Please provide all required information, write NA if not applicable.

EMB EDA Form002

Department of Trade & Industry
EXPORT MARKETING BUREAU
Former Bureau of Export Trade Promotion

APPLICATION FOR ACCREDITATION OF EXPORTERS

COMPANY _____
OFFICE ADDRESS _____
FACTORY/PLANT ADDRESS _____
TELEPHONE NOS. _____
FAX NOS. _____ E-MAIL: _____
NAME & POSITION OF CONTACT PERSON _____

YEAR ESTABLISHED _____
LEGAL PERSONALITY:

SINGLE PROPRIETORSHIP CORPORATION
PARTNERSHIP OTHERS

PRODUCT LINES: _____
_____

PRODUCTION CAPACITY: _____

NUMBER OF EMPLOYEES: _____ OFFICE _____ OTHERS
_____ FACTORY _____ TOTAL

GROSS SALES (In Philippine Pesos):

YEAR	DOMESTIC (ACTUAL)	(%)	EXPORT (ACTUAL)	(%)	TOTAL
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I hereby certify that the above information are true and correct and that relevant export/commercial documents (export declaration, bill of lading/air waybill, commercial invoice, packing list) shall be made available to verify the same.

_____
(Signature of CEO over Printed Name)

_____
Position

Subscribed and sworn to before me this ____ day of _____ 20___ with the affiant exhibiting to me his/her Residence Certificate No. _____ dated _____ issued at _____.

DOC. NO. _____
PAGE NO. _____
BOOK NO. _____
SERIES OF 20 _____.