



# National Food Authority

## APPLICATION FOR REGISTRATION / LICENSE FOR :

**WAREHOUSING**

**ANNEX D**

|                         |  |                       |                              |  |                        |   |  |  |
|-------------------------|--|-----------------------|------------------------------|--|------------------------|---|--|--|
| TO BE FILLED OUT BY NFA |  |                       | DATE FILED<br>DAY MONTH YEAR |  |                        | <input type="checkbox"/> CURRENT YEAR <input type="checkbox"/> 2ND YEAR <input type="checkbox"/> 3RD YEAR |  |  |
| PLACE OF FILING         |  |                       | CONTROL NO.                  |  | REGISTRATION PLATE NO. |   | LICENSE PLATE NO.  |  |
| RURBAN CODE             |  |                       |                              |  |                        |   | <input type="checkbox"/> NEW <input type="checkbox"/> ADDITIONAL BUSINESS LINE<br><input type="checkbox"/> RENEWAL <input type="checkbox"/> ADDITIONAL WAREHOUSE |  |
| TIN NO.                 |  | APPLICANT'S LAST NAME |                              |  | GIVEN NAME             |   | MIDDLE NAME  |  |

|                                |   |
|--------------------------------|---|
| REGISTERED BUSINESS TRADE NAME | PRINCIPAL PLACE OF BUSINESS (NO. & STREET, TOWN/CITY, PROVINCE) |
|--------------------------------|---|

| TYPE OF WAREHOUSE | GRAINS STORED (Pls. Check) |      |       |        | NO. OF UNITS | LOCATION (NO. & STREET, TOWN / CITY, PROVINCE) | (✓) MAIN OR BRANCH |   | (TO BE FILLED OUT BY NFA)<br>RURBAN CODE | CAPACITY       |                 | (TO BE FILLED OUT BY NFA)<br>LICENSE PLATE NO. / STICKER NO. |
|-------------------|----------------------------|------|-------|--------|--------------|--|--------------------|---|--|----------------|-----------------|--|
|                   | CORN                       | RICE | PALAY | OTHERS |              |  | M                  | B |  | IN CUBIC METER | IN BAGS (50 kg) |  |
| A. CONVENTIONAL   |                            |      |       |        | 1            |  |                    |   |  |                |                 |  |
|                   |                            |      |       |        | 2            |  |                    |   |  |                |                 |  |
|                   |                            |      |       |        | 3            |  |                    |   |  |                |                 |  |
|                   |                            |      |       |        | 4            |  |                    |   |  |                |                 |  |
| B. SILO           |                            |      |       |        | 1            |  |                    |   |  |                |                 |  |
|                   |                            |      |       |        | 2            |  |                    |   |  |                |                 |  |
|                   |                            |      |       |        | 3            |  |                    |   |  |                |                 |  |

|                                  |                                 |                        |  |                 |                      |
|----------------------------------|---------------------------------|------------------------|--|-----------------|----------------------|
| NATURE OF OWNERSHIP (pls. check) | <input type="checkbox"/> OWNED  | DATE ACQUIRED / LEASED | ACQUISITION COST / LEASE AMOUNT PER YEAR | WORKING CAPITAL | TOTAL CAPITALIZATION |
|                                  | <input type="checkbox"/> LEASED |                        | ₱  | ₱               | ₱                    |

WAREHOUSE USED FOR:   
 OWN STOCKS   
 OWN PRODUCE   
 THIRD PARTY STOCKS/DEPOSITS

IF WAREHOUSE APPLIED FOR FRANCHISE:   
 CAPACITY APPLIED (in 50 kg bag)   
 CAPACITY APPLIED FOR:   
 OWN STOCKS/PRODUCE   
 THIRD PARTY STOCKS/DEPOSITS

IF WAREHOUSE IS USED FOR THIRD PARTY DEPOSITS AND/OR APPLIED FOR FRANCHISE:

| NAME AND ADDRESS OF SURETY CO.    | AMOUNT OF BOND/INSURANCE | COVERAGE (IN NO. OF BAGS) | COVERING PERIOD |    |
|-----------------------------------|--------------------------|---------------------------|-----------------|----|
|                                   |                          |                           | FROM            | TO |
| NAME AND ADDRESS OF INSURANCE CO. | ₱                        |                           |                 |    |
| OTHERS (SPECIFY TYPE OF BOND)     | ₱                        |                           |                 |    |

|             |                  |   |
|-------------|------------------|---|
| LICENSE FEE | REGISTRATION FEE | _____<br>SIGNATURE OVER PRINTED NAME OF THE APPLICANT / AUTHORIZED REPRESENTATIVE |
| ₱           | ₱                |   |
| O.R. NO.    | O.R. NO.         |   |
| O.R. DATE   | O.R. DATE        |   |

(TO BE FILLED OUT BY NFA)  
**REMARKS / RECOMMENDATIONS**

---



---



---

|     |                 |                            |                   |               |
|-----|-----------------|----------------------------|-------------------|---------------|
| DAY | DATE MONTH YEAR | PROCESSED BY : PROV'L. RLO | PROV'L. MGR. /OIC | DATE APPROVED |
| DAY | MONTH YEAR      | REVIEWED BY : REG'L. RLO   |                   | DAY           |