



FILSCAP LICENSE APPLICATION FORM MECHANICAL

Date of Application _____

COMPANY DETAILS:

Business Name _____

Address _____

Telephone Number _____ Fax Number _____

Representative _____

TIN Number _____

Designation _____

Mobile Number _____ Email Address _____

Signatory _____

Designation _____

LICENSE ASSESSMENT PARTICULARS:

Title of Composition/s _____

Composer/s/Author/s _____

Form of Recording Audio CD Digital Format
 Print Others: _____

Revisions Lyrics Yes No
 Melody Yes No
 Arrangement Yes No

Album/Book Title _____

Artist _____

No. of Tracks _____

Wholesale Price _____

No. of Copies _____

Territory of Release Philippines Worldwide

*use a separate sheet if necessary

As duly authorized representative of _____, the undersigned hereby undertakes to pay FILSCAP the processing fee incurred in respect of this inquiry request for copyright clearance.

Signature over Printed Name _____