



EIN _____

Registry of Establishment
(RULE 1020 Registration)

1. Name of Establishment _____

2. Address _____
Street City/Municipality Province

3. TIN : _____ 4. Telephone No. : _____ Fax No. : _____

Email Address: _____ 5. Name of Manager / Owner _____

6. Nature of Business & Product Manufactured, Service rendered or Merchandise sold:
(Example: Manufacturing: Textile; Construction: Building; Agriculture: Production of Livestock, etc;
Forestry: Logging; Services: Generation and Distribution of Electricity; Commerce: Lumber and
Construction Materials; Wholesale or Retail; Mining: _____)

7. Number of Employees _____

	Total	Filipinos	Resident Alien	Non-Resident Alien	Below 15	Below 15-17 yrs	18-30 yrs	Above 30 yrs.
Male								
Female								
Grand Total								

8. Name & Address of Labor Union, if any: _____
BLR Registration No. _____

9. Technical Information (Please Check / Enumerate)
9a. Machinery, Equipment and Other Devices in use:
 Circular saw Machine Drill Press Boiler Pressure Vessel Internal Combustion Engine
 Engine Diesel Gasoline Others, Specify _____
9b. Materials Handling Equipment:
 Power Trucks Hand Trucks Conveyors Forklift Cranes Others, Specify _____
9c. Chemical or Substances Used or Handled: _____

10. If Branch unit, name of parent establishment: _____
Location _____

11. Current Capitalization _____ Total Assets: _____

12. Photocopy of DTI Certificate of Registration / Business Permit (pls. attach)

FOR RE-REGISTRATION ACCOMPLISH ALSO:
13. Past Application Number _____ Date of Application _____
14. If Changing Name of Establishment, State Former Name: _____
15. If Changing Location, Give Past Address: _____

I hereby certify that the above information is true and correct.

Owner/President

Date Filed: _____ Date Approved: _____ Approved by: _____
(Field Office Head)





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

EIN _____

Please indicate your business' address in the Locator Map:

Draw layout of your office indicating entrance and exit locations and the location of emergency medicine kit/fire extinguishers, etc.

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

OM-27-001
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