

(To be filled up by BIR) DLN: _____



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Application for Registration

BIR Form No.

1903

January 2018(ENCS)

For Corporations, Partnerships (Taxable / Non-Taxable),
Including GAIs, LGUs, Cooperatives and Associations

| | | | | | | | | | | | | | | | |
|--|--|--|---|--|--|---|--|--|---|--|--|--|--|--|--|
| | | | - | | | - | | | - | | | | | | |
|--|--|--|---|--|--|---|--|--|---|--|--|--|--|--|--|

TIN to be issued, if applicable (To be filled in by BIR)

Fill in all applicable white spaces. Mark all appropriate boxes with an "X".

Part I – Taxpayer Information

| | | | | | | | | | | | | | | | |
|----------------------|--------------------------------------|--|-----------------------------------|-------------------------|--|--|--|--|--|--|--|--|--|--|--|
| 1 Registering Office | <input type="checkbox"/> Head Office | <input type="checkbox"/> Branch Office | <input type="checkbox"/> Facility | 2 BIR Registration Date | | | | | | | | | | | |
|----------------------|--------------------------------------|--|-----------------------------------|-------------------------|--|--|--|--|--|--|--|--|--|--|--|

(To be filled up by BIR)(MM/DD/YYYY)

| | | | | | | | | | | | | | | | |
|--|--|--|---|--|--|---|--|--|---|--|--|--|--|--|--|
| 3 Taxpayer Identification Number (TIN) | | | - | | | - | | | - | | | | | | |
|--|--|--|---|--|--|---|--|--|---|--|--|--|--|--|--|

(For Taxpayer with existing TIN)

| | | | | | | | | | | | | | | | |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 4 RDO Code | | | | | | | | | | | | | | | |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

(To be filled up by BIR)

5 Taxpayer Type

| | |
|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Regional Operating Headquarter |
| <input type="checkbox"/> General Professional Partnership | <input type="checkbox"/> Regional or Area Headquarter |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Cooperative |
| <input type="checkbox"/> National Government Agency | <input type="checkbox"/> Resident Foreign Corporation |
| <input type="checkbox"/> Local Government Unit | <input type="checkbox"/> Non-Resident Foreign Partnership |
| <input type="checkbox"/> Government Owned and Controlled Corporation | <input type="checkbox"/> Non-Resident Foreign Corporation |
| <input type="checkbox"/> Non-Stock, Non-Profit Organization | <input type="checkbox"/> Foreign Embassy and International Organization |

6 Registered Name (Copy exact name appearing in SEC Certificate of Registration / Charter / Cooperative Development Authority / HLURB)

| | | |
|--|----------------------------------|-----------------------|
| 7 Date of Incorporation/Organization/Cooperation | 8 Taxable Year/Accounting Period | Accounting Start Year |
|--|----------------------------------|-----------------------|

(MM/DD/YYYY)

Calendar Year Fiscal Year

(MM/DD/YYYY)

9 Business Address

| | | | | |
|---------------------------|---------------------|---------------------------|-------------|--------------------------|
| Unit/Room/Floor/Building# | Building Name/Tower | Lot/Block/Phase/House No. | Street Name | Subdivision/Village/Zone |
| | | | | |
| Barangay | Town/District | Municipality/City | Province | ZIP Code |
| | | | | |

10 Foreign Address _____

| | |
|----------------------|-------------------------------|
| 11 Municipality Code | 12 Purpose of TIN Application |
|----------------------|-------------------------------|

(To be filled up by BIR)

13 Preferred Contact Type

Landline Number Fax Number Mobile Number Email Address (required)

Part II – Authorized Representative

14 Relationship Name (For Authorized Representative)

If Individual (Last Name) (First Name) (Middle Name) Suffix

If Non-Individual (Registered Name)

| | |
|----------------------|-------------------------------------|
| 15 Relationship Type | 16 TIN of Authorized Representative |
|----------------------|-------------------------------------|

