



Republic of the Philippines  
 Province of Negros Occidental  
 City of San Carlos  
**OFFICE OF THE CITY MAYOR**



**BUSINESS PERMIT & LICENSING OFFICE**

Telefax No. (034) 312-6928

YEAR: \_\_\_\_\_

**APPLICATION FOR MAYOR'S PERMIT**  
**PEDICAB OPERATOR(5 UNITS & ABOVE)**

\_\_\_\_\_ Date

NEW       RENEWAL

NO. OF UNITS: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Contact No. : \_\_\_\_\_  
 Address: \_\_\_\_\_

**CERTIFICATION AS TO COMPLIANCE OF REQUIREMENTS FOR MAYOR'S PERMIT**

**POLICE CLEARANCE**

CHIEF OF POLICE \_\_\_\_\_

**HEALTH CARD**

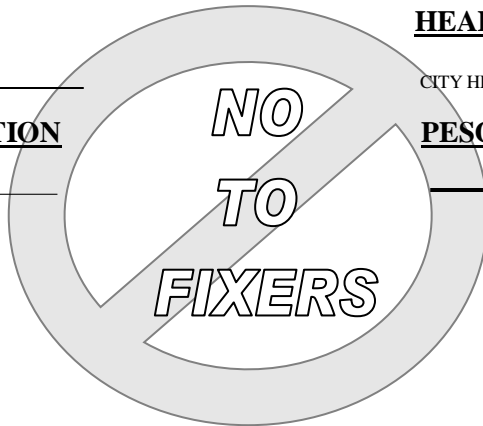
CITY HEALTH OFFICER \_\_\_\_\_

**BUREAU OF FIRE PROTECTION**

CITY FIRE MARSHALL \_\_\_\_\_

**PESO**

\_\_\_\_\_



\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

APPROVED: For issuance of Mayor's Permit after charges are paid to the City Treasurer accordingly. Recommended by:

**CRISTINA L. COMBATE**  
 LTOO IV - CTO  
 Licensing Officer IV-Designate (BPLO)

Approved:

**GERARDO P. VALMAYOR, JR.**  
 City Mayor