



Republic of the Philippines  
Quezon City  
Office of the City Treasurer  
**Examination Division**  
**(For Partnership)**



Document Tracking Number: \_\_\_\_\_

- Completely filled up application form duly signed by **all Partners** or the authorized representative of the Company with Location Map;
- Original or Certified True Copy of Tax Bill and Official Receipts for three (3) consecutive years or less as the case maybe;
- Original Business Permit (Latest);
- Original Notarized Partnership Dissolution on closure or transfer of business stating the **exact effectivity date of closure** ( Signed by all Partners ) ;
- Original or Certified True Copy of updated Articles of Partnership (Original to be presented & Certified True Copy to be submitted);
- Photocopy of any government issued Identification Card/s of all partners and /or parties involved with three (3) specimen signature;
- Original Barangay Certificate stating **the exact effectivity date of closure** with attached Official Receipt of payment thereto;
- Certificate of Registration issued by the BIR (Original to be Presented & photocopy to be submitted);
- Original Statement of revenue or declaration of gross sales or its equivalent. In case of two or more branches or line of businesses, a clear and convincing breakdown of sales must be presented Three (3) years ( Notarized ) ;
- Photocopy of Official tax bill and receipt/permit issued by the Local Government Unit where the said branches or line of business is located;
- Income Tax Return with Audited Financial Statement from 20 \_\_\_\_\_ to 20 \_\_\_\_\_ (Original to be presented & photocopy to be submitted);
- VAT / PERCENTAGE TAX RETURNS 20 \_\_\_\_\_ (Original to be presented & photocopy to be submitted);
- Books of Accounts (to be followed upon evaluation);
- Special Power of Attorney (SPA).

Received by: \_\_\_\_\_

Date received: \_\_\_\_\_

**TAX PAYER CONTACT INFORMATION**

Name : \_\_\_\_\_

Mobile #: \_\_\_\_\_

Landline #: \_\_\_\_\_

Email address: \_\_\_\_\_

*Note: All applications not completely supported by the aforementioned documents are not deemed filed.*

**FOR INQUIRY PLEASE CALL 8988-4242 LOCAL 8265**



**QUEZON CITY  
CITY TREASURER'S OFFICE  
EXAMINATION DIVISION**

**Mayor's / Business Permit:** \_\_\_\_\_ **Control No.** \_\_\_\_\_

**Taxpayer's name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

\_\_\_\_\_

**Nature of Business:** \_\_\_\_\_

(to be retired)

**Contact Number:** \_\_\_\_\_

**LOCATIONAL MAP**

**INSPECTED / VERIFIED BY:** \_\_\_\_\_

(Signature over Printed Name)

**DATE:** \_\_\_\_\_

**REMARKS:** \_\_\_\_\_

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