<table>
<thead>
<tr>
<th>PHILIPPINE BUSINESS REGISTRY SOLE PROPRIETORSHIP NEW APPLICATION FORM</th>
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</table>

### A. REGISTRATION CHECKLIST

1. **DTI Registration Type** (Please select one.)
   - [ ] New Business Name
   - [ ] With Existing DTI Certificate Number

   **Certificate Number:**
   **Date of Registration:**

2. **Core Agencies Registration**
   (Please check what employer numbers you want to get.)
   - [ ] SSS
   - [ ] PhilHealth
   - [ ] Pag-IBIG

### B. PROPOSED BUSINESS NAME

3. **Business Name Scope** (Please check one. Total Fees to include P15.00 documentary stamp tax)
   - [ ] Barangay (P200.00)
   - [ ] City/Municipality (P500.00)
   - [ ] Regional (P1,000.00)
   - [ ] National (P2,000.00)

4. **Business Location**
   - [ ] Barangay
   - [ ] City/Municipality
   - [ ] Regional

### C. BUSINESS DETAILS

5. **Proposed Business Name**

6. **House/Building No. & Building Name**

7. **Street**

8. **Barangay**

9. **Town/City**

10. **Province**

### D. OWNER’S DETAILS

11. **Region**

12. **Phone No.** (Please put in area code)

13. **Mobile No.**

14. **Planned No. of Employees**
   - [ ] Male:
   - [ ] Female:

### E. PSIC

15. **Business Activities**
   (Please check all that applies)
   - [ ] Manufacturer/Producer
   - [ ] Service
   - [ ] Retailer
   - [ ] Wholesaler
   - [ ] Importer
   - [ ] Exporter

16. **Main Business Activity** (Select one among the business activities you chose above)
   - [ ] Manufacturer/Producer
   - [ ] Service
   - [ ] Retailer
   - [ ] Wholesaler
   - [ ] Importer
   - [ ] Exporter

17. **Indicate Main Product Handled/Service Rendered**
### F. TIN ISSUANCE (If without TIN)

<table>
<thead>
<tr>
<th>Contact Person/Accredited Tax agent (if not the owner)</th>
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<tbody>
<tr>
<td>99. First Name</td>
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<tr>
<td>100. Middle Name</td>
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<tr>
<td>101. Last Name</td>
</tr>
<tr>
<td>12. Suffix (e.g. Jr, Sr, I, II)</td>
</tr>
<tr>
<td>43. Phone No.</td>
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</tbody>
</table>

#### 44. Personal Exemption
- Single/Widowed/Legally Separated (No dependent)
- Single/Widowed/Legally Separated (With dependent)
- Married, indicate if husband or wife claims additional exemption:

<table>
<thead>
<tr>
<th>15. Spouse First Name</th>
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</thead>
<tbody>
<tr>
<td>16. Spouse Middle Name</td>
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<tr>
<td>17. Spouse Last Name</td>
</tr>
<tr>
<td>48. Spouse Employment Status</td>
</tr>
<tr>
<td>49. Spouse TIN</td>
</tr>
</tbody>
</table>

#### 50. Spouse Employer’s Name
- Employer's TIN
- Employer's Name

#### 52. Additional Exemptions (List down number of dependents)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Incapacitated</th>
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#### UNDERTAKING

Per Department Administrative Order (DAO) No. 10-01 as amended, I hereby declare that:

1. All information supplied in this application are true and correct to the best of my belief and knowledge;
2. Any false or misleading information supplied, or production of materially false or misleading document to support the application shall be a ground for the appropriate criminal, civil and or administrative action against me;
3. I shall voluntarily cancel or change the registered business name in the event another person, firm or entity reports to DTI that she/he/it is a prior registrant and lawful user of an identical or confusingly similar business name;
4. I am fully aware of and shall strictly comply with the provision of Act No. 3883, as amended, and its implementing rules and regulations and other related laws and rules; and
5. It is my responsibility to ensure that my proposed business name is -

- not and will not be used for business that is illegal, offensive, scandalous, or contrary to propriety (Pop’s Jueteng Betting Station, Boobs Massage & Spa);
- not the same or nearly the same as an existing registered business, company, partnership, corporation, cooperative name nor it infringes on any trademark, service mark and tradename (Anne Dok’s Lechon, Jolibee, Starbarx Cafe);
- not composed purely of generic or geographic words; (The Drugstore, Bacolod’s);
- not a name which by law or regulation cannot be appropriated (OTOP, Intelligence, State College);
- not used to designate or distinguish, or suggestive of quality of any class of goods, articles, merchandise, or service (Best TahoFactory, A-1 Auto Repair Shop);
- not used by the government in its governmental functions; (NBI Private Investigation Services, DTI Trading);
- not a name or abbreviation of a name of any nation, inter-governmental or international organization (Philippine Manpower Pooling Agency, UNESCO Marketing, WHO Health Services); and
- is not deceptive, misleading or which misrepresent the nature of business; and ("GOLD Construction Services" where nature of business is recruitment).

