REPUBLIC OF THE PHILIPPINES)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ) S.S

**AFFIDAVIT OF CANCELLATION OF BUSINESS NAME**

I am (name of applicant), of legal age, (marital status) and I hereby swear on the following:

1. That I am the (position of applicant) of (business name) which is located at (address);
2. That I am applying for cancellation of the registered business name, (business name), registered on (date of registration), with DTI No. \_\_\_\_\_\_ effective (exact date of closure).
3. That the reason/s for the cancellation are:

a.

b.

1. That the business has no outstanding liability or obligation.
2. That I am executing this affidavit to attest to the truth of all the foregoing statements and for whatever legal purpose it may serve.

**IN WITNESS WHEREOF**, I have hereunto set my hand this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_, Philippines.

Printed Name and Signature

Affiant

CTC No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Issued on: \_\_\_\_\_\_\_\_\_\_\_\_\_

At: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_th day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_, Philippines.

Doc. No. : \_\_\_\_\_\_\_\_;

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