



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: 2016

Date Applied: _____
Business Plate No.: _____
Contact No.: _____

NEW **RENEWAL**

Business Name: _____
Business Address: _____
Name of Applicant/Taxpayer: _____
Organization Type: Single Proprietorship Partnership Corporation Cooperative
Office Type: Main Branch Line of Business: _____
Community Tax Certificate No. _____ Date & Place Issued: _____
Business SSS ID No. _____ BIR Tax Identification No.: _____

CERTIFICATION AS TO COMPLIANCE OF REQUIREMENTS FOR MAYOR'S PERMIT

POLICE CLEARANCE (REQUIREMENTS: Brgy. Clearance, Cedula, OR from Treasurer's Office, & Documentary Stamp)

Remarks: _____

Chief of Police

HEALTH & SANITARY REQUIREMENTS (REQUIREMENTS: 1 x 1 I Picture)

Remarks: _____

City Health Officer

ZONING (PLANNING DEPT.)

Remarks: _____

Zoning Administrator

BUILDING CODE (ENGINEERING DEPT.)

Remarks: _____

Building Inspector

REAL PROPERTY (TREASURER'S OFFICE)

Remarks: _____

Land Tax Division Chief

PESO

Remarks: _____

STEP 1 SUBMISSION OF REQUIREMENTS for
UNIFIED FORM

FIRE CODE (RA 9514):
Remarks: _____

STEP 2 ONE-TIME ASSESSMENT & PAYMENT including
FSIC fees

City Fire Marshall

STEP 3 Proceed to **BPLO** for issuance and releasing
of Mayor's Permit

WARNING: This form is not for sale. ("Kini nga pormas dili baligya.")

NATIONAL AGENCIES:

BIR

Remarks: _____

SSS

Remarks: _____

PAG-IBIG

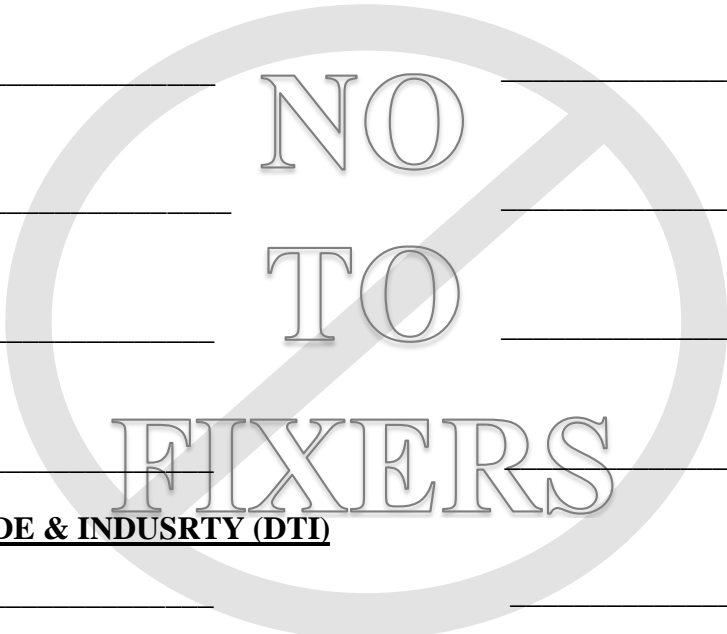
Remarks: _____

PHILHEALTH

Remarks: _____

DEPARTMENT OF TRADE & INDUSRTY (DTI)

Remarks: _____



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