

Sole Proprietorship Business License Application Form

A. Applicant Information

Full Name of Sole Proprietor

Home Address

Contact Number

Email Address

B. Business Details

Business Name

Business Address

Nature/Type of Business

Taxpayer Identification Number (TIN)

Proposed Start Date of Business

C. Business Operation Details

Number of Employees

Operating Hours

Do you own, rent, or lease your business premises?

D. Declaration

I hereby declare that the information provided is true and correct to the best of my knowledge. I agree to abide by all applicable laws and regulations governing business operations in this jurisdiction.

Signature

Date

Submit Application

This is a sample format. Please check your local government's requirements for specific documentation.