



**Part III - For Employee with Two or More Employers (Multiple Employments) Within the Calendar Year**

**28 Type of Multiple Employments**

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

**Previous and/or Concurrent Employments During the Calendar Year**

<b>29A</b> Name of Employer		<b>29B</b> TIN of Employer	
<b>30A</b> Name of Employer		<b>30B</b> TIN of Employer	
<b>31A</b> Name of Employer		<b>31B</b> 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.

  
 HONEY LOU R. ATIG

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

**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.

9 T H F L O O R

Lot/Block/Phase/House No.

Building Name/Tower

A Y A L A C E N T E R C E B U T O W E R

Street Name

B O H O L

Subdivision/Village/Zone

Barangay

Town/District

Municipality/City

C E B U C I T Y

Province

ZIP Code

C E B U

6 0 0 0

**38** Contact Details

Landline Number  Fax Number  Mobile Number

**39** Relationship Start Date/Date Employee was Hired (MM/DD/YYYY)

0 9 2 1 2 0 2 0

**40** Municipality Code (To be filled out by BIR)

**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.

Stamp of BIR Receiving Office and Date of Receipt

EMPLOYER/AUTHORIZED REPRESENTATIVE  
*(Signature over Printed Name)*

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.