



Republic of the Philippines
CITY OF MARIKINA
 Business Permits & Licensing Office
BUSINESS RETIREMENT

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Business Account No.

Date: _____

Sir/Ma'am:

Pursuant to the provisions of the Revenue Code of Marikina, I am herewith applying for the retirement of business located at _____ Marikina City.

Name of Business or Trade Name	_____	
Nature of Business	_____	
Contact No.	_____	
Gross Sales/Receipts	_____	_____
	(Preceding Year)	(Current Year)

Submitted herewith are the following Official Receipts covering the payment taxes and fees during the current year.

Official Receipt No.	Date	Amount

Note: The mere filling of this application does not automatically relieve the applicant of any liability. I further certify under oath that the facts stated above are true and correct.

Very truly yours,

 Applicant
 (Signature over Printed Name)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 2____ at _____ affiant exhibiting to me his/her Community Tax Certificate No. _____ issued at _____ on _____.

Doc. No.	
Page No.	
Book No.	
Series No.	

 Person Authorized to Administer Oath

 (Applicant should not fill below this line)

REPORT OF INSPECTION

Still Operating Stopped Operation Reason for Retirement: _____
 When: _____

RECOMMENDATION:
 for Approval for Non Approval
 for Collection of Deficiency

 License Inspector

APPROVED:

RESURRECCION R. BADUA
Acting Chief, BPLO