



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

January 2018 (I NCR)
New TIN to be issued, if applicable (To be filled out by BIR)
757 610 654 - 000000

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 <input type="checkbox"/> Local <input type="checkbox"/> Resident Alien <input type="checkbox"/> Special Non-Resident Alien		3 BIR Registration Date (To be filled out by BIR) (MM/DD/YYYY)	
4 Taxpayer Identification Number (TIN) (For Taxpayer with existing TIN)		- 0 0 0 0 0 0		5 RDO Code (To be filled out by BIR)	
6 Taxpayer's Name Last Name: ROSALES Middle Name: SHEM First Name: LORD Suffix:					
7 Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female				8 Civil Status <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widower <input type="checkbox"/> Legally Separated	
9 Date of Birth (MM/DD/YYYY) 07 30 1999		10 Place of Birth DIPOLTOB CITY			
11 Mother's Maiden Name (First Name, Middle Name, Last Name) LEONICA SARANILLO SAMORA					
12 Father's Name (First Name, Middle Name, Last Name) EURICO CARUSO SAMSON ROSALES					
13 Citizenship FILIPINO			14 Other Citizenship		
15 Local Residence Address Unit/Room/Floor/Building No.: V1 Building Name/Tower: 399 COMPOUND Lot/Block/Phase/House No.: Street Name: U RAMA Subdivision/Village/Zone: Barangay: GUADALUPE Town/District: Municipality/City: CEBU CITY					

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 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 <input type="checkbox"/> Landline No. <input type="checkbox"/> Mobile Number		<input type="checkbox"/> Email Address (required)			

Part II - Spouse Information (if applicable)

23 Employment Status of Spouse <input type="checkbox"/> Unemployed <input type="checkbox"/> Employed Locally <input type="checkbox"/> Employed Abroad <input type="checkbox"/> Engaged in Business/Practice of Profession					
24 Spouse Name Last Name: Middle Name: First Name: Suffix:					
25 Spouse TIN		- 0 0 0 0 0 0			
26 Spouse Employer's Name (Last Name, First Name, Middle Name, if Individual) (Registered Name, if Non-Individual)					
27 Spouse Employer's TIN		-			

26 Type of Multiple Employments

- Successive Employments (With previous employers within the calendar year)
 Concurrent Employments (With two or more employers at the same time within the calendar year) -
 (If successive, enter previous employers; if concurrent, enter secondary employers)

Previous and/or Concurrent Employments During the Calendar Year

29A Name of Employer	29B TIN of Employer
30A Name of Employer	30B TIN of Employer
31A Name of Employer	31B TIN of Employer

32 Declaration
 I declare under the penalties of perjury that this application, and all its attachments, have 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 (R.A. No. 10173) for legitimate and lawful purposes.

Shem Lord J. Rosales
 Taxpayer (Employee) Authorized Representative
 (Signature over Printed Name)

Part IV - Primary/Current Employer Information

33 Type of Registering Office
 Head Office Branch Office

34 TIN 484 634 961 000

35 RDO Code

36 Employer's Name (Last Name, First Name, Middle Name, if Individual) (Registered Name, if Non Individual)
I.P.L.O.Y. I.N.C.

37 Employer's Address

Unit/Room/Floor/Building No. 9TH FLOOR Building Name/Tower AYALA CENTER CEBU TOWER
 Lot/Block/Phase/Zone No. BOHOL STREET Street Name
 Subdivision/Village/Zone CEBU BUSINESS PARK Municipality/City CEBU CITY
 Province CEBU City Code 6000

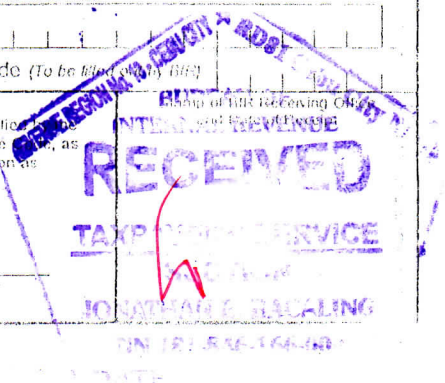
Landline Number _____ Fax Number _____ Mobile Number _____

38 Relationship Start Date/Date Employee was Hired (MM/DD/YYYY) _____ 40 Municipality Code (To be filled only by filer) _____

41 Declaration
 I declare under the penalties of perjury that this application and all its attachments, have 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 (R.A. No. 10173) for legitimate and lawful purposes.

Jaysa Cabuya
 EMPLOYER AUTHORIZED REPRESENTATIVE
 (Signature over Printed Name)

HR
 Title/Position of Signatory



*Note: The BIR Data Privacy Policy is in the BIR website (www.bir.gov.ph)

Documentary Requirements:

For Local Employee:

- 1. Any identification issued by an authorized government body (e.g. Birth Certificate, Passport, Driver's License, etc.) that shows the name, address and birthdate of the applicant.
- 2. Marriage Contract, if applicable.

For Alien Employee:

- 1. Passport
- 2. Working Permit or photocopy of duly received Application for Alien Employment (AEP) by the Department of Labor and Employment (DOLE)

POSSESSION OF MORE THAN ONE TAXPAYER IDENTIFICATION NUMBER (TIN) IS CRIMINALLY PUNISHABLE PURSUANT TO THE PROVISIONS OF THE NATIONAL INTERNAL REVENUE CODE OF 1997, AS AMENDED.