



Republic of the Philippines
Department of Environment and Natural Resources
ENVIRONMENTAL MANAGEMENT BUREAU

**APPLICATION FOR REGISTRATION
OF DEALERS AND RETAILER/RE-SELLERS OF ODS**

Important Note:

Accomplish this form in two (2) copies, each with a photocopy of the previous EMB Certificate of CFC/HCFC Registration for Dealers and Retailers/Re-sellers (if applicable). To facilitate processing, all information must be supplied accurately.

Date Applied : _____

(to be filled up by the EMB-RO)

Registration Number : _____

Document Number : _____

A. GENERAL INFORMATION

I. Company/Business Name: _____

II. Name of Business Owner:

III. Type of Ownership

Sole

Partnership

Corporation

IV. SEC / DTI Registration Number/Business Permit No:

IV. Contact Information:

Business Address: / _____ / _____ / _____ /
(Number) (Building Name) (Street)

/ _____ / _____ / _____ /
(Barangay) (Town/District) (City)

/ _____ / _____ /
(Province) (Zip Code)

Contact Person : _____ Position / Designation: _____

Contact Numbers:

Office Tel Nos.: (_____) - _____ ; (_____) - _____
area code area code

Facsimile Nos. (_____) - _____ ; (_____) - _____
area code area code

Mobile No.: _____ email: _____

V. Business Category: (please / the appropriate box/boxes)

With Refilling Activity

Without Refilling Activity

Other Activities

____ Service Shop

____ Dealers of RAC/MAC Equipment/Parts

VI. Storage Facility

Owned Rented/Leased

Location (complete address): _____

Area (m²): _____

Capacity (kg or MT): _____

B. SALES HISTORY (FOR THE PAST TWO YEARS) (IN KILOGRAM/S) OF ODS:

Name of ODS	Source(s)	Quantity Purchased
Other Chemicals		

C. PROJECTED CHEMICALS TO BE SOLD/COVERED BY THE REGISTRATION FOR THE YEAR (IN KILOGRAM/S)

Name of ODS	Source(s)	Quantity to be Purchased
Other Chemicals		

D. REQUIRED ATTACHMENTS

- Copy of the Manufacturer's Material Safety and Data Sheet (MSDS)*
- Company Profile*
- Photocopy of business/mayor's permit.
- Photocopy of DTI Certificate of Business Name Registration and certificate of Accreditation/SEC Articles of Incorporation, if any.
- Description of the applicant's handling procedures, safety precautions and emergency response for the chemical.
- Certificate of Training on Handling Chemicals from TESDA/importers/distributors. (for applicants with refilling activities)*
- Certificate of Attendance on Ozone Science and CCO for ODS
- Annual Report (for renewal of registration only)

* New Application or with change

I acknowledge that this application form is a legally binding document, and I declare, under the penalties of perjury, that the same has been accomplished in good faith, verified by me, and, to the best of my knowledge and belief, is true and correct pursuant to the regulations issued under authority thereof.

Business Owner/Authorized Representative
(Signature over Printed Name)

Notary Public: _____
Date Issued: _____
Place Issued: _____