

Republic of the Philippines
Department of Agriculture
PHILIPPINE FIBER INDUSTRY DEVELOPMENT AUTHORITY
Region _____

Control No. : _____
Date Applied : _____
Date Released : _____
License Expires on : _____

APPLICATION FOR FIBER TRADER-EXPORTER LICENSE
(Original)

The Executive Director
PhilFIDA, Quezon City

Thru: The Regional Director
Region _____

Sir/Madam:

I have the honor to apply for a **Trader-Exporter License** pursuant to PD 652 in relation to Executive Order Nos. 709, 116 and 366, and in accordance with the provisions of PhilFIDA Administrative Circular No. 12:

1. Name of Establishment : _____
Address : _____
Tel. No. _____ Fax No. _____ E-mail _____
Metro. Mla. (if any) : _____
Tel. No. _____ Fax No. _____ E-mail _____;
2. That I, _____, _____ (Nationality)
residing at _____ with TIN: _____
represent the above establishment as _____ (Pres./Mgr./Prop.);
3. That I intend to use _____ as my registered mark;
4. That the form of my business organization is single proprietorship partnership
 corporation cooperative operating under PD No. 175 and LOI No. 23;
5. That my fibers will be baled and graded by _____
_____ (Name/Address of Licensed GBE /Baler);
6. That I intend to export _____ fiber/s to _____ (country);
7. That I am submitting the following document/s to support my application : (Please check appropriate box)
 Company Profile with Complete List of Officers Certificate of Registration from SEC
(for corporation/partnership)
 Mayor's Permit or Business Permit
 Certificate of Registration from DTI- BTRCP
(for sole proprietorship)
 Certificate of Registration by the Cooperative
Development Authority (CDA), for Cooperative.
8. That I shall provide a segregating partition in case commodities other than fiber are also stored in the same bodega;
9. That I shall allow PhilFIDA authorized representative to have free access to my establishment ;
10. That I shall submit monthly statistical information/data required by PhilFIDA for monitoring purposes;

11. That I have _____ (number) employee/s of whom _____ (number) is/are male/s/ _____ senior citizen/s/ _____ pwd/s/ and _____ (number) is/are female/s/ _____ senior citizen/s/ _____ pwd/s/ with an average of _____ (number) dependent/s per employee;
12. That I and my personnel shall at all times comply with PhilFIDA rules and regulations.

I hereby certify under the penalty of law to the veracity of the above statements and that this application was prepared by me or my authorized representative under my personal direction.

Printed Name and Signature of Applicant

REPUBLIC OF THE PHILIPPINES)
PROVINCE OF _____) S.S.
Municipality of _____)

SUBSCRIBED AND SWORN to before me on this _____ day of _____ 20__ affiant exhibiting to me his/her Community Tax Certificate No. _____ issued at _____ on _____ 20____.

Notary Public
Until December 20 __

Doc. No. _____
Book No. _____
Page No. _____
Series of _____

CERTIFICATION
(To be filled out by the Licensing Personnel)

I hereby certify that the application of _____ for Trader-Exporter License has been reviewed/verified by me and that all requirements are duly complied.

Application fee of _____ (P _____) and license fee of _____ (P _____) for a total of _____ (P _____) was paid under OR No. _____ dated _____.

Remarks: _____.

Attested by:

Verified by:

OIC - Regional Director

Printed Name and Signature

Designation

LICENSE FORM 01
(For Original)
Revised 2021

Republic of the Philippines
Department of Agriculture
PHILIPPINE FIBER INDUSTRY DEVELOPMENT AUTHORITY
Region _____

Date of Inspection

**REPORT ON INSPECTION/EVALUATION OF FACILITIES/PREMISES
(FOR GBE, CLASS A TRADER & TRADER-EXPORTER ONLY)**

1. Name of Establishment _____
2. Address: _____ IS/Reg. Mark: _____ Class: _____
3. Location of warehouse/premises & facilities: _____

Facilities/Premises:	<u>Rating</u>	<u>Standard Rating</u>
a. With partition to segregate fiber in case other commodities are stored in the same bodega _____	_____	30%
b. With clean storage and adequate classification area _____	_____	20%
c. With adequate lighting facilities _____	_____	20%
d. With hanging poles/other similar facilities for drying _____	_____	10%
e. With restriction signs, such as “no smoking” “no plastic allowed”, etc. _____	_____	10%
f. Weighing Device: (if defective – 0%) _____	_____	10%
		100%

4. Number of licensed classifiers employed by the applicant: _____;
5. Floor area of warehouse: _____ sq. m.; adequate ; inadequate (Pls. check)
6. Kind of pressing machine: ordinary high density ;
7. With cloth tag without cloth tag ;
8. With locker without locker for government stamps & other facilities for PhilFIDA employee assigned thereat;
9. PhilFIDA Signboard : Complied ; Not Complied ; New licensee (To be complied within 60 days)

I/We hereby certify that the foregoing inspection report was based on the actual inspection conducted by undersigned PhilFIDA representative on the facilities/premises of the above establishment/licensee.

Remarks/Recommendations: _____

Conforme: _____ Inspected/Evaluated by : _____
Operator/Manager Print Name and Signature

Designation

Note:

Establishments with rating below 75% in facilities/premises shall not be issued licenses