


ANNEX L.7

Application Form for Importation of Used Motor Vehicle through Donation by Local Government Units

Department of Trade and Industry – Fair Trade Enforcement Bureau

	<p>Fair Trade Enforcement Bureau Import Regulation Division APPLICATION FOR IMPORTATION THROUGH DONATION OF USED MOTOR VEHICLE BY LOCAL GOVERNMENT UNITS (Executive Order No. 443, Series of 2005) UPRC Building VI 315 Sen. Gil. J. Puyat Avenue, Makati City 1200 Philippines Tel. No.: (632) 8403 - 1417 Mobile No.: (0917) 882 - 3568 E-mail: ftieb_ird@dti.govph Website: www.dti.govph</p>
Date (MM/DD/YYYY) _____	
A. APPLICATION DETAILS	
Application Token:	Permit No.:
Type of Application: <input type="checkbox"/> New Application <input type="checkbox"/> Extension <input type="checkbox"/> Amendment <input type="checkbox"/> Release	Application Date:
B. APPLICANT'S INFORMATION	
Name of Donee/Consignee: <div style="display: flex; justify-content: space-between; font-size: small;"> (Title) (First Name) (Middle Name) (Last Name) (Suffix) </div>	
Address: <div style="display: flex; justify-content: space-between; font-size: small;"> (House/building No./Building Name) (Street Name) (Barangay) (City/Municipality) (Province) (Region) (Zip Code) </div>	
Telephone Number:	Fax Number:
Mobile Number:	Email Address:
Public Organization: <input type="checkbox"/> National Line Agency <input type="checkbox"/> Government-Owned & Controlled Corp. <input type="checkbox"/> Local Government Unit <input type="checkbox"/> Other Gov't Institution (Please Specify)	Social Media/ Website:
Contact Person: <div style="display: flex; justify-content: space-between; font-size: small;"> (Title) (First Name) (Middle Name) (Last Name) (Suffix) </div>	
Designation:	
Social Classification: <input type="checkbox"/> Able-bodied <input type="checkbox"/> Indigenous Person <input type="checkbox"/> Differently-abled <input type="checkbox"/> Senior Citizen	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name of Supplier:	
Address:	
Telephone Number:	Fax Number:
Mobile Number:	Email Address:
C. MOTOR VEHICLES TO BE DONATED	
Description	Quantity
Origin	Port of destination
D. DESCRIPTION OF MOTOR VEHICLES TO BE DONATED (For Passenger Cars Only)	
Make & Year Model:	Date of Registration:
Engine Displacement (cc):	Engine No.:
Color:	Type of Fuel:
Vehicle Identification No.:	Gross Vehicle Weight:
CHASSIS NOS.	
E. DOCUMENTARY REQUIREMENTS	
To be accomplished by Donee <input type="checkbox"/> Completely filled-out application form <input type="checkbox"/> Letter request for importation <input type="checkbox"/> Notarized Affidavit of undertaking <input type="checkbox"/> Sanguniang Panlalawigan, Sanguniang Panglungsod or Sanguniang Bayan Resolution accepting the donation (original and certified true copy with dry seal of the City/ Municipality/Province)	To be Accomplished by Donor <input type="checkbox"/> Authenticated DEED OF DONATION by the nearest Philippine Consulate abroad (original and photocopy)
F. PROCESSING FEE – Php 300.00/PER APPLICATION	
Reference No.: /	

G. DOCUMENTATION STAMP TAX FEE – Php 30.00/APPLICATION

All personal data collected herein shall be processed according to the principles and provisions of the Data Privacy Act of 2012 (DPA), its Implementing Rules and Regulations (IRR), and National Privacy Commission (NPC) issuances.

Name and Signature of Authorized Signatory
Position

Reference No.: /

REPUBLIC OF THE PHILIPPINES)
_____.S.S

AFFIDAVIT OF UNDERTAKING

I, _____ (Signatory), of legal age, married/single and residing at _____ after having duly sworn
to in accordance with the law hereby depose and state:

1. That I am the principal signatory of _____
(agency/entity);
2. That as a principal signatory, I am authorizing Mr./Ms. _____ to be my
representative;
3. That this motor vehicle donation is accepted under Resolution No. _____ of the Sangguniang
Bayan/Panlungsod/Panlalawigan of _____; (Name of City, Town,
Province).
4. That we further bind ourselves to answer for any criminal, civil or administrative case that may arise
relative to the aforesaid application.

AFFIANT FURTHER SAYETH NAUGHT.

NAME & SIGNATURE OF
PRINCIPAL SIGNATORY

v

NAME & SIGNATURE OF
AUTHORIZED REPRESENTATIVE

POSITION

SUBSCRIBED AND SWORN TO BEFORE ME, this _____ day of _____ 202_____ (principal and
representative) exhibited their Residence Certificate Nos. _____ and _____ issued at _____ on
_____ and at _____ on _____, respectively.

NOTARY PUBLIC

Doc. No.: _____
Page. No.: _____
Book. No.: _____

PTR No.: _____
Valid until: _____
Series of _____