

NATIONAL FOOD AUTHORITY
Quezon City

APPLICATION FOR ACCREDITATION

NAME OF COMPANY	DATE ESTABLISHED	
Business Address	Telephone/Fax Numbers	
Amount of Paid Up Capitalization	Percentage of Ownership Filipino _____ Foreign _____	No. of years dealing with NFA _____
Date of Registration with OIC	License No.	Tax Identification No.

Do you carry Bonds? Yes No
If Yes, State Premium Volume _____

Do You carry Fire Insurance? Yes No
If Yes, state premium volume _____

Do you carry Acts of GOD/Fortuitous events coverage? Yes No
If Yes, state premium volume _____

List of Branches nationwide (Use additional sheet if necessary)

Branch	Address	Telephone No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that the foregoing information are true and correct and I understand that any misrepresentation can be a ground for denial of this application and other sanctions that may be imposed by the National Food Authority. Further I conform to the policies, terms and conditions on NFA's system of bonds and insurance placements.

Authorized Signatory
Position

SUBSCRIBED and SWORN to before me this _____ day of 20__ in _____, Philippines.
Affiant exhibiting to me his/her Community Tax Certificate No. _____ issued on _____
at _____.

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of 20 _____