

# Republic of the Philippines **Department of Labor and Employment REGIONAL OFFICE No. 8**

## APPLICATION FOR REGISTRATION OF JOB CONTRACTORS/SUBCONTRACTORS

1.	Business Name:	ness Name:					TIN		
2.	Business Address:								
					Email:				
4.	Contact Person and Position:								
	Areas of Operation:								
	Nature of Business:7. Industries to be covered								
		umber of Regular Workers: Male Female							
9.	Names, Positions and	Addresses	of Officers and Sta	aff:					
	Names of Officer	rs/Staff	Position		Postal Address				
10.	List of Clients (use ac	ditional she	et if necessary)						
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	Name and Address of Nature of		Services Provided		Description of the		Number of Employees Covered in each Phase of		
	Client/Principal	Business	to Clients/Principal	Phase o Contra		the Contract			
			Clients/Fillicipal	Contro	act	Male	Female		
11.	UNDERTAKING:								
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	That I,		rilipino, or legal ag	je,civil st	atus		position		
(	Ofname of compan		_, after having be	en duly sw	orn to	in accordan	ce with law, do		
	•	У							
	hereby depose and say: 1. That our compar	nv shall abid	e bv all applicable l	aws and re	gulations	s of the Dep	artment of Labor		
	and Employment	t;	,		_	·			
	2. That the remitta	ances to SS	S, HDMF, Philhealt	h, ECC and	BIR wi	ll be paid r	eligiously by the		
	company. In witness whereof	f, I have he	ereunto affixed my	/ signature	this	day of	20 ir		
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(Affiant's Name /Signature)							e)		
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	N.								
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Ser	ries of								

Note: *All contracts entered into after this registration shall be reported to the DOLE Regional Office on or before the 10<sup>th</sup> day of the month immediately following the date of entry into contract.* 

## APPLICATION FOR REGISTRATION OF JOB CONTRACTOR/ SUBCONTRACTOR

This form shall be accomplished by the contractor/sub-contractor in triplicate and submitted to the DOLE Regional Field Office having jurisdiction on the place of the contractors/sub-contractors' main office.

#### 1. Business Name

Enter the business name of the contractor/subcontractor registered with the SEC, DTI, CDA, or DOLE.

#### 2. Business Address

Enter the business address of the contractor/sub-contractor

## 3. Telephone No.

Enter the telephone number(s) of the contractor/sub-contractor.

## 4. Contact Person/Position

Enter the name of the President or General Manager or any other officer of the company who can provide information on the entries. Indicate the position of the officer.

## 5. Areas of Operation

Enter or enumerate the area(s) or places covered by the contractor/ subcontractor.

#### 6. Nature of Business

Indicate the kind of business the contractor/sub-contractor is engaged in i.e., janitorial services, messengerial, trucking services, etc.

#### 7. Industries to be covered

Indicate the kind of industries of the clients/prospective clients to be covered.

## 8. Number of Regular Workers/Male/Female

Enter the number of regular workers of the contractor/sub-contractor broken down into male and female.

## 9. Names, Positions, and Address of Officers/Staff

Enumerate the names of the officers and staff of contractors/sub-contractor, their respective positions in the company and their respective home addresses. This does not include the names of the workers to work with the principal. Additional sheet may be used if necessary.

#### 10. List of Actual Clients

Enumerate the name(s) and addresses of the clients with which the contractor/sub-contractor have existing contracts, its nature of business, services to be provided to the client, number of personnel assigned to each client, description of each phase of the contract, the number of employees covered in each phase of the contract, disaggregated into male and female.

## 11. Undertaking

Indicate the needed information in the blank spaces provided in the undertaking.

The signature of the President or General Manager and the date of signing should appear in the designated portion of the form.