



APPLICATION FOR SPECIAL MAYOR’S PERMIT

ACCOUNT NO: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

BUSINESS TRADE NAME			
BUSINESS ADDRESS			BARANGAY
DTI/ SEC/ CDA REGISTRATION NUMBER		TAX IDENTIFICATION NUMBER (TIN)	
TELEPHONE NO.	EMAIL		SSS NUMBER
NAME OF TAXPAYER	SURNAME	FIRST NAME	M.I.
ALTERNATE ADDRESS OF TAXPAYER (e.g. home address or address of the main office if branch only in Muntinlupa City)			CITY/MUNICIPALITY
NAME OF PRESIDENT/CEO		NAME OF OPERATIONS MANAGER	E-MAIL

LINE OF BUSINESS		NO. OF UNITS	CAPITALIZATION		
NUMBER OF EMPLOYEES	MALE	FEMALE	NUMBER OF EMPLOYEES/ WORKERS RESIDING IN MUNTINLUPA	MALE	FEMALE
TOTAL NO. OF DELIVERY TRUCKS/VANS/VEHICLES		TOTAL NO. OF GUARDS/STUDENTS/SEATING CAPACITY		ESTIMATED AREA (IN SQUARE METERS)	

IF THE PLACE OF BUSINESS IS RENTED (NOT OWNED)

NAME OF OWNER			TEL. NO.		
ADDRESS			TEL. NO.		
RENT START (Month / Day / Year)		MONTHLY RENTAL	EMAIL		
BOI/PEZA REG. NO.	DATE ISSUED	EXPIRATION DATE	CTC NO. (CEDULA)	DATE ISSUED	PLACE OF ISSUE

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 City Government of Muntinlupa.

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.

SIGNATURE OVER PRINTED NAME OF APPLICANT

POSITION/ DESIGNATION/ TITLE

NOTES:

1. For a corporation, only the responsible person (e.g. President Manager, Accounting or Finance Officer and Corporate Secretary) should sign the form. In the case of the liaison officer of an authorized representative, he or she should present an authorization letter duly signed by one responsible person from the company.

2. By signing this form, the herein applicant/taxpayer undertakes to allow any duly authorized inspectors from various Departments/Offices of the City Government of Muntinlupa as well as 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.

3. Further, by signing this form, the BPLO may process and use the Applicant's Personal Data and/or sensitive personal information collected for the purposes of fulfilling its obligations and providing the services required for business name registration and/or business registration. The data collected may be shared among the partner agencies and other permit/license-issuing agencies covered by a data-sharing agreement to help facilitate business registration-related transactions. The BPLO, its officer, employees, staff, and representatives shall not disclose any confidential, privileged, personal, and/or sensitive personal information of the Registrant in whole or in part, whether verbal or written to any person, except (a) When required by law or an order of the court; or (b) During an emergency, that threatens the life, personal security of the applicant or community.

APPROVED BY:

ENGR. ALLAN A. CACHUELA

OIC, BUSINESS PERMITS AND LICENSING OFFICE