# APPLICATION FOR LICENSE TO OPERATE (LTO) AS TRADER

Passport size picture 50 mm wide X 70 mm high (2 inches wide X 2- 3/4 inches long)

# SUGAR REGULATORY ADMINISTRATION North Avenue, Diliman, Quezon City P.O. Box 90 U.P. Diliman Quezon City 1101

# Attention: REGULATION DEPARTMENT

Mam/Sir:

**I HEREBY APPLY** for license/s for Crop Year \_\_\_\_\_\_, to operate as (Please see asterisk) and engage in Sugar/Molasses/Muscovado trading in accordance with existing laws, decrees and implementing rules and regulations promulgated by the Sugar Regulatory Administration (SRA). For this purpose, **I HEREBY SET FORTH** the following information:

(\* Mark appropriate box/category with an X)

□<u>SUGAR TRADER</u> □DOMESTIC SUGAR TRADER □ INTERNATIONAL SUGAR TRADER (EXPORTER/IMPORTER)

#### **FRUCTOSE TRADER**

**MOLASSES TRADER** 

□DOMESTIC MOLASSES TRADER □INTERNATIONAL MOLASSES TRADER (EXPORTER/IMPORTER)

□MUSCOVADO TRADER □MUSCOVADO TRADER/PRODUCER □MUSCOVADO TRADER/NON-PRODUCER

|  | :   |
|--|---|
| Business Address:  | Fax No  |
| E-mail Address :   | Fax NU  |
| <b>Business Information</b> :  |   |
| (a) Type of Organization:  |   |
| (Single Proprietorship, Partnership  | Corporation Cooperative)  |
| (b) Proprietor / Managing Partner / Pr   |   |
|  |   |
| (b) Proprietor / Managing Partner / Programmer / Programm       | esident:  |
| (b) Proprietor / Managing Partner / Programmer / Programm       | esident:  |
| <ul> <li>(b) Proprietor / Managing Partner / Programmed Programmed (Name and Position)</li> <li>(c) Official/Authorized Representative of Name and Position</li> </ul>   | esident: : □Male □Female<br>(Nationality)<br>to sign reports and other pertinent documents: |
| <ul> <li>(b) Proprietor / Managing Partner / Programmeter / Pr</li></ul> | esident: : □Male □Female<br>(Nationality)<br>to sign reports and other pertinent documents: |
| <ul> <li>(b) Proprietor / Managing Partner / Programme (Name and Position)</li> <li>(c) Official/Authorized Representative (Name and Position)</li> </ul>  | esident: : □Male □Female<br>(Nationality)<br>to sign reports and other pertinent documents: |

(d) Number of years in sugar / molasses / muscovado trading: \_

- (e) Area of operation/distribution outlets (specify name of province, city or municipality covered):
- (f) Warehouse (For Sugar, Fructose and Muscovado)

| Number of warehouse/s:   |   |
|--|---|
| Location :   |   |
| Dimension (Per Meter- Length x Width x Height) :               |   |
| Made of (materials):   |   |
| Capacity :   |   |
| Please attached separate sheet for more than one (1) warehouse | 1 |

Storage/Container (For Molasses)

 Supporting documents for three (3) sets of application. The 3<sup>rd</sup> set of application serves as receiving copy. If more than one or multiple category of application, attach only two (2) sets of requirements.

