



FILSCAP LICENSE APPLICATION FORM

MUSIC LOUNGE / BAR / DANCE CLUB / KTV

Date of Application _____

COMPANY DETAILS:

Establishment Name _____
Address _____
Telephone Number _____ Fax Number _____
Business Name _____
Address _____
TIN Number _____
Representative _____
Designation _____
Mobile Number _____ Email Address _____
Signatory _____
Designation _____

DETAILS FOR ASSESSMENT:

A. NATURE OF BUSINESS (Check appropriate box/es)

- Music Lounge/Bar Dance Club
 KTV Others: _____

B. MUSIC USAGE IN PREMISES

| Name of Establishment and Location/Branch | Seating Capacity | No. of Audio-Visual Screens | Days of Operation (in a year) | Mode of Music (Live/Mechanical/Audio-Visual) |
|-------------------------------------------|------------------|-----------------------------|-------------------------------|----------------------------------------------|
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*Use a separate sheet if necessary

Signature over Printed Name _____