



AGRIBUSINESS MANAGEMENT ASSISTANCE DIVISION

APPLICATION FORM: APPROVED DISAPPROVED

GENERAL INFORMATION

Enterprise Name: _____

Name of Head of Enterprise /Owner: _____

Business Address If production, farm site/location: _____

Contact No.: _____

Business Email Address : _____

LIST OF REQUIREMENTS (Photocopy of the Following)			
NO.	PARTICULARS	YES	NO
1	Business/Mayor's Permit		
2	DTI Certificate for Sole proprietor, CDA/CSEA Certificate for Cooperatives and MOLE/DOLE Certificate for Associations		
3.	In case of a member of a Cooperative/Association a proof/certificate that he/she is a member of the association/cooperative		
4.	In case of a member of a Cooperative/Association a consent from the President of the Cooperative/Association together with a photocopy of the president's Identification Card (ID).		
5.	Identification Card (ID) of the Business owner		
7.	Are you a farmer or fisherfolk?		
8.	In case of a farmer or fisherfolk, provide your RSBSA no.		

➤ Do you have existing physical store? Yes No
 If yes, where? _____

➤ Are you willing to sell your products at a lower price? Yes No

➤ Your primary product please specify:

➤ List of products you are planning to sell:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

➤ Appliances you will be using (*Ex: Gas Stove, Electric Fryer etc.*)

1. _____
2. _____

I hereby signify that all information above is true and correct.

 Signature over Printed Name

Deadline of Submission : _____, 2024

NOTE: By filling up this form does not necessarily mean that your application is automatically approved.