



*Republic of the Philippines*  
OFFICE OF THE CITY MAYOR  
**BACOLOD BUSINESS DEV'T. AND INVESTMENT PROMOTION CENTER**  
*Bacolod City*  
Telephone No. (034) 435-8125

**APPLICATION FOR AVAILMENT OF INCENTIVES UNDER CITY ORDINANCE NO. 323**

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

1. Applicant

a. Owner / Manager / President Gender  Male  Female

Surname	Given Name	M.I.	Age
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b. Business Firm / Company  Existing  New

Name	Address	Tel. No.
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Plant Site / Location	Plant Tel. No.
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c. Check:  Main Office / Plant  Branch Only

2. Form of Ownership

Single Proprietorship  Partnership  
 Corporation  Others, please specify \_\_\_\_\_

Registration of Appropriate Government Agency

Name of Agency	Certificate Number
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3. Capitalization / Total Assets \_\_\_\_\_

4. Year Established \_\_\_\_\_

5. Nature of Business

Manufacturing  Partnership  
 Wholesale  Others, please specify \_\_\_\_\_

6. Principal Product/s Handled , Processed , Produced ; and/or Services Rendered

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7. Number of Employees \_\_\_\_\_

8. Target Date of Operation \_\_\_\_\_

For Partnership Only

Name of Partners	Nationality	Residence	Capital
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For Corporation Only

Name of Incorporators	Nationality	Council of Residence	% of Ownership
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Paid Up \_\_\_\_\_

I hereby certify that foregoing statements are true to the best of my knowledge and belief.

\_\_\_\_\_  
Applicant's / Authorized  
Representative's Signature

REPUBLIC OF THE PHILLIPINES)  
City of Bacolod ) S. S.  
x-----x

SUBSCRIBED AND SWORN TO BEFORE ME this \_\_\_\_\_ of \_\_\_\_\_ affiant  
exhibited to me his/her Community Tax Certificate No. \_\_\_\_\_ issued at  
\_\_\_\_\_ on \_\_\_\_\_, \_\_\_\_\_.

Doc. No. : \_\_\_\_\_  
Page No. : \_\_\_\_\_  
Book No. : \_\_\_\_\_  
Series of 2012

PROJECT REPORT (FEASIBILITY STUDY)

I. General Information

Business Name : \_\_\_\_\_  
Owner / Registrant : \_\_\_\_\_  
Business Location : \_\_\_\_\_  
Telephone Number : \_\_\_\_\_  
Form of Ownership : \_\_\_\_\_  
Capitalization / Total Assets : \_\_\_\_\_  
Nature of Business : \_\_\_\_\_

II. Marketing Aspect

Product Description

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prospective Market

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Marketing Channels

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supply and Demand

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Projected Volumes of Sales

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed Selling Price

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Marketing Strategies

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use separate sheet if necessary)

III. Technical and Production Aspect

Project Site / Description

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Raw Materials, Supplies , and Sources

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Operation and Processes

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Machineries and Equipments

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Production Schedule

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(use separate sheet if necessary)

IV. Organizational Aspect

Pre-operating Aspect

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Type of Organization

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Organizational Structure

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(use separate sheet if necessary)

Duties and Responsibilities

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Manpower Requirements

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(use separate sheet if necessary)

V. Financial Aspect

Total Project Cost

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Sources of Funds

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Projected Income Statements for 5 Years

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Projected Cash Flow Statements for 5 Years

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Projected Balance Sheets for 5 Years

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(use separate sheet if necessary)

VI. Socio-Economic Aspect

Benefits to the Locality

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(use separate sheet if necessary)

VII. Environment Aspect

Impact

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(use separate sheet if necessary)