Stockholder Member Tax Agent Employee Agent

| | |
|----------------------------|-----------------|
| 17 Relationship Start Date | 18 Address Type |
|----------------------------|-----------------|

(MM/DD/YYYY)

Residence Place of Business

19 Local Residence Address

| | | | | |
|---------------------------|---------------------|---------------------------|-------------|--------------------------|
| Unit/Room/Floor/Building# | Building Name/Tower | Lot/Block/Phase/House No. | Street Name | Subdivision/Village/Zone |
| | | | | |
| Barangay | Town/District | Municipality/City | Province | ZIP Code |
| | | | | |

20 Preferred Contact Type

Landline Number Fax Number Mobile Number Email Address (required)

Part III – Business Information

21 Single Business Number _____

22 Primary/Secondary Industries (Attach additional sheet/s, if necessary)

| | | |
|-----------|---------------------|-----------------|
| Industry | Trade/Business Name | Regulatory Body |
| Primary | | |
| Secondary | | |

| Industry | Business Registration Number | Business Registration Date (MM/DD/YYYY) | PSIC Code (To be filled up by BIR) | Line of Business |
|-----------|------------------------------|--|---------------------------------------|------------------|
| Primary | | | | |
| Secondary | | | | |

| | | | | |
|---|--|---|--|---|
| 23 Incentives Details | | | | |
| 23A Investment Promotion (e.g. PEZA, BOI) | | 23B Legal Basis (e.g. RA, EO) | | 23C Incentive Granted (e.g. Exempt from IT, VAT, etc.) |
| | | | | |
| 23D No. of Years | | 23E Incentive Start Date (MM/DD/YYYY) | | 23F Incentive End Date (MM/DD/YYYY) |
| | | | | |
| 24 Details of Registration / Accreditation | | | | |
| 24A Registration / Accreditation Number | | 24B Effectivity Date (MM/DD/YYYY) | | 24C Date Issued (MM/DD/YYYY) |
| | | | | |
| 24D Registered Activity | | 24E Tax Regime (Regular, Special, Exempt) | | 24F Activity Start Date (MM/DD/YYYY) |
| | | | | |
| | | | | 24G Activity End Date (MM/DD/YYYY) |
| | | | | |

Part IV – Facility Details

| | | | | |
|--|--------------------------|--|-------------|--------------------------|
| 25 Facility Details (PP-Place of Production/Plant; SP-Storage Place; WH-Warehouse; SR-Showroom; GG-Garage; BT-Bus Terminal; RP-Real Property for Lease with No Sales Activity;) | | | | |
| 25A Facility Code (To be filled up by BIR) | 25B Facility Type | <input type="checkbox"/> PP <input type="checkbox"/> SP <input type="checkbox"/> WH <input type="checkbox"/> SR <input type="checkbox"/> GG <input type="checkbox"/> BT <input type="checkbox"/> RP <input type="checkbox"/> Other (specify) | | |
| F | | | | |
| 26 Facility Address | | | | |
| Unit/Room/Floor/Building# | Building Name/Tower | Lot/Block/Phase/House No. | Street Name | Subdivision/Village/Zone |
| | | | | |
| Barangay | Town/District | Municipality/City | Province | ZIP Code |
| | | | | |

