



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Application for Registration

BIR Form No.

1902

October 2015 (ENCS) P1

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

695 - 142 - 961 - 00000
New TIN to be issued, if applicable (To be filled out by BIR)

Fill in all applicable white spaces. Mark all appropriate boxes with an "X"

1 BIR Registration Date (To be filled out by BIR) (MMDDYYYY) FEB 03 2020 2 PhilSys Card Number (PCN) 3750 - 3963 - 1876 - 1457

Part I - Taxpayer/Employee Information

3 Taxpayer Identification Number (TIN) (For Taxpayer with existing TIN) 000000 4 RDO Code (To be filled out by BIR) 080 5 Taxpayer Type Local Resident Alien Special Non-Resident Alien

6 Taxpayer's Name (Last Name) (First Name)

FORTICH

SHARAH MAY

(Middle Name)

(Suffix)

7 Gender

Male

Female

8 Civil Status Single Married Widower Legally Separated

9 Date of Birth (MMDDYYYY) 015 211 2101016 10 Place of Birth Cebu City, cebu

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

Wealth Mendez Batomalaque

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

Reynard Bardisco Fortich

13 Citizenship 14 Other Citizenship, if applicable

FILIPINO

15 Local Residence Address Unit/Room/Floor/Building No. Building Name/Tower

Lot/Block/Phase/House No. Street Name

Subdivision/Village/Zone Barangay

VILLA SEBASTIANA

JAGOBIAO

Town/District Municipality/City

MANDAUE CITY

Province

ZIP Code

CEBU

6014

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 (government issued ID (e.g., passport, driver's license, etc.), company ID, etc.)

Type Number Effectivity Date (MMDDYYYY) Expiry Date (MMDDYYYY)

PASSPORT

PB65233B

011 010 2101212 011 015 2101217

Issuer OFA Place/Country of Issue PHILIPPINES

22 Preferred Contact Type Landline Number Fax Number Mobile Number

0947-490-0910

Email Address (required) fortichshara@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

000000

26 Spouse Employer's Name (If Individual, Last Name, First Name, Middle Name, Suffix) (If Non-Individual, Registered Name) (Attach additional sheets, if necessary)

27 Spouse Employer's TIN