



REPUBLIC OF THE PHILIPPINES
CITY OF MUNTINLUPA
BUSINESS PERMITS AND LICENSING OFFICE
Telephone Nos. 8862-BPLO (2756) • 8851-BPLO (2756) • 8861-6527
Website: www.muntinlupacity.gov.ph



APPLICATION FOR BUSINESS ACCOUNT MODIFICATION

DATE OF APPLICATION _____

DEAR SIR/MADAM:

PURSUANT TO THE PROVISIONS OF THE REVENUE CODE OF MUNTINLUPA, I AM HEREWITH APPLYING FOR THE MODIFICATION OF THE FOLLOWING BUSINESS:

BUSINESS NAME		
LINE OF BUSINESS		
BUSINESS ADDRESS		
TAXPAYER'S NAME		
ACCOUNT NUMBER	PERMIT NUMBER	STATUS <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL

TYPE OF MODIFICATION / LIST OF REQUIREMENTS:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Change of Business Name
<input type="checkbox"/> Duly accomplished business account modification form
<input type="checkbox"/> Original business permit certificate
<input type="checkbox"/> For Single Proprietor: New/ Updated DTI Registration (photocopy)
<input type="checkbox"/> For Corporation/ Partnership: New/Updated/Amended SEC Registration (photocopy)
<input type="checkbox"/> Valid IDs of affiant (photocopy) | <input type="checkbox"/> Change of Line of Business
<input type="checkbox"/> Duly accomplished business account modification form
<input type="checkbox"/> Original business permit certificate
<input type="checkbox"/> For Single Proprietor: New/ Updated DTI Registration (photocopy)
<input type="checkbox"/> For Corporation/ Partnership: New/Updated/Amended SEC Registration with (photocopy) | <input type="checkbox"/> Change of Business Address
<input type="checkbox"/> Duly accomplished business account modification form
<input type="checkbox"/> Original business permit certificate
<input type="checkbox"/> Place of Business (photocopy of the ff)
<input type="checkbox"/> If owned – TCT or CCT
<input type="checkbox"/> If rented –Contract of Lease | <input type="checkbox"/> Change of Ownership
<input type="checkbox"/> Duly accomplished business account modification form
<input type="checkbox"/> Original business permit certificate
<input type="checkbox"/> Notarized Deed of Sale/ Transfer/ Assignment (original)
<input type="checkbox"/> Valid IDs of affiant (photocopy) |
|--|---|---|--|

SPECIFICALLY THE UNDERSIGNED WOULD LIKE TO CHANGE THE FOLLOWING:

FROM	TO

NOTES:

- The herein applicant/ taxpayer undertakes to allow any authorized inspectors from various departments/offices of the City Government of Muntinlupa as well as of the National Government, to conduct lawful inspection inside the business premises during office hours. Violation of the foregoing condition shall mean suspension or revocation of business permit.
- For corporations, only responsible person (e.g. President, Manager Accounting or Finance Office and Corporate Secretary) should sign the form. In case of a liaison officer or an authorized representative, he or she should present an authorization letter duly signed from one responsible person from the company.

	RECOMMENDING APPROVAL:	APPROVED:
SIGNATURE OVER PRINTED NAME OF TAXPAYER OR AUTHORIZED REPRESENTATIVE	ALLAN A. CACHUELA OIC, Business Permits and Licensing Office	ROZZANO RUFINO B. BIAZON City Mayor
POSITION/ DESIGNATION/ TITLE		