



APPLICATION FORM FOR REGISTRATION AND ACCREDITATION OF TRANSPORT CARRIERS

Under Administrative Order No. 08 Of 2004, otherwise known as the "orderly marketing of livestock, poultry, meat and by-products" as amended by Administrative Order No. 03 of 1997

SINGLE PROPRIETORSHIP APPLICANTS

Name of Applicant: Last Name: _____ First Name: _____ Middle I. _____

Business Address: _____

Company/Trade Name: _____ E Mail Address: _____

☎ No(s): _____ Fax No.: _____ TIN: _____

CORPORATION/COOPERATIVE/ASSOCIATION APPLICANTS

Company/Trade Name: _____ Co/Coop. TIN: _____

Business Address: _____

☎ No(s). _____ Fax No. _____ E Mail Address: _____

Business Organization: Partnership Corporation Cooperative Association Others: _____

Type of Application of the Applicant: Company Rep. Coop. Rep. Association Rep. Partnership Rep. Others: _____

Last name: _____ First Name: _____ Middle I. _____ TIN _____

I. TYPE OF TRANSPORT CARRIER: LAND TRANSPORT CARRIER AIR TRANSPORT CARRIER WATER TRANSPORT CARRIER

II. TYPE OF SERVICES OFFERED: HAULERS COMPANY SERVICE VEHICLE OTHERS: _____

III. TYPE OF LAND TRANSPORT CARRIER: TRICYCLES ASSEMBLED UTILITY VEHICLES [AUVS] TRUCKS TRAILERS CONTAINERS

Plate No[s].	Type of AUVs	Plate No[s].	Brand/Type of Trucks	Plate No[s].	No. of Wheels	No. of Wheels	Plate No[s].	Length/Size	Container No.
1.	1.		1.			1.		1.	
2.	2.		2.			2.		2.	
3.	3.		3.			3.		3.	
4.	4.		4.			4.		4.	
5.	5.		5.			5.		5.	
6.	6.		6.			6.		6.	
7.	7.		7.			7.		7.	
8.	8.		8.			8.		8.	
9.	9.		9.			9.		9.	
10.	10.		10.			10.		10.	

Additional space at the back

For and consideration of this accreditation applied for, I shall follow all **RULES and REGULATIONS** prescribed in the **Administrative Order No. 08 of 2004, Administrative Order No. 05 of 2002** and other laws promulgated for the "orderly handling, transporting of livestock, poultry eggs, milk, hides, skin and its by-products.

Name and signature of Individual Applicant

Name and signature of Authorized Representative

SUBSCRIBED AND SWORN before me, this _____ day of _____ 2010. The affiant exhibited to me his/her Residence Certificate No. A _____ issued at _____ on _____ 2010.

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

- 2 pcs latest 1" x 1" ID picture
- GEI
- NOTARIZED APPLICATION FORM
 - LATEST 2 PIECES 1"X1" ID PICTURE
 - TIN - INDIVIDUAL OPERATORS, REPRESENTATIVE, PARTNERSHIP, CORP., COOP., ASSO. AND ETC.
 - BUSINESS/MAYORS PERMIT OR DTI
 - FOR CORPORATION/COOPERATIVE/ASSOCIATION, ETC.
 - Certificate from the Board of Directors
 - Article of Incorporation or
 - SEC Registration
 - ALL APPLICANTS SHALL UNDERGO SEMINAR
 - CERTIFICATE OF ATTENDANCE [SEMINAR] FOR REGIONAL AND PROVINCIAL APPLICANTS
 - PHOTO COPY OF THE REGISTRATION OF THE CARRIER [INDIVIDUAL CARRIER]
 - PHOTO OF THE CARRIER [FRONT & SIDE VIEW] PER CARRIER
 - PHOTO COPY OF THE PREVIOUS CERTIFICATE OF REGISTRATION
- F E E S**
- | | |
|--|----------------|
| One [1] sticker for every carrier either Land, Water and Air | |
| 1 LAND TRANSPORT CARRIERS | Amount/Carrier |
| a Tricycles [livestock carrier] and Trailers | P300.00 |
| b Trucks [4-12, etc.], jeeps, XLT, multi-cabs, closed vans/trucks [for DOC, eggs, milk] etc., Open Containers [for livestock purposes] | 500.00 |
| 2 Water & Air Transport Carriers | 500.00 |
- Note: **LACK OF REQUIREMENTS WILL NOT BE PROCESSED**

Documentary Stamp (attach _____)

Notary Public _____

ACCREDITATION NO.: _____

DATE OF APPLICATION: _____

DATE OF EXPIRATION: _____

TYPE OF APPLICATION: [Please check box]

STATUS OF APPLICANT: NEW APPLICANT RENEWAL

STATUS OF CARRIER: NEW RENEWAL ADDITIONAL

If **RENEWAL**, attach photo copy of the previous CERTIFICATE OF REGISTRATION

Year last renewed/applied: _____

[To be filled-up by BAI-MDD/DA RFU's]

