



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

APPLICATION FOR REGISTRATION

Enter all required information in CAPITAL LETTERS using BLACK Ink. Mark all applicable boxes with an "X". One copy must be filed with the BIR and one held by the taxpayer.

BIR Form No.

1904

January 2016 (ENCS)

For One-Time Taxpayer and Person Registering under E.O. 98
(Securing a TIN to be able to transact with any government office)

1 PhilSys Number (PSN) <small>(If Applicable)</small>	2 Taxpayer Identification Number (TIN)	3 Date of Registration <small>(MM/DD/YYYY)</small>	4 RDO Code
	505 808 299	09 20 21	

Part I - Taxpayer Information

5 Taxpayer Type

<input checked="" type="checkbox"/> E.O. 98 (Filipino Citizen)	<input type="checkbox"/> One-Time Transaction - Foreign National	<input type="checkbox"/> Passive Income Earner Only
<input type="checkbox"/> E.O. 98 (Foreign National)	<input type="checkbox"/> Non-Resident Foreign Corporation	
<input type="checkbox"/> One-Time Transaction - Filipino Citizen	<input type="checkbox"/> Non-Resident Foreign Partnership	

6 Foreign TIN (if any) _____ 7 Country of Residence _____

8 Taxpayer's Name (if individual) Last Name First Name Middle Name Suffix Nickname

DELA PEÑA KAYLO NATURA

9 Taxpayer's Name (if Non-Individual, Registered Name) _____

10 Taxpayer's Name (if ESTATE, ESTATE of (First Name, Middle Name, Last Name, Suffix)) (if TRUST, FAO: (First Name, Middle Name, Last Name, Suffix))

11 Local/Registered Address

Unit/Room/Floor/Building No. Building Name/Tower

Lot/Block/Phase/House No. Street Name

Subdivision/Village/Zone. Barangay

Town/District Municipality/City

Province ZIP Code

LAWIS LOREGA SAN MIGUEL CEBU CITY 6000

12 Principal Foreign Address (indicate complete foreign address) _____

13 Date of Birth/Organization (MM/DD/YYYY) 14 Contact Number (Phone/Mobile No.) 15 Date of Arrival in the Philippines (MM/DD/YYYY) 16 Municipality Code (To be filed-up by BIR)

09 26 2001 09 389313713 1 1

17 Mother's Maiden Name 18 Father's Name

ROSENA NATURAL (DECEASED) JEROME DELA PEÑA (DECEASED)

19 Gender 20 Email Address

Male Female KAYLODELAPEÑA@gmail.com

Part II - Transaction Details

21 Purpose of TIN Application

A Dealings with Banks B Dealings with Government Agencies C Tax Treaty Relief

Part III - Withholding Agent/Accredited Tax Agent Information

22 Taxpayer Identification Number (TIN) 23 RDO Code

24 Withholding Agent/Accredited Tax Agent's Name (Last Name, First Name, Middle Name for Individual)/(Registered Name for Non-Individual) (if different from taxpayer)

25 Registered Address (Sub-street, Building/Street, Barangay, City/Municipality, Province)

26 Contact Number (Phone/Mobile No.) 27 Email Address 25A ZIP Code

28 Declaration

I declare, under the penalties of perjury, that this application has been made in good faith, verified by me and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give my consent to the processing of my information as contemplated under the Data Privacy Act of 2012 (RA 10173).

Stamp of BIR Receiving Office and Date of Receipt