



Republic of the Philippines  
Office of the City Mayor  
**BUSINESS BUREAU**  
Davao City



**REGISTRATION FORM  
ONLINE PAYMENT**

**TAXPAYER'S NAME** : \_\_\_\_\_

**BUSINESS NAME** : \_\_\_\_\_

**BUSINESS ID NO.** : \_\_\_\_\_  
*(to be filled in by Business Bureau)*

**TAXPAYER'S OFFICIAL E-MAIL** : \_\_\_\_\_

**TAXPAYER'S MOBILE/TEL. NO.** : \_\_\_\_\_

**AUTHORIZED PERSON** : \_\_\_\_\_

*I hereby certify under pain of perjury, that all the information provided herein are true and correct based on my personal knowledge.*

\_\_\_\_\_  
Taxpayer's Signature over Printed Name