



Republic of the Philippines
Province of Cavite
MUNICIPALITY OF CARMONA

UNIFIED APPLICATION FORM FOR BUSINESS PERMIT

		Payment	
NEW		Annually	
RENEWAL		Bi-annually	
ADDITIONAL		Quarterly	

Date of Receipt _____
Tracking Number _____
Business ID Number _____

A. BUSINESS INFORMATION AND REGISTRATION

Please choose one ☐ Sole Proprietorship ☐ One Person Corporation ☐ Partnership ☐ Corporation ☐ Cooperative

☐ Male ☐ Female ☐ 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/ Partnership) Name of President/Officer in Charge:	Surname:	Given Name:	Middle Name	Suffix

For Corporation: ☐ Filipino ☐ Foreign

B. BUSINESS OPERATION

Business Area (in sq.m.): _____ Total No. of Employees in Establishment _____ No. of Employees _____ No. of Delivery Vehicles (if applicable) _____
Total Floor Area (in sq.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. _____

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	Philippine Standard Industrial Code (if Applicable)	Products/Services	No. of Units	Last Year's Gross Sales /Capitalization

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

DESIGNATION /POSITION/TITLE