



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: 2018**

**NEW BUSINESS**

Date Applied: \_\_\_\_\_  
 Business Plate No.: \_\_\_\_\_  
 Contact No.: \_\_\_\_\_

Business Name: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 Name of Applicant/Taxpayer: \_\_\_\_\_  
 Organization Type:  Single Proprietorship  Partnership  Corporation  Cooperative  
 Office Type:  Main  Branch Line of Business: \_\_\_\_\_  
 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**

(P.D. 856 - Food Caterers / Handlers) (For Non Food - Health Card Only)

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 City Health Officer

**ZONING** (PLANNING DEPT.)

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 Zoning Administrator

**BUILDING CODE** (ENGINEERING DEPT.)

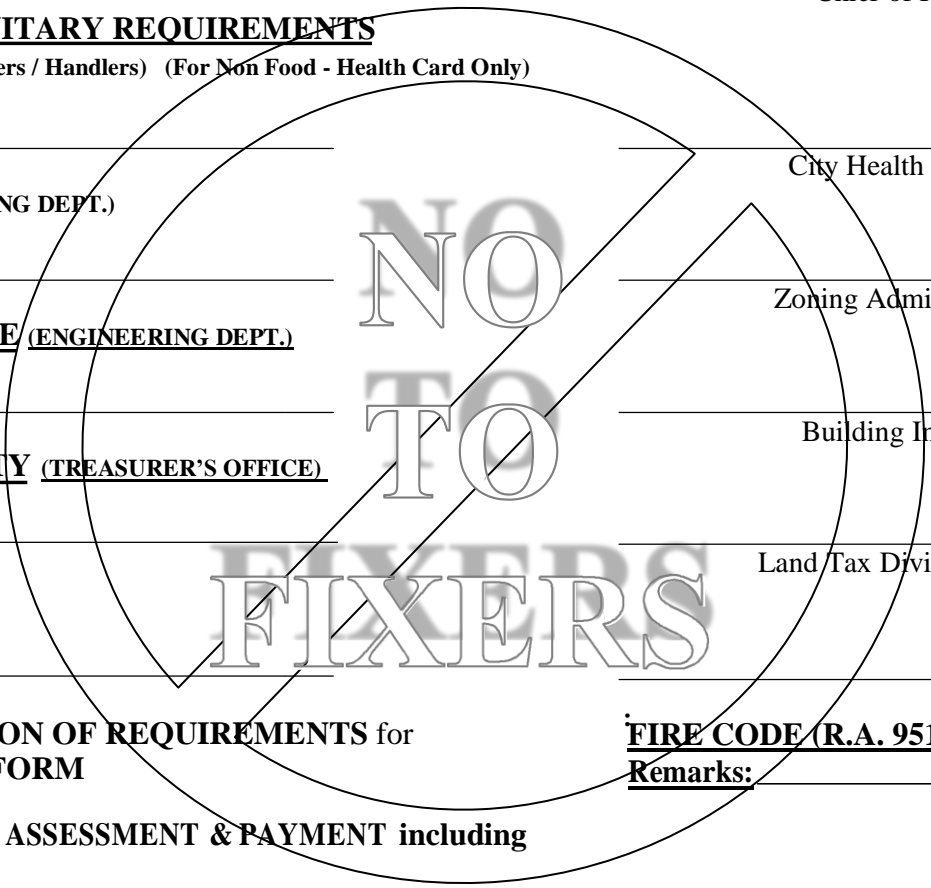
Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 Building Inspector

**REAL PROPERTY** (TREASURER'S OFFICE)

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 Land Tax Division Chief

**PESO**

Remarks: \_\_\_\_\_



**STEP 1** SUBMISSION OF REQUIREMENTS for UNIFIED FORM

**FIRE CODE (R.A. 9514):**  
 Remarks: \_\_\_\_\_

**STEP 2** ONE-TIME ASSESSMENT & PAYMENT including FSIC fees

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

\_\_\_\_\_  
 City Fire Marshall

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