



**APPLICATION FOR REGISTRATION FOR RFID**  
**Proximity Reader and Other Related Devices**

**INSTRUCTIONS:** All blanks must be filled up properly. Put "n/a" for items not applicable to you. Upon completion of the form submit this together with required/supporting documents. Print all entries in block or CAPITAL LETTERS

- 1 **APPLICANT** : \_\_\_\_\_  
 2 **BUSINESS ADDRESS** : \_\_\_\_\_  
 3 **CONTACT NO(s)** : \_\_\_\_\_ **EMAIL ADD.:** \_\_\_\_\_  
 4 **NUMBER OF UNITS** : \_\_\_\_\_  
 5 **PARTICULARS OF EQUIPMENT (s):**

Make/Type/ Model	Serial Number	Make/Type/ Model	Serial Number

\*Use additional Sheet if necessary

**6 CERTIFICATION**

**I HEREBY CERTIFY** that all above entries are true and correct and that I shall be held liable for any wilful false statements made in this application under the Revised Penal Code. Any false statement or misrepresentation made in connection with this application shall constitute a valid ground for the denial of this application and/or cancellation/revocation of the permit to be granted. I further certify that the above equipments are in conformity with the prescribed standards and existing Radio Laws and Regulation.

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

\_\_\_\_\_  
 Date

<b>OR</b>	NO: _____
	DATE: _____, 20__
AMOUNT: _____	
_____ CASHIER	

**PLEASE SEE BACK HEREOF FOR THE REQUIREMENTS TO BE SUBMITTED**

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED