

Filed out by BIR) DLN:



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Application for Registration

698 920 750 0000
New TIN to be issued, if applicable (To be filled out by BIR)

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

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

1 BIR Registration Date (To be filled out by BIR) (MM/DD/YYYY) **MAR 18 2026** 2 PhilSys Card Number (PCN) **6509-1378-2751-2059**

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) **SANTUELE** (First Name) **SHARMAINE**
(Middle Name) **TUDOS** (Suffix) Male Female

8 Civil Status Single Married Widower Legally Separated

9 Date of Birth (MM/DD/YYYY) **05 18 2000** 10 Place of Birth **CONSOLACION, CEBU**

11 Mother's Maiden Name (First Name, Middle Name, Last Name, Suffix) **SHARMAINE JUVELYN SALSALDO TUDOS**

12 Father's Name (First Name, Middle Name, Last Name, Suffix) **SAMUEL MARUYA SANTUELE**

13 Citizenship **PHILIPINO** 14 Other Citizenship, if applicable

15 Local Residence 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
4 - PEPITO ST. POPULATION ORIENTAL CONSOLACION CEBU

16 Foreign Address

17 Municipality Code (To be filled out by BIR) 18 Tax Type **INCOME TAX** 19 Form Type **1700** 20 ATC **11011**

21 Identification Details (government issued ID (e.g., passport, driver's license, etc.), company ID, etc.)
Type **PASSPORT** Number **P4460070C** Effectivity Date (MM/DD/YYYY) **016 211 210 23** Expiry Date (MM/DD/YYYY) **016 202 103 3**

Issuer **DFA** Place/Country of Issue **PHILIPPINES**

22 Preferred Contact Type
 Landline Number Fax Number Mobile Number **0954-347-8959**
 Email Address (required) **mincontuele@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 **0000**

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

27 Spouse Employer's TIN