




Republic of the Philippines
Province of La Union
MUNICIPALITY OF BAUANG
Office of the Municipal Mayor



Application for <i>MOTORIZED TRICYCLE OPERATOR</i> Permit					<input type="checkbox"/> NEW	DATE
NAME OF TAXPAYER					TEL. NO.	
Last Name		First Name		Middle Name		
RESIDENTIAL ADDRESS						
House No. & Street		Barangay		Municipality		Province
BIRTHDATE	PLACE OF BIRTH	AGE	POSITION/DESIGNATION	BODY NUMBER		
DRIVER'S LICENSE	EXPIRATION DATE OF LICENSE	MOTOR TYPE/ COLOR			ROUTE	
BUSINESS ADDRESS						
I hereby certify the correctness of the foregoing information, I am fully aware that the business permit which maybe issued by virtue thereof is subject to all requirements of existing ordinances including all rules and regulations promulgated by competent authorities of the Municipality of Bauang, La Union.					Signature or RIGHT THUMBMARK of Applicant	
<p>SUBSCRIBED AND SWORN to before me this _____ day of _____ 20____, at Bauang, La Union, Philippines, affiant having exhibited to me his/her Community Tax Certificate No. _____ issued at _____ on _____ 20_____.</p>						
			<p align="right">HON. MENCHIE C. LOMBOY-DE GUZMAN, M.D. <i>Municipal Mayor</i></p>			

APPROVAL RECOMMENDED

BARANGAY CAPTAIN

Municipal Health Officer

VIOLETA B. ABENOJA
Municipal Treasurer

Chief of Police

Mun. Environment & Natural Resources Officer

TODA PRESIDENT

REQUIREMENTS FOR SECURING MOTORIZED TRICYCLE OPERATOR'S PERMIT

- Community Tax Certificate (CEDULA)
- Barangay Clearance
- Municipal Trial Court Clearance
- Police Clearance
- Digital I.D. Picture(Permits & Licensing Division)
- Presentation of Franchise (Previous Year)
- Sanitary Permit
- Professional Driver's License