



Republic of the Philippines
DEPARTMENT OF LABOR AND EMPLOYMENT
 CARAGA Regional Office

APPLICATION FOR REGISTRATION OF JOB CONTRACTORS/SUBCONTRACTORS

1. Business Name: _____ TIN _____
2. Business Address: _____
3. Telephone No. _____ Fax: _____ Email: _____
4. Contact Person and Position: _____
5. Areas of Operation: _____
6. Nature of Business: _____ 7. Industries to be covered _____
8. Number of Regular Workers: _____ Male _____ Female _____
9. Names, Positions and Addresses of Officers and Staff:

Names of Officers/Staff	Position	Postal Address

10. List of Clients (use additional sheet if necessary)

Name and Address of Client/Principal	Nature of Business	Services Provided to Clients/Principal	Description of the Phase of the Contract	Number of Employees Covered in each Phase of the Contract	
				Male	Female

11. UNDERTAKING:

That I, _____, Filipino, of legal age, _____, _____

name civil status position

Of _____, after having been duly sworn to in accordance with law, do

name of company

hereby depose and say:

1. That our company shall abide by all applicable laws and regulations of the Department of Labor and Employment;
2. That the remittances to SSS, HDMF, Philhealth, ECC and BIR will be paid religiously by the company.

In witness whereof, I have hereunto affixed my signature this ___ day of _____ 20__ in

 (Affiant's Name /Signature)

SUBSCRIBED AND SWORN to before me this ___ day of _____ 20___. Affiant exhibited to me his/her Residence Certificate No. _____, issued at _____ on _____.

Doc. No. _____
 Page No. _____
 Book No. _____
 Series of _____

Note: All contracts entered into after this registration shall be reported to the DOLE Regional Office on or before the 10th day of the month immediately following the date of entry into c



Address: Nimfa Tiu Bldg. III, JP Rosales Ave., Butuan City
 Email : dolecaraga13@gmail.com
 Tel. No : (085) 225-3229/ 817-2358

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