PLEASE PRINT CLEARLY. USE A BLACK BALLPEN ALL THREE (3) COPIES MUST BE LEGIBLE. NOT FOR SALE NFA FORM NO. ISD-IRD-057-L TO BE FILLED OUT BY NFA **National Food Authority** DATE FILED INSTITUTION **ESTABLISHMENT APPLICATION FOR REGISTRATION FOR** PLACE OF FILING ANNEX L ☐ CURRENT YEAR 2ND YEAR ☐ 3RD YEAR POULTRY / HOG OULTRY/HOG REG. NO. RURBAN CODE RAISING TIN NO. APPLICANT'S LAST NAME GIVEN NAME MIDDLE NAME 3 ADDT'L. BUS. LINE REGISTERED BUSINESS TRADE NAME PRINCIPAL PLACE OF BUSINESS INSTITUTION 1 NEW 2 RENEWAL **ESTABLISHMENT** 4 ADDT'L. ESTABT. PLEASE INDICATE THE NO. OF UNIT(S) IN THE APPROPRIATE BOX 1 HOTEL / MOTEL 4 DORMITORY / BOARDING HOUSE 7 COMMERCIAL/INDUSTRIAL COMPANY 10 OTHERS (SPECIFY) 2 HOSPITAL / CLINIC 5 SHIPPING/FISHING COMPANY 8 CHARITABLE/RELIGIOUS SCHOOL AND USE 3 REST./CANTEEN/EATERY/KITCHENETTE 6 AGRICULTURAL COMPANY LOGGING/MINING COMPANY (TO BE FILLED OUT BY INDICATE CITY OR MUNICIPALITY AVE. WEEKLY CONSUMPTION LIMIT LOCATION AND PROVINCIAL SOURCE OF GRAINS RURBAN CODE NO. NO. OF BAGS WT PER BAG TOTAL (IN KG.) М В RURBAN CODE AND/OR THEIR SUBSTITUTES RICE CORN OTHERS (SPECIFY) 3 POULTRY / HOG 1 NEW 3 ADDT'L. BUS. LINE EGISTERED BUSINESS TRADE NAME PRINCIPAL PLACE OF BUSINESS 4 ADDT'L. ESTABT (TO BE FILLED OUT BY POULTRY/HOG DAILY MIXED FEED CONSUMPTION UNIT KIND OF LOCATION HOUSING AREA POPULATION LIVESTOCK NO. М В (SQ. FT.) NO. OF BAGS WT PER BAG TOTAL (IN KG.) 1 2 3 TOTAL CAPITALIZATION ANNUAL GROSS INCOME OO YOU MIX YOUR OWN FEEDS? ☐ NO IF YES, PLEASE ANSWER QUESTIONS BELOW DAILY MIXED EQUIPMENT/MACHINERY USED **INGREDIENTS** MONTHLY REQUIREMEN INDICATE CITY OR MUNICIPALITY RURBAN FEED OUTPL AND PROVINCIAL SOURCE OF GRAINS TYPE/BRAND NO. OF UNITS CAPACITY KIND BAGS 2. CORN OTHERS (SPECIFY NSTITUTION/ESTABLISHMENT FEE POULTRY / HOG FEE SIGNATURE OVER PRINTED NAME OF THE APPLICANT / O.R. NO D.R. NO **AUTHORIZED REPRESENTATIVE** O.R. DATE O.R. DATE PROCESSED BY : PROV'L. RLO PROV'L. MGR. / OIC DATE APPROVED

MO.

DAY

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