



BTRCP FORM NO. 16A
Please read instruction / requirements at the back before filling up application

Republic of the Philippines
Department of Trade & Industry

Certificate No. : _____
Date Registered : _____
Expiry Date : _____
TRN No. : _____

APPLICATION FOR SOLE PROPRIETORSHIP

NEW RENEWAL

(PLEASE TICK THE BOX FOR THE APPROPRIATE APPLICATION FOR REGISTRATION OF BUSINESS NAME UNDER ACT NO. 3883, AS AMENDED)
(TO BE ACCOMPLISHED IN DUPLICATE)

BUSINESS NAME
(To be filled up by DTI Examiner)

1. OWNER/REGISTRANT			b. DATE OF BIRTH (mm/dd/yyyy)		c. TIN		
a. NAME SURNAME GIVEN NAME MIDDLE NAME							
d. RESIDENCE ADDRESS NUMBER STREET BARANGAY CITY/MIN./MUN DIST. PROVINCE ZIP CODE			e. EMAIL		f. RESIDENCE PHONE Area Code Number		
g. BUSINESS ADDRESS NUMBER STREET BARANGAY CITY/MIN./MUN DIST. PROVINCE ZIP CODE			h. FOR RENEWAL ONLY Old Certificate No. Date of Registration (mm/dd/yyyy)		i. BUSINESS PHONE Area Code Number		
j. Applicable to Franchisee or Branch Only (Please check the box where applicable) Licensed to use a trademark, tradename, or service name as part of your business name? <input type="checkbox"/> YES <input type="checkbox"/> NO					k. TOTAL NO. OF EMPLOYEES		
1. <input type="checkbox"/> FRANCHISE (Name of Franchisor)							
2. <input type="checkbox"/> BRANCH (Name of Main Office)							
m. CITIZENSHIP							
1. <input type="checkbox"/> Filipino		How Acquired <input type="checkbox"/>		1.a. Natural Born <input type="checkbox"/>		1.b. Election <input type="checkbox"/>	
				1.c. Naturalization <input type="checkbox"/>		2. <input type="checkbox"/> Foreigner	
						2.a. State _____	
						2.b. Citizenship _____	
n. GENDER			o. MARITAL STATUS				
1. <input type="checkbox"/> Female 2. <input type="checkbox"/> Male			1. <input type="checkbox"/> Single 2. <input type="checkbox"/> Married 3. <input type="checkbox"/> Widowed 4. <input type="checkbox"/> Others (Specify)				

2. CAPITALIZATION (in nearest thousand pesos)
Php _____

3. NATURE OF BUSINESS

a. Main Activity Exporter Importer Manufacturer /Producer Retailer Service Wholesaler

b. PRIMARY PRODUCT HANDLED/SERVICE RENDERED _____

4. FORMER OWNER OF BUSINESS

a. BUSINESS NAME _____ b. OLD CERTIFICATE NO. _____

c. METHOD OF ACQUISITION (Please check the box where applicable)

1. Sale 2. Assignment 3. Transfer 4. Not Applicable

5. PROPOSED BUSINESS NAMES

a. _____

b. _____

c. _____

Has the undersigned been convicted of any crime involving moral turpitude or violation of the law to trade, commerce and industry? YES NO

If yes, state Date: _____ Place: _____ and Nature of Offense: _____
(Attach certified true copy of the decision of the court of competent jurisdiction for any crime involving moral turpitude or violation of the law, ordinance or regulation).

UNDERTAKING

I hereby declare that all information supplied in this application are true and correct to the best of my belief and knowledge, and any false or misleading information supplied, or production of materially false or misleading document to support this application shall be a ground for the appropriate criminal, civil and/or administrative action against me.

Further, I hereby commit to abide by the following:

1. Change and/or cancel the registered business name in the event that there is already another person, firm or entity lawfully using an identical or confusingly similar name;
2. Comply with the provisions of ACT 3883, as amended and its implementing rules and regulations and other related laws and rules; and
3. Recognize and accept the authority and power of the Department of Trade and Industry or any of its duly designated representatives or agents to check and monitor compliance of my business establishment with various trade and industry laws and its implementing rules and regulations, and violations of the same shall be likewise a ground for the cancellation of this certificate.

OWNER'S SIGNATURE

Evaluated by : _____	Verified by. : _____	Payment Mode : _____	Amount : _____
Date : _____	Date : _____	Card/Bank Used : _____	O.R. No : _____
Time : _____	Time : _____	Date : _____	Issued By : _____
		Time : _____	

FOR SOLE PROPRIETORSHIP

INSTRUCTIONS FOR ACCOMPLISHING AND SUBMITTING APPLICATION

1. Applicant must be a Filipino Citizen of maturity age (18 years old and over).
2. Accomplish the application form in duplicate. Type or print completely and clearly, all information required in the forms.
3. Only the owner of the business is authorized to sign all the forms. A representative may sign for and in behalf of the owner provided a Special Power of Attorney authorizing the representative is submitted.
4. Submit the following (where applicable) together with the application form to the proper DTI Office where your business is located.

New Application

- a. Two (2) identical passport size picture (with signature of owner at the back) taken not more than 1 year preceding this filing
- b. Photocopy of proof of citizenship such as:
 - b.1. Birth Certificate, PRC ID, voter's ID, passport for

NATURAL BORN Filipinos whose names are suggestive of an alien nationality (e.g. Chua, Taylor, etc.). Present original copy for comparison.

- b.2. Naturalization Certificate and Oath of Allegiance or ID card issued by the BID for NATURALIZED Filipinos. Present the original copy for comparison.
- b.3. Affidavit of Election or ID card Issued by BID if citizenship is ACQUIRED BY ELECTION,. Present the original copy for comparison.

c. IF FRANCHISE HOLDER:

- c.1. Photocopy of Franchise Agreement, each page duly Certified by the franchisor or franchisee.
- c.2. Photocopy of BN Certificate of the franchisor.

d. FOR BULK SALES:

- d.1. Affidavit of vendor stating that at the time of sale, he had no creditors or if there were creditor/s, copy of notice to them regarding the sale.
- d.2. Deed of sale, assignment or transfer
- d.3. Inventory of properties sold, assigned or transferred
- d.4. Original certificate of business name registration of vendor for cancellation.

e. FOR FOREIGN INVESTOR

- e.1. Certified true copy of the certificate of authority to engage in business in the Philippines per RA 7042 issued by the DTI-NCR.
- e.2. Certified true copy of latest business permit from the concerned Local Government Unit (LGU).
- e.3. Photocopy of Alien Certificate of Registration (ACR) updated for the current year. Present original for comparison.
- e.4. Accomplished DTI Form No.17 under RA 7042.
- e.5. Current written appointment of Filipino Resident Agent.
- e.6. Clearance from other involved agencies such as Department of Science and Technology, PNP, etc.
- e.7. In case of alien retailer, current year's permit to engage in retail business under RA 1180.

Renewal Application

- a. Same requirement
- b. Present copy of old/expired BN Certificate and Application form.

c. Same requirements

e. Same requirements

ADDITIONAL DOCUMENTS MAY BE REQUIRED ON A CASE TO CASE BASIS DEPENDING ON ACTUAL EXAMINATION AND PROCESSING OF THE APPLICATION.

Example: If business requires practice of profession - submit photocopy of PRC License and present original copy for comparison, contract of employment if applicable.

SCHEDULE OF FEES

Basic Application fee (New/Renewal)	P 300.00
Documentary Stamps	P 15.00
Surcharge (For renewal of BN beyond 90 days after expiration)	P 100.00
Bulk Sales	P 55.00