Date filed: _____

MS. OLIVIA M. LAUREL
Head, Business Permit and License Office
City Government of Santa Rosa

For BPLO use only	
data changed in BP - by/date:	
data updated in v4 - by/date:	
docs sub loaded in v4- by/date:	

This is to *request for change of business information* as follows:

___ Original Copy of BP No._____ Acct No. ___ - _____ Buss Name _____

1 Taxpayer Name
From _____
To _____
Singleprop
- ⭕ Transfer of Ownership__ Deed of Sale__ Waiver of Rights__
- ⭕ DTI certification of new owner___
- ⭕ Affidavit of No Legal Liability ____
- ⭕ Other docs _____

2 Taxpayer Address
From _____
To _____
Singleprop
- ⭕ Request letter__ Tax Dec, if owned __ Lease Contract, if renting

3 Business Name
From _____
To _____
Singleprop
- ⭕ DTI registration of new BusinessName __
- ⭕ DTI cancellation of previous BusinessName __
- ⭕ Affidavit of No Legal Liability ____

4 Business Address
From _____
To _____
Singleprop
- ⭕ Lease Contract__ Sketch__ Update Pic ____ Inspection_____
  Brgy Clearance__change PIN__ New PIN_____
- ⭕ Office of the Building Official Clearance ___

5 Form of Ownership
From _____
To _____
Singleprop
- ⭕ Letter from Owner transferring ownership to corp/new owner __
  Transfer of Ownership__ Deed of Sale__Waiver of Rights __ Others _____

6 Business Line - Change/Additional
From _____
To _____
Singleprop
- ⭕ Request letter__ Sketch __Inspection __update PIC__
- ⭕ Application Letter recd by BSP (RA/Forex) __
- ⭕ Service Agreement__ MOA__ Franchise __ Others _____

7 Nature of Business Change/Additional
From _____
To _____
Singleprop
- ⭕ Request Letter__ Sketch __Inspection __update PIC__
- ⭕ Service Agreement__ MOA__ Franchise __ Others _____

8 Capitalization *Additional City Tax*
From _____
To _____
Singleprop
- ⭕ Request Letter__
- ⭕ Reassessment based on Inspection conducted
- ⭕ Increase in number of vehicles, equipment, PC from #_____ to # _____
- ⭕ Authorization Letter and Photocopy of Owner's ID
- ⭕ DOLE Requirement
- ⭕ Others _____

Respectfully yours,

_____
Taxpayer Signature over Printed Name / Date

Note: Only request/s with complete documentation will be processed.