



Application for Registration

For One-time Taxpayer and Person Registering under E.O. 96
(Securing a TIN to be able to transact with any government office)

TIN to be issued (To be filled out by BIR)
677 709 583 00000

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

1 Date of Registration (MM/DD/YYYY) 11/15/2025	2 PhilSys Card Number (PCN) (If Applicable)	3 RDO Code (To be filled out by BIR) 067
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Part I - Taxpayer Information

4 Taxpayer Type

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

5 Foreign TIN (if any) _____ 6 Country of Residence, if applicable _____

7 Taxpayer's Name

7A (If Individual) (Last Name) (First Name) (Middle Name) (Suffix) (Nickname)
LACSON JOSHUA LEDESMA

7B (If Non-Individual) (Registered Name) _____

7C (If ESTATE, ESTATE of (First Name, Middle Name, Last Name, Suffix)) (If TRUST, FID. (First Name, Middle Name, Last Name, Suffix)) _____

8 Date of Birth/Organization (MM/DD/YYYY) 11/26/2005 9 Place of Birth Vicente Sotto, Cebu City, Cebu

10 Local Residence Address

Unit/Room/Floor/Building No. Building Name/Tower Lot/Block/Phase/House No. Street Name

Subdiv/Village/Zone Barangay Town/City

Municipality/City Province ZIP Code

Talisay City CEBU 6045

11 Principal Foreign Address (If applicable, indicate complete foreign address) _____ 12 Municipality Code (To be filled out by BIR) _____

13 Date of Arrival in the Philippines (MM/DD/YYYY) _____ 14 Gender Male Female 15 Civil Status Single Married Widower Legally Separated

16 Contact Number (Landline/Mobile No.) 09199451990 17 Official Email Address Joshua.lacson@gmail.com

18 Mother's Maiden Name (First Name, Middle Name, Last Name, Suffix) Ela, Abate, Ledesma 19 Father's Name (First Name, Middle Name, Last Name, Suffix) Joe Sandy, Gustilo, Lacson

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

Type	Number	Effectivity Date (MM/DD/YYYY)	Expiry Date (MM/DD/YYYY)
Postal id			

Part II - Spouse Information

21 Employment Status of Spouse Unemployed Employed Locally Employed Abroad Engaged in Business/Practicing Profession

22 Spouse Name (Last Name, First Name, Middle Name, Suffix) _____ 23 Spouse TIN 000000

24 Spouse Employer's Name (If Individual, Last Name, First Name, Middle Name, Suffix) (If Non-Individual, Registered Name) (Attach additional sheets, if necessary) _____ 25 Spouse Employer's TIN _____

Part III - Transaction Details

26 Purpose of TIN Application

<input type="checkbox"/> A Dealings with Banks	<input type="checkbox"/> B Dealings with Government Agencies	<input type="checkbox"/> C Tax Treaty Relief	<input type="checkbox"/> D Sale, Assignment and/or Disposal of Shares of Stock
<input type="checkbox"/> E Sale, Assignment and/or Disposal of Real Property/lot described as Capital Asset	<input type="checkbox"/> F Sale, Assignment and/or Disposal of Real Property/lot not a Capital Asset	<input type="checkbox"/> G Donation of Properties	<input type="checkbox"/> H Transfer of Properties by Succession (Debit)
<input type="checkbox"/> I First Time Job Seeker	<input type="checkbox"/> J Others (specify) _____		

Part IV - Withholding Agent/Accredited Tax Agent Information

27 Taxpayer Identification Number (TIN) _____ 28 RDO Code _____

29 Withholding Agent/Accredited Tax Agent's Name (If Individual, Last Name, First Name, Middle Name, Suffix) (If Non-Individual, Registered Name) (if different from taxpayer) _____