Part V - Tax Types

| | | | | | |
|---|--|-----|--|-----------|-----|
| 27 Tax Types (This portion determines your tax liability/ies) (To be filled up by BIR) | | | | | |
| Form Type | | ATC | | Form Type | ATC |
| <input type="checkbox"/> Withholding Tax | | | <input type="checkbox"/> Registration Fee | | |
| <input type="checkbox"/> Compensation | | | <input type="checkbox"/> Percentage Tax | | |
| <input type="checkbox"/> Expanded | | | <input type="checkbox"/> Stocks | | |
| <input type="checkbox"/> Final | | | <input type="checkbox"/> Overseas Dispatch And Amusement Taxes | | |
| <input type="checkbox"/> Fringe Benefits | | | <input type="checkbox"/> Under Special Laws | | |
| <input type="checkbox"/> VAT & Other Percentage Percentage Tax | | | <input type="checkbox"/> Other Percentage Tax under NIRC (specify) | | |
| <input type="checkbox"/> ONETT not subject to CGT | | | | | |
| <input type="checkbox"/> Percentage Tax on Winnings & Prizes | | | <input type="checkbox"/> Documentary Stamp Tax | | |
| <input type="checkbox"/> On Interest Paid On Deposits And Yield on Deposits/Substitutes | | | <input type="checkbox"/> Regular | | |
| <input type="checkbox"/> Income Tax | | | <input type="checkbox"/> One-Time Transactions (ONETT) | | |
| <input type="checkbox"/> Excise Tax | | | <input type="checkbox"/> Capital Gains – Real Property | | |
| <input type="checkbox"/> Alcohol Products | | | <input type="checkbox"/> Capital Gains – Stocks | | |
| <input type="checkbox"/> Automobile & Non-Essential Goods | | | <input type="checkbox"/> Donor's Tax | | |
| <input type="checkbox"/> Cosmetics Procedures | | | <input type="checkbox"/> Estate Tax | | |
| <input type="checkbox"/> Mineral Products | | | <input type="checkbox"/> Miscellaneous Tax (specify) | | |
| <input type="checkbox"/> Petroleum Products | | | | | |
| <input type="checkbox"/> Sweetened Beverages | | | <input type="checkbox"/> Others (specify) | | |
| <input type="checkbox"/> Tobacco Products | | | | | |
| <input type="checkbox"/> Tobacco Inspection Fees | | | | | |

Part VI – Authority to Print

28 Authority to Print Receipts and Invoices

28A Printer's Name

28B Printer's TIN

28C Printers Accreditation Number

28D Date of Accreditation

28E Registered Address

Unit/Room/Floor/Building# Building Name/Tower Lot/Block/Phase/House No. Street Name Subdivision/Village/Zone

Barangay Town/District Municipality/City Province ZIP Code

28F Contact Number

28G E-mail Address

28H Manner of Receipt/Invoices Bound Loose Leaf Others

28I Descriptions of Receipts and Invoices *(Additional Sheet/s if Necessary)*

| Description | TYPE | | NO. OF BOXES/BOOKLETS | | NO. OF SETS PER BOX / BOOKLET | NO. OF COPIES PER SET | SERIAL NO. | |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|-----------------------|----------------------|----------------------|
| | VAT | NON-VAT | LOOSE | BOUND | | | START | END |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Part VII - Stockholder/Partner/Member

29 Stockholder's/Partner's/Member's Name *(attach additional sheet, if necessary)*

| | | | | |
|---|-----------------------------------|------------------------------------|-------------------------------|-------------------------------------|
| 29A (Last Name) <input type="text"/> | (First Name) <input type="text"/> | (Middle Name) <input type="text"/> | (Suffix) <input type="text"/> | 29A TIN <input type="text"/> |
| 29B (Last Name) <input type="text"/> | (First Name) <input type="text"/> | (Middle Name) <input type="text"/> | (Suffix) <input type="text"/> | 29B TIN <input type="text"/> |
| 29C (Last Name) <input type="text"/> | (First Name) <input type="text"/> | (Middle Name) <input type="text"/> | (Suffix) <input type="text"/> | 29C TIN <input type="text"/> |
| 29D (Last Name) <input type="text"/> | (First Name) <input type="text"/> | (Middle Name) <input type="text"/> | (Suffix) <input type="text"/> | 29D TIN <input type="text"/> |
| 29E (Last Name) <input type="text"/> | (First Name) <input type="text"/> | (Middle Name) <input type="text"/> | (Suffix) <input type="text"/> | 29E TIN <input type="text"/> |

