



Republic of the Philippines  
Province of Bukidnon  
City of Valencia

Office of the City Administrator

**BUSINESS PERMITS AND LICENSING DIVISION (BPLD)**

1<sup>st</sup>Flr., Multi-purpose Building, City Hall Compound, A. Catarata St., Poblacion , Valencia City, Buk., Tel No: 828-4244, Email address: [licensing@cityofvalencia.gov.ph](mailto:licensing@cityofvalencia.gov.ph)

**REQUEST FORM FOR CERTIFICATION**

Control No. \_\_\_\_\_

Date of Request: \_\_\_\_\_

NAME OF TAXPAYER	SURNAME	FIRST NAME	M.I.
BUSINESS TRADE NAME			PERMIT NO.
BUSINESS ADDRESS	(RM./FLR./UNIT NO. & BLDG. NAME)	(STREET NAME)	(BARANGAY)
(CITY/MUNICIPALITY)		(PROVINCE)	
RESIDENTIAL ADDRESS	(RM./FLR./UNIT NO. & BLDG. NAME)	(STREET NAME)	(BARANGAY)
(CITY/MUNICIPALITY)		(PROVINCE)	

PURPOSE:  
\_\_\_\_\_

**IMPORTANT NOTE:**  
The mere filing of this request does not automatically relieve the applicant from any tax liability and/or fee/s.  
In order to facilitate the processing of this request, the Applicant-Taxpayer shall submit pertinent documents that would support the request for certification.  
*Requesting individual other than the concerned taxpayer must conform to Memorandum Order No. 227, s. 2015 and other issuance.*

Very truly yours,

\_\_\_\_\_  
SIGNATURE OVER PRINTED NAME

*\*TO BE FILLED UP BY THE BPLD PERSONNEL*

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SUBMITTED DOCUMENTS:

- Request Form for Certification (pls. get the Form at BPLD)
- For Authorized Representative, Authorization Letter with photocopy of Taxpayer's ID or Special Power of Attorney (Single Proprietorship; Board's Resolution/Secretary's Certificate (Corporation/Cooperative)

Other requirements as required by law  
\_\_\_\_\_

*\*BPLD reserves the right to ask for additional documents in accordance with law.*

**DETAILS OF FILING**

Received by: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Remarks: \_\_\_\_\_

Amount Paid: \_\_\_\_\_  
Payment Date: \_\_\_\_\_  
Official Receipt No.: \_\_\_\_\_

\_\_\_\_\_  
**GRACE A. DAPANAS**  
LO IV/ Head, BPLD