| Sole Proprietorship  | Corporation  | Cooperative  |  |  |
|--|--|--|--|--|
| DTI Registration   | SEC Registration (New)   | Cooperative Development<br>Authority (CDA) Registration  |  |  |
|  | Articles of Incorporation & By<br>Laws for New & Renewal (if<br>amended)                               | Certificate of Compliance  |  |  |
|  | General Information Sheet(GIS)   | Certificate of Cooperation & By<br>Laws (For New and Renewal (if<br>amended)                           |  |  |
| Application Form(Duly<br>Notarized) with photo copy of<br>government ID of signatory of<br>application | Application Form(Duly<br>Notarized) with photo copy of<br>government ID of signatory of<br>application | Application Form(Duly<br>Notarized) with photo copy of<br>government ID of signatory of<br>application |  |  |
| Passport Size Picture and<br>Company ID  | Passport Size Picture and<br>Company ID  | Passport Size Picture and<br>Company ID  |  |  |
| Tax Identification Number(TIN)   | Tax Identification Number(TIN)   | Tax Identification Number(TIN)   |  |  |
| Authorization letter and<br>Company ID of the authorized   | Authorization letter and<br>Company ID of the authorized   | Authorization letter and<br>Company ID of the authorized   |  |  |
| Representative from the owner to transact with SRA   | Representative from the owner to transact with SRA   | Representative from the owner to transact with SRA   |  |  |
| Business/Mayor's Permit  | Business/Mayor's Permit  | Business/Mayor's Permit  |  |  |
| Vicinity Map of Office and warehouse   | Vicinity Map of Office and warehouse   | Vicinity Map of Office and warehouse   |  |  |
| -Contract of Lease(Lessee)<br>-Tax Declaration for Office &<br>warehouses(Owner)                       | -Contract of Lease(Lessee)<br>-Tax Declaration for Office &<br>warehouses(Owner)                       | -Contract of Lease(Lessee)<br>-Tax Declaration for Office &<br>warehouses(Owner)                       |  |  |
| Activity Report (For Renewal)  | Activity Report (For Renewal)  | Activity Report (For Renewal)  |  |  |
| Track Record of Domestic and<br>Import/Export Transaction<br>(New International Trader<br>Applicant)   | Track Record of Domestic and<br>Import/Export Transaction<br>(New International Trader<br>Applicant)   | Track Record of Domestic and<br>Import/Export Transaction<br>(New International Trader<br>Applicant)   |  |  |
| Income Tax Return (ITR) of the preceding year and Financial Statements                                 | Income Tax Return (ITR) of the<br>preceding year and Financial<br>Statements                           | Income Tax Return (ITR) of the<br>preceding year and Financial<br>Statements                           |  |  |
| Photo copy of previous LTO<br>(Renewal)  | Photo copy of previous LTO<br>(Renewal)  | Photo copy of previous LTO<br>(Renewal)  |  |  |

Additional Requirement for Muscovado Producer or Non Producer

**For Trader/Producer of Muscovado** whose products are declared as Organic: Certificate issued by the Organic Certifying Body (OCB) accredited by the Bureau of Agriculture and Fisheries Product Standards (BAFPS) of the Department of Agriculture (DA):

□ For Trader/Non-Producer of Organic Muscovado (Traders whose sources of Organic Muscovado are from Organic Muscovado Producers);

Organic Certificate issued by OCB to Muscovado Producers where the Trader/Non-Producer will source its muscovado products for sale and distribution.

The certificates issued by the OCB are valid only for one (1) year. For Trader/Producer of Muscovado whose products are declared as Organic and for Trader/Non-Producer of Organic Muscovado are required to secure OCB Certificate every year and submit the same to SRA two (2) months prior to the start of the Crop Year within the validity period of the Certificate of Registration (or COR) issued pursuant to Muscovado Order No. 2

**I HEREBY CERTIFY** to the correctness of the above information and **I HEREBY AGREE** that SRA may cause the suspension/cancellation or revocation of the **LICENSE TO OPERATE** or in lieu thereof, the imposition of a fine for non-observance or violation of its rules/regulations/issuances.

#### Proprietor/Managing Partner/President (Signature Over Printed Name)

|    | S  | UBSCRIBEI | D AND SW | ORN TO  | before me this | day of   |    |          | Af  | fiant exhi | bited |
|----|----|-----------|----------|---------|----------------|----------|----|----------|-----|------------|-------|
| to | me | his/her   | Governm  | ent ID. |                | 1.15.15  | No |          |     | Issued     | on    |
|    |    |           | as       | his/her | competent      | evidence | of | identity | and | valid      | until |

## **NOTARY PUBLIC**

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| Page No    | ;  |
| Book No    | _; |
| Series of  | :  |

## SWORN UNDERTAKING

The undersigned hereby certify under oath that all the above information are true and correct; all documents submitted in support of this application are either original or true copies of the original and are subject to verification; any misrepresentation and/or manifestation of fraud in this application or in the conduct of my business as a trader shall be a ground for the disapproval of my application, and blacklisting of our firm and the undersigned as the applicant.

Further, I hereby undertake to faithfully abide and comply with all the Sugar Orders, Circulars, Rules and Regulations and other issuances of the Sugar Regulatory Administration; to allow SRA authorized representatives to inspect my/our warehouse/s, storage containers anytime of the day; and that SRA may for just cause/s, cancel/revoke/terminate at any time my/our license and I/We shall be held civilly, criminally and administratively liable for any violation thereof including payment of damages, if any.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_\_ day of \_\_\_\_\_\_ at \_\_\_\_\_, Philippines.

Proprietor/Managing Partner/President (Signature Over Printed Name)

SUBSCRIBED AND SWORN TO before me this \_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, Affiant exhibiting to me his/her Government issued I.D.\_\_\_\_\_ No. \_\_\_\_\_ issued on \_\_\_\_\_ as his/her competent evidence of identity and valid until

Notary Public

Doc. No. \_\_\_\_; Page No. \_\_\_\_; Book No. \_\_\_\_; Series of \_\_\_\_:

> FM-REG-LMD-001, Rev.06 Effectivity Date: January 1, 2021