30 Declaration

I/We declare, under the penalties of perjury that this application has been made in good faith, verified by me/us and to the best of my/our knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under the authority thereof. Further, I/we give my/our consent to the processing of my/our information as contemplated under the *Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

 President/Vice President/Principal Officer/Accredited Tax Agent/Authorized Representative/Taxpayer
(Signature over Printed Name)

 Title/Position of Signatory

 TIN of Signatory

 Tax Agent Acc. No. / Atty's. Roll No. *(If applicable)*

 Date of Issuance

 Date of Expiry

Part VIII – Payment Details

31 For the Calendar Fiscal

32 Year Ended

33 Date of Payment

34 ATC **MC180** **34** Tax Type **RF** **35** Manner of Payment **REGISTRATION FEE** **36** Type of Payment **FULL PAYMENT**

37 Registration Fee **37A**

38 BIR Printed Receipts / Invoices **38A**

39 Add: Penalties Surcharge Interest Compromise

39A **39B** **39C** **39D**

40 Total Amount Payable *(Sum of Items 37A, 38A and 39D)*

*NOTE: The BIR Data Privacy Policy is in the BIR website (www.bir.gov.ph)

Documentary Requirements:

- 1. Photocopy of SEC Certificate of Incorporation; or Photocopy of Certificate of Recording (in case of partnership); or Photocopy of License to Do Business in the Philippines (in case of foreign corporation);
- 2. Articles of Incorporation; or Articles of Partnerships;
- 3. Photocopy of Mayor's Business Permit; or Duly received Application for Mayor's Business Permit, if the former is still in process with the LGU;
- 4. Proof of Payment of Registration Fee (RF) (not applicable to those exempt from the imposition of RF);
- 5. BIR Form No. 1906; (Select an Accredited Printer);
- 6. Final & clear sample of Principal Receipts/ Invoices;
Additional documents, if applicable:
 - a. Board Resolution indicating the name of the authorized representative and Secretary's Certificate, in case of authorized representative who will transact with the Bureau;
 - b. Franchise Documents (e.g. Certificate of Public Convenience) (for Common Carrier);
 - c. Memorandum of Agreement (for JOINT VENTURE);
 - d. Franchise Agreement;
 - e. Certificate of Authority, if Barangay Micro Business Enterprises (BMBE) registered entity;
 - f. Proof of Registration/Permit to Operate BOI/BOIARMM, PEZA, BCDA and SBMA
- 7. For GAls and LGUs – Photocopy of Unit or Agency's Charter;
- 8. For Cooperatives – Photocopy of Cooperative Development Authority (CDA) Certificate of Registration and Articles of Cooperation;
- 9. For Homeowner's Association – Photocopy of Certificate of Registration issued by Housing and Land Use Regulatory Board (HLURB) and Articles of Association;
- 10. For Labor Organization, Assoc. or Group of Union Workers – Photocopy of Certificate of Registration issued by Department of Labor and Employment (DOLE) and Constitution and by-laws of the application union;
- 11. For Foreign Embassies – Endorsement from Department of Foreign Affairs (DFA);
- 12. For International Organization – Host Agreement or any international agreement duly certified by DFA;
- 13. In case of registration of branches/facility types:
 - a. Photocopy of Mayor's Business Permit; or Duly received Application for Mayor's Business Permit, if the former is still in process with the LGU; and/or Board Resolution/Secretary Certificate stating the Branch Establishment;
 - b. Board Resolution and Secretary Certificate, in case of authorized representative who will transact with the Bureau; if applicable
 - c. Proof of Payment of Annual Registration Fee (ARF) (not applicable to those exempt from the imposition of ARF);
 - d. BIR Form No. 1906;
 - e. Final & clear sample of Principal Receipts/ Invoices;

POSSESSION OF MORE THAN ONE TAXPAYER IDENTIFICATION NUMBER (TIN) IS CRIMINALLY PUNISHABLE PURSUANT TO THE PROVISIONS OF THE NATIONAL INTERNAL REVENUE CODE OF 1997, AS AMENDED