Applicant’s Signature: ___________________________ Over Printed Name: ___________________________

Date: ___________________________

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<tr>
<th>For DTI Use Only</th>
<th>Fee:</th>
<th>Rec’d by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRN/ PBN Date Registered</td>
<td>BN Certificate No.</td>
<td>Office OR Number: Date Paid:</td>
</tr>
<tr>
<td>BIR Tax Identification No.</td>
<td>SSS Employer No.</td>
<td>PhilHealth Employer No.</td>
</tr>
</tbody>
</table>
GENERAL INSTRUCTIONS IN ACCOMPLISHING AND SUBMITTING APPLICATION AND REQUIREMENTS

- Accomplish the application form by typing/printing (upper case/capital letter); completely and clearly. All required fields/information are printed in italics. For online application form, these are marked with red asterisk (*).
- Do not abbreviate the information, in business name, business and owner's address and name of owner in the Certificate of Business Name Registration.
- Only the owner of the business is authorized to sign the application form.
- Present 1 valid ID together with the application form to the proper DTI Office, where the business is located.

A. Registration Checklist
   1. **DTI Registration Type.** Tick the appropriate button for your business. If With Existing DTI Certificate Number, indicate the Date of Registration and previous Certificate Number.
   2. **Core Agencies Registration.** Tick the appropriate button of the agencies where you want to register.

B. Proposed Business Name
   3. **Business Scope.** Tick the appropriate button of the scope of your proposed business. Business scope refers to the business location and NOT on where the business shall operate.
   4. **Business Location.** Indicate the specific location of your business based on your business scope.
   5. **Proposed Business Name.** Business Name (BN) should be reflective of the nature of business and must have prefix, infix, and/or suffix (e.g. Alberto’s Garment Manufacturing, Marita’s Carinderia). Use of dominant or generic (e.g. Automotive Enterprise, you must add a prefix) business names are not allowed.

C. Business Details
   6. **House/Building No.** Includes building name and floor number, Lot, Block and Phase numbers, and Subdivision name, among others.
   7. **Street, Barangay and 9. Town/City, 10. Province, and 11. Region.** Exact address of your business based on the business location.
   8. **Phone Number.** Both landline and mobile numbers with area code are required by PBR participating agencies. Required information for online applications only.
   9. **No. of Employees.** Indicate number of employees, male/female employees.

D. Owner’s Details
   10. **First Name, 16. Middle Name, 17 Last Name, 18 Suffix (if applicable).** Indicate correct entries as these would appear in the Certificate of BN Registration.
   11. **Mother’s Maiden Name.** Only First and Last Names are required. Indicate N/A if mother is unknown.
   12. Personal SSS. No. Individual’s SSS number. This is different from the business SSS number.
   13. **Position/Title.** Default to Owner. Otherwise, cross out Owner and indicate position/title in the business being registered.
   14. **Tax Identification Number (TIN).** A required information to be able to transact with any government office per E.O. 98. This shall be the basis of your Philippine Business Number (PBN).
   15. **Date of Birth.** Owner must be of majority age (at least 18 years old)
   16. **Civil Status.** Tick the appropriate button. 25. **Sex.** Tick the appropriate button.
   17. **Citizenship.** Owner must be a Filipino Citizen. Proof of citizenship (photocopy) such as PRC ID, voter’s ID, passport is required. For Naturalized Filipinos, submit photocopies of Naturalization Certificate and Oath of Allegiance or ID card (original to be presented for comparison) issued by the Bureau of Immigration and Deportation (BID). If Filipino citizenship is Acquired by Election, submit photocopy of Affidavit of Election or ID Card issued (original to be presented for comparison) by BID.
   18. **E-mail Address.** This is where PBR e-mail notifications regarding your registration will be sent.
   19. **House/Building No.** This information include building name and floor number, Lot, Phase and Block numbers, and Subdivision, among others. This information will be printed in the Certificate of BN Registration.
   20. **Street, 30. Barangay, 31. Town/City, 32. Province, and 33. Region.** These information will be printed in the Certificate of BN Registration.
   34 & 35. **Phone Numbers.** Either landline or mobile numbers with area code is required.
E. PSIC
   36. **Business Activities.**  37. **Main Business Activity.** Tick appropriate button.
   38. **Product/Service.** Include applicable product/service as long as they are allied. Identify only one (1) main product/service.

F. TIN ISSUANCE
   39. **First Name,** 40. **Middle Name,** 41. **Last Name,** 42. **Suffix (if applicable).** Indicate name of representative if not owner is the contact person.
   43. **Phone Number.** Indicate phone number of contact person.
   44. **Personal Exemption.** Tick the appropriate button.
   45. **Spouse First Name,** 46. **Spouse Middle Name,** 47. **Spouse Last Name.** Indicate name your spouse if married.
   48. **Spouse Employment Status.** 49. **Spouse TIN.** 50. **Spouse Employment TIN.** 51. **Spouse Employer’s Name.** Indicate if you are married.
   52. **Additional Exemptions.** Indicate if there is/are any.

PLEASE CHECK E-MAIL NOTIFICATIONS FOR INSTRUCTIONS ON OR STATUS OF YOUR REGISTRATION WITH THE VARIOUS AGENCIES.