

(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																									
<div><input type="checkbox"/> Corporation</div>																<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 (MM/DD/YYYY)										8 Taxable Year/Accounting Period						Accounting Start Year (MM/DD/YYYY)									
<input type="checkbox"/> Calendar Year <input type="checkbox"/> Fiscal Year																									
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 (To be filled up by BIR)																									
12 Purpose of TIN Application																									
13 Preferred Contact Type																									
<input type="checkbox"/> Landline Number <input type="checkbox"/> Fax Number <input type="checkbox"/> 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															
<input type="checkbox"/> Stockholder <input type="checkbox"/> Member <input type="checkbox"/> Tax Agent <input type="checkbox"/> Employee <input type="checkbox"/> Agent																									
17 Relationship Start Date (MM/DD/YYYY)										18 Address Type <input type="checkbox"/> Residence <input type="checkbox"/> 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																									
<input type="checkbox"/> Landline Number <input type="checkbox"/> Fax Number <input type="checkbox"/> 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)	F	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)		
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		
Withholding Tax		<input type="checkbox"/> Registration Fee		
<input type="checkbox"/> Compensation				
<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 <input type="checkbox"/> Bound <input type="checkbox"/> Loose Leaf <input type="checkbox"/> 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="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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) (First Name) (Middle Name) (Suffix)					29A TIN				
29B (Last Name) (First Name) (Middle Name) (Suffix)					29B TIN				
29C (Last Name) (First Name) (Middle Name) (Suffix)					29C TIN				
29D (Last Name) (First Name) (Middle Name) (Suffix)					29D TIN				
29E (Last Name) (First Name) (Middle Name) (Suffix)					29E TIN				
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 <input type="checkbox"/> Calendar <input type="checkbox"/> Fiscal			32 Year Ended (MM/YYYY)		33 Date of Payment (MM/DD/YYYY)				
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		
39Add: 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