



**Part A
General Background on the Applicant Firm**

Name of Applicant Firm			
Address			
Telephone No.		Fax No.	
E-mail Address		Telex No.	

Applicant Firm's Registered Representative(s)			
Name	Position	Address	Contact Nos.

Registered with SEC?	<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, Registration Number	
Year Registered		Authorized Capitalization	
Subscribed Stocks		Paid-up Capital	
Ownership of Firm	<input type="checkbox"/> Filipino <input type="checkbox"/> Foreign	Specify Nationality	

Applicant Firm's Major Shareholders				
Principal Shareholders	Nationality	Domicile	No. of Share	% of Total

Applicant Firm's Chairman, Managing Director, Other Directors and Company Secretary			
Name	Position	Nationality	Domicile

Name, Address, Tel. No. and Country of Origin of Parent Company or Former Company, if any	
Businesses Presently Carried On by the Company in the Philippines, if any	
Current Product Lines/Services	



**Part B
Declared Activity of the Applicant Firm**

Nature of Business	
Activities	
Facilities to be set-up	
Expected Start of Development	
Development Period	

Description of Services and Marketing Process	
Description of Production/Manufacturing Process, if any	

Nature and Description of Capital Equipment to be Imported or Acquired in the Philippines		
Nature and Description of Capital Equipment	Country of Origin	Value

Raw Materials to be Used in Annual Operations			
Raw Materials	Source	Quantity	Value

Portion of the Annual Output to be Exported		
Product	Percent Exported	Principal Export Destination(s)



Vehicles to be Imported into the CSEZFP		
Vehicle	Country of Origin	Value

**Part C
Location Requirements**

Applicant Firm's Intended Location in the CSEZFP (attach commitment letter or other evidence of acceptability)	
Total Land Area Required by the Applicant Firm (in sqm)	
Estimated Under-roof Floor Space of Facility Required (in sqm)	
Is the applicant firm leasing a building, or land only to construct a building?	
Special Requirements for Buildings and Facilities	
Other Locational Factors	
Is the applicant firm interested in leasing residential facilities for its employees in the CSEZFP? (If yes, indicate extent of interest and commitment.)	

Utilities/Services Required for the Operation (with average and peak loads and annual consumption)	
Utility/Service	Estimated Consumption Indicators
Water	
Power	
Telecommunications	
Others (pls. Specify)	

**Part D
Employment Requirements of the Applicant Firm**

Cumulative Employment Level in the First 5 Years (Provide breakdown by positions to be held)					
Position	Year 1	Year 2	Year 3	Year 4	Year 5



Salary and Benefits of All Employees		
Position	Salary	Benefits
Managerial		
Supervisory	Contractual	
	Permanent	
Rank and File	Contractual	
	Permanent	
Workers/Laborers	Contractual	
	Permanent	

Expatriate Positions Required at Project Start-up and Operation (attach application for Work Permit)	
Position	Projected Duration of Service

Programs to be Instituted to Train Local Residents for Employment and Hiring	
Program	Description

**Part E
Financing of the Applicant Firm**

Sources of Capital		
Equity Investment by Principal (please note source)	Debt (lender and terms)	Grants



Cumulative Project Cost					
	Year 1	Year 2	Year 3	Year 4	Year 5
Land					
Land Improvements					
Buildings					
Plant Machinery and Equipment					
Transport Equipment					
Office Equipment					
Furniture and Fixtures					
Other Assets					
Sub-Total					
Working Capital					
TOTAL PROJECT COST					
* please submit breakdown of land, buildings, equipment and other assets					

Projected Income				
Year 1	Year 2	Year 3	Year 4	Year 5

**Part F
Other Information**

Will there be any noxious effluent, atmospheric emission, or excessive levels of noise and vibration resulting from your operations? No Yes If so, what arrangements will be made for its control and has the cost been included in the estimate of facilities above?

Solid Waste	
Description	Estimated Volume/Day

Liquid Waste	
Description	Amount/Day

Brief Description of Waste Disposal System



Part G
Verification of Information

The information presented above and in the attached statements are to the best of my knowledge true and correct, and that the projections are realistic, given the information that is readily available.

Authorized Representative:

Date:

(Signature/Printed Name)
