			
Sanitary Permit (Health Clearance)	Mun. Health Office			
Municipal Environmental Certificate/ Locational Clearance	Mun. Environmental & Natural Resource Office/MPDO			
Tax Clearance	Assessor's Office			
Valid Fire Safety Inspection Certificate	Bureau of Fire Protection			

Verified by BPLO

MARTIN ARMANDO C. CRUZ

2. ASSESSMENT OF APPLICABLE FEES

Local Taxes	Amount Due	Penalty/Surcharge	Total
Gross Sales Tax			
Tax on Delivery Vans/Trucks			
Tax on Storage for Combustible/ Flammable of Explosive Substance			
Tax on Signboards/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			
Storage and Sale of Combustible/ Flammable or Explosive Substance			
Other			
TOTAL FEES for LGU			
FIRE SAFETY INSPECTION FEE (10%)			

Assessed by: MTO

FSIF Assessment Approved by: BFP

III. MUNICIPAL FIRE STATION SECTION

DATE _____

APPLICATION NO.: _____
(TO BE FILLED UP BY APPLICANT/OWNER)

Name of Applicant/Owner: _____

Name of Business: _____

Total Floor Area: _____

Address of Establishment: _____

Signature of Applicant/Owner

Certified by:
Customer Relation Officer
Time and Date Received:

FIRE SAFETY INSPECTION
FEE ASSESSMENT:

Important Notice: As per section 12 of 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 fire fighting equipment, appliances and devices) may be required to pay additional charges and fees other than Fire Safety Inspection Fees. These shall be collected during inspections or in another process to be communicated by representatives of the Bureau of Fire Protection (BFP).