

DEPARTMENT OF FINANCE  
One-Stop Shop Inter-Agency Tax Credit and Duty Drawback Center  
**IIG TCC REVALIDATION APPLICATION FORM**  
For TCCs covered by Section 1(a) of Office Order No. 031-2006

**IMPORTANT:**

- 1) Accomplish this form clearly and completely.
- 2) Write N/A in case the information required is not applicable.
- 3) Only original TCCs attached hereto shall be processed for revalidation.
- 4) Duly accomplished form must be notarized before submission to the OSS-Center.

**COMPANY PROFILE:**

Name of Company:

Business Address:

Telephone No./Fax No.:

Tax Identification No.:

BOI Registration No.:

**COMPANY REPRESENTATIVE:**

Authorized Signatory:  
*(Person who signed this document)*

Position / Designation:

Telephone No./Fax No.:

**DETAILS OF APPLICATION**

Total amount and number of TCCs in this application:

Incentives laws under which subject TCC/s was/were issued:

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CLAIM SLIP: (To be filled up by OSS-Center staff)

Date Filed: \_\_\_\_\_ Total Amount of TCCs: \_\_\_\_\_

No. of TCCs in this application: \_\_\_\_\_

Request Ref. #: \_\_\_\_\_ Signature of OSS Staff: \_\_\_\_\_

	TCC Number	Original Amount	Outstanding Balance		
			Duty Portion	IR Portion	Total
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
	<b>Total</b>				

Use additional sheet if necessary.

**Declaration**

I, \_\_\_\_\_ (print your full name), authorized representative of \_\_\_\_\_ as evidenced by the company's Secretary's Certificate per OSS-Center records, hereby declare the following:

1. That \_\_\_\_\_ (name of company) is the valid owner of the above tax credit certificate/s which said company legally acquired through the One-Stop Shop Inter-Agency Tax Credit and Duty Drawback Center.

2. That I attest to the truthfulness and veracity of all the information stated above as well as to the authenticity and genuineness of all supporting documents furnished under pain of legal or administrative action that the Philippine Government may take in case of any acts of misrepresentation.

\_\_\_\_\_  
Signature over Printed Name of Authorized Representative

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2006, by \_\_\_\_\_, exhibiting to me his/her Residence Certificate No. \_\_\_\_\_ issued at \_\_\_\_\_ on \_\_\_\_\_.

**Signature over Printed Name of Notary Public**  
Until December 31, \_\_\_\_\_  
PTR No. \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of 2006