Official Receipt No: _____ Amount: _____

Date of issued: _____

Issued by: _____

Issued at: _____

IV. WATER TRANSPORT CARRIER:

V. TYPE OF AIR TRANSPORT CARRIER:

<input style="width: 100%; height: 80px; border: 1px solid black;" type="text"/> <p>MOTORIZED BOATS</p>	<input style="width: 100%; height: 80px; border: 1px solid black;" type="text"/> <p>CARGO SHIPS</p>	<input style="width: 100%; height: 80px; border: 1px solid black;" type="text"/> <p>RO-RO'S</p>
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Name of Motor Boats	Registration No[s].	Name of Cargo Ships	Reg. No[s]	Name of RO-Ro's	Reg. No[s]
1.		1.		1.	
2.		2.		2.	
3.		3.		3.	
4.		4.		4.	

	CARGO PLANE	COMMERCIAL PASSENGER PLANE	OTHERS:
Registration No.	Registration No.	Registration No.	Registration No.
1.	1.	1.	1.

VI. FREQUENCY OF MOVEMENT:

DAILY
 WEEKLY
 3 X WK
 5 X WK
 MONTHLY
 2 X MONTH
 3 X MONTH
 QUARTERLY
 EVERY 6 MONTHS
 OTHERS [SPECIFY: _____]

VII. TYPE OF SPECIE HANDLED PER TRANSPORT CARRIER	Specie	Volume [hds]	Specie	Volume [hds]	Specie	Volume [hds]
	Cattle		Hogs		Horse	
	Carabao		Goats		Sheeps	
	Chicken		Turkey		Day Old Chicks	
	Game Fowls ▲		Milk [liters]		Manure & Dung [sacks]	
	Hides [tons]		Skin [tons]		Eggs [pieces]	

▲ Fighting Cocks
Others: _____

ADDITIONAL SPACE FOR LIST OF PLATE/CONTAINER NUMBER and NAME OF VESSEL/RO-RO's/MOTORIZED BOATS

Type of Truck/Name of Vessels/RO-RO/Motorboats	Reg. Number/Plate No.	Type of Truck/Name of Vessels/RO-RO/Motorboats	Reg. Number/Plate No.
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Note: If the OWNER/SHIPPER or DEALER does not accompany the shipment/movement, then the driver/representative is required to have a HANDLER'S LICENSE.

Review/Process by:

Name

Position

Date

Recommending Approval:

Regional Executive Director/Provincial Veterinarian

DA RFU/Province

LIST OF PROVINCES BY REGION AND NATIONAL CAPITAL REGION [METRO MANILA]

NATIONAL CAPITAL REGION [METRO MANILA]			REGION 1	REGION 2	REGION 3	A	REGION 4	B	REGION 5	REGION 6
Caloocan City	Marikina City	Pateros	Ilocos Norte	Batanes	Bataan	Aurora	Marinduque		Albay	Antique
Malabon City	Muntinlupa City	Paranaque City	Ilocos Sur	Cagayan Valley	Bulacan	Batangas	Occidental Mindoro		Catanduanes	Aklan
City of Manila	Navotas City	Las Piñas City	La Union	Isabela	Nueva Ecija	Cavite	Oriental Mindoro		Camarines Norte	Capiz
Mandaluyong City	San Juan City	Taguig City	Pangasinan	Nueva Vizcaya	Pampanga	Laguna	Romblon		Camarines Sur	Guimaras Island
Makat City	Pasay City	Valenzuela City		Quirino	Tarlac	Quezon	Palawan		Masbate	Iloilo
	Pasig City				Zambales	Rizal			Sorsogon	Negros Occidental

REGION 7	REGION 8	REGION 9	REGION 10	REGION 11	REGION 12	ARMM	CAR	CARAGA
Bohol	Biliran	Zamboanga-Sibugay	Bukidnon	Compostela Valley	Lanao del Norte	Basilan	Abra	Agusan del Norte
Cebu	Eastern Samar	Zamboanga City	Camiguin Island	Davao City	North Cotabato	Lanao del Sur	Benguet	Agusan del Sur
Negros Oriental	Leyte	Zamboanga del Norte	Misamis Occidental	Davao del Norte	Sarangani Province	Maguindanao	Iligan	Surigao del Norte
Siquijor Island	Northern Samar	Zamboanga del Sur	Misamis Oriental	Davao del Sur	South Cotabato	Sulu	Kalinga-Apayao	Surigao del Sur
	Samar				Sultan Kudarat	Tawi-Tawi	Mt. Province	
	Southern Leyte							

For more information, please call or write:



MARKETING DEVELOPMENT DIVISION

Bureau of Animal Industry

Visayas Avenue, Diliman, Quezon City

[02] 926-68-66/920-39-06/ 9259229

Fax No. [02] 926-68-66

or the nearest

DEPARTMENT OF AGRICULTURE REGIONAL FIELDS UNITS *

or

OFFICE OF THE PROVINCIAL VETERINARIAN *

* For Regional or Provincial Applicants