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| **LOCATOR INFORMATION SHEET**  **AND UNDERTAKING** |
| **OVERVIEW** |
| The Lessee or Sub-Lessee is hereby undertake to submit the required documents to the designated Account Officer of the Investment Promotions Division including submission of reportorial requirements and compliances by coordinating with CDC departments-in-charge, to wit:   |  |  |  |  | | --- | --- | --- | --- | | **Checklist of Reportorial Requirements** | | **CONCERNED CDC DIVISION** | | | 1. Bureau of Internal Revenue (BIR) Registration (Form 2303); 2. Latest Audited Financial Statements and Income Tax Return and Latest Quarterly ITR including Proof of Payment (CFZ Operations only) and/or Statement of Economic Contribution; 3. Certified true copy of the Latest General Information Sheet (GIS) from Security and Exchange Commission (SEC) stamped or marked receipt of SEC; | | **Investment Promotions Division I**  2nd Floor, CDC Building 2125, E. Quirino Avenue, CFZ  Tel Nos. (045) 599-9000 local 652 to 660,  (045) 599-2043 | | | Applicable for locators with Incentives only:  TIMTA Report pursuant to RA 10708 (ATIR Form A.1 and A.2) | | **Investment Promotions Division II**  2nd Floor, CDC Building 2125, E. Quirino Avenue, CFZ  Tel Nos. (045) 599-9000 local 642 to 645,  (045) 499-0182 | | | **COMPLIANCES** | **DIVISION** | | **NAME &**  **SIGNATURE OF CDC REPRESENTATIVE** | | 1. Compliances to Labor laws, labor standards, social welfare benefits of employees i.e., Social Security, Philhealth, Home Development Mutual Fund (Pag-Ibig); 2. On-Line Registration of Clark Jobs Matching Portal 3. Monthly Report on Employment; | **CSR and Placement Division**  CDC Bldg. 2112, C.P. Garcia Street, CFZ  Tel No. (045) 499-2265 | |  | | Copy of the following:   * Performance Bond * Payment of Current/Back Rentals | **Treasury Division**  CDC Bldg. 2121, E. Quirino Avenue, CFZ  Tel Nos. (045) 499-2326 | |  | | Copy of Insurance Policy and proof of payment for GSIS All Risk Building Insurance and General Liability Insurance | **Property Management Division**  CDC Bldg. 2112, C.P. Garcia Street, CFZ  Tel. nos. (045) 499-1627 | |  | | Full Occupancy Permit/Certificate of Annual Inspection | **Building and Facilities Permits Division**  2nd Floor, CDC Bldg. 2127, E. Quirino Avenue, CFZ  Tel. Nos. (045) 499-1139 | |  | | Bring-In/Bring-Out; Import/Export  Entry/Exit Pass | **Trade Facilitation Division**  Ground Floor, CDC Bldg. 2127, E. Quirino Avenue, CFZ  Tel. No. 599-9000 local 622 & 626 | |  | | Certificate of Environmental Clearance | **Environmental Permits Division**  2nd Floor, CDC Bldg. 2127, E. Quirino Avenue, CFZ  Tel. Nos. (045) 499-1138 | |  | | Sanitary Permit | **Health and Sanitation Division**  Along Cardinal Santos St., CFZ  Tel. No. (045) 599-3854; 599-6417 | |  | | Fire Safety Certificate | **Public Safety Division**  CDC Bldg. 2112, C.P. Garcia Street, CFZ  Tel. Nos. (045) 599-2138/3211 | |  |   In order to avoid any inconvenience and business interruption, please comply and submit the abovementioned reportorial requirements. This is without prejudice to any action by the Philippine government with regards to violations in accordance with other government agencies’ standard, rules and regulations. |



**FM-CDC-IPDI-11**

**Rev. 02**

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*Revised as of 26 June 2019*

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| **ACKNOWLEDGEMENT OF AFTER-SALES BRIEFING** |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I/we, the authorized signatories and representative/s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby acknowledged that we have received and fully understood the following after sales briefing conducted by this office and that we shall relay the information from the briefing to members of the management team of our company so they may also be guided appropriately.   |  |  | | --- | --- | | **PARTICULAR** | **REFERENCES** | | * **Briefing on Business Permit** | * Checklist of the required documents for the business permits (Full Occupancy, Environmental Clearance, Fire Safety Certificate, Sanitary and Health Permit) | | * **Briefing on the registration of the government agencies** * **Bureau of Internal Revenue** * **Local Govt’ Unit** * **Social Welfare Benefits (SSS, Philhealth and Pag-Ibig** | * BIR Revenue Memorandum Circular No. 50-2007 * DOF Department Order No. 3-08 * DOF Department Order No. 012-2004 and Revenue Memorandum Order No. 10-2014 * CDC Endorsement letter for the Registration of Social Welfare Benefits | | * **Briefing on Movement of Goods** | * Electronic Transit Admission Permit Systems (e-TAPS) * Electronic Export Documentation Systems (e-EDS) * Process Flow on Bring-In and Bring-out of Domestic and Foreign Articles | | * **Briefing on working visa application and renewal** | * Application for Special Clark Investor’s Visa/Endorsement of Alien Employment Permit | | * **Briefing on TIMTA submission**   **(For CRTE holders only)** | * TIMTA Law R.A. 10708   An Act Enhancing Transparency in the Management and Accounting of Tax Incentives Administered by Investment Promotion Agencies | |
| All applicable provisions of the lease agreement, or CDC approval to the sublease agreement as the case maybe and such other regulations to be posted in CDC website or disseminated/sent through Circulars.  By affixing our signatures below, we are conveying our acceptance of all the conditions and/or undertakings indicated herein:   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Acknowledged by: (Locator) |  | Witnessed by: (CDC) | | | |  |  |  |  |  | | Printed Name and Signature | Printed Name and Signature | Printed Name and Signature | |  |  |  | | Position | Position | Position | |  |  |  | | Tel. /Mobile No. | Tel. /Mobile No. | Tel. /Mobile No. | |  |  |  | | E-mail Address | E-mail Address | E-mail Address | |