

(To be filled out by BIR) DLN: \_\_\_\_\_

BIR Form No.



Republic of the Philippines  
Department of Finance  
Bureau of Internal Revenue

# Application for Registration

# 1902

January 2018 (ENCS)

For Individuals Earning Purely Compensation Income  
(Local and Alien Employee)

610 - 811 - 818 - 00000  
New TIN to be issued, if applicable (To be filled out by BIR)

Fill in all applicable white spaces. Write "NA" for those not applicable. Mark all appropriate boxes with an "X"

### Part I - Taxpayer/Employee Information

1 PhilSys Number (PSN)

2 Taxpayer Type

3 BIR Registration Date  
(To be filled out by BIR) (MM/DD/YYYY)

4 Taxpayer Identification Number (TIN)  
(For Taxpayer with existing TIN)

Local  Resident Alien  Special Non-Resident Alien   
- - - 00000

5 RDO Code  
(To be filled out by BIR)

6 Taxpayer's Name

Last Name

First Name

ORA

MARIA FE

Middle Name

Suffix

POGOY

7 Gender

Male

Female

8 Civil Status



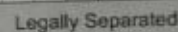
Single



Married



Widow/er



Legally Separated

9 Date of Birth (MM/DD/YYYY)

10 Place of Birth

08102002

TUBIGON BOHOL

11 Mother's Maiden Name (First Name, Middle Name, Last Name)

GLORIA CEROYLA POGOY

12 Father's Name (First Name, Middle Name, Last Name)

FELIPE REGERVA ORA

13 Citizenship

14 Other Citizenship

FILIPINO

15 Local Residence Address

Unit/Room/Floor/Building No.

Building Name/Tower

Lot/Block/Phase/House No.

Street Name

Subdivision/Village/Zone

PURUK 5

Barangay

Town/District

PANDAN

Municipality/City

TUBIGON

Province

ZIP Code

BOHOL

6329

16 Foreign Address

17 Municipality Code  
(To be filled out by BIR)

18 Tax Type

INCOME TAX

19 Form Type

BIR Form No. 1700

20 ATC

II 011

21 Identification Details (e.g. passport, government issued ID, company ID, etc.)

Type

Number

Effective Date (MM/DD/YYYY)

Expiry Date (MM/DD/YYYY)

Issuer

Place/Country of Issue

22 Preferred Contact Type

Landline No.

Mobile Number

09481065559

Email Address (required)

marlataora10@gmail.com

### Part II - Spouse Information (if applicable)

23 Employment Status of Spouse

Unemployed

Employed Locally

Employed Abroad

Engaged in Business/Practice of Profession

24 Spouse Name

Last Name

First Name

Middle Name

Suffix

25 Spouse TIN

- - - 00000

26 Spouse Employer's Name (Last Name, First Name, Middle Name, if individual) (Registered Name, if not individual)

27 Spouse Employer's TIN