**ANNEX B.**

**APPLICATION FORM FOR PUBLIC SOLICITATION PERMIT**



**TO BE FILLED UP BY DSWD**

Date of Receipt of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Receipt of Application\_\_\_\_\_\_\_\_\_\_\_

Date of Release of the Permit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Release of the Permit \_\_\_\_\_\_\_\_\_\_

Tracking No.: \_\_\_\_\_\_\_\_\_\_\_\_

| **A. GENERAL INFORMATION** | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Application** Regular Temporary | | | | | | | | | | | |
| **Status of Application**  New Renewal  If renewal, indicate Permit No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Scope/Coverage**  National Regional  If Regional, indicate the regions covered \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Type of Applicant*:***  (Please check the appropriate box)  Government Agency  Central Office  Attached Agency  Regional Office  Government Owned & Controlled Corporation  State University/College  Local Government Unit (LGU) | | | | | | | Private Sector  Non-government Organization  Civil Society Organization  Faith-based Organization  Social Welfare & Development Agency (SWDA)  Organized Groups  Person/Individual  Others (please indicate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **B. APPLICANT INFORMATION** | | | | | | | | | | | |
| ***B.1 IF THE APPLICANT IS AN INDIVIDUAL*** | | | | | | | | | | | |
| **Name of Applicant** | **Surname** | **Given Name** | | | | | | **Middle Name** | | | **Suffix** |
|  |  | | | | | |  | | |  |
| **Contact Details of the Applicant:** House/Bldg. No. \_\_\_\_\_\_\_ Name of Building \_\_\_\_\_\_\_\_\_\_\_\_ Lot No. \_\_\_\_\_  Block No. \_\_\_\_\_\_\_ Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Barangay \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Municipality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| Telephone No.: | | | | Mobile No.: | | | | | Email Address: | | |
| ***B.2 IF THE APPLICANT IS A GOVERNMENT AGENCY OR A PRIVATE SECTOR ORGANIZATION*** | | | | | | | | | | | |
| **Name of the agency/organization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Address and Contact Details of the agency/organization**  House/Bldg. No. \_\_\_\_\_\_\_\_ Name of Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lot No. \_\_\_\_\_\_\_  Block No.\_\_\_\_\_\_ Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Barangay \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Municipality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP Code \_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| Telephone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Name of the Agency/ Organization Head** | **Surname** | | | | | **Given Name** | | **Middle Name** | | | **Suffix** |
|  | | | | |  | |  | | |  |
| **Contact Details of the Agency Head:**  Address:  House/Bldg. No. \_\_\_\_\_\_ Name of Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lot No. \_\_\_\_\_\_  Block No. \_\_\_\_\_\_ Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Barangay \_\_\_\_\_\_\_\_\_\_\_\_  Subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Municipality\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP Code *\_\_\_\_\_\_\_\_* | | | | | | | | | | | |
| Telephone No.: | | | Mobile No.: | | | | | Email Address: | | | |
| **Name of Individual or Agency/ Organization Representative Filing the Application** | **Surname** | | | | | **Given Name** | | **Middle Name** | | | **Suffix** |
|  | | | | |  | |  | | |  |
| **Designation of the representative in the agency/organization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Contact Details of the representative:**  Address:  House/Bldg. No. \_\_\_\_\_\_ Name of Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lot No. \_\_\_\_\_\_  Block No. \_\_\_\_\_\_Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Barangay \_\_\_\_\_\_\_\_\_\_\_\_\_  Subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Municipality\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP Code *\_\_\_\_\_\_\_\_* | | | | | | | | | | | |
| Telephone No.: | | | Mobile No.: | | | | | Email Address: | | | |
|  | | | | | | | | | | | |
| **C. INFORMATION ON THE PUBLIC SOLICITATION PROPOSAL** | | | | | | | | | | | |
| **Methodologies or Activities to be Conducted (tick box):**   | Tickets, Ballots, Cards & Similar Forms | *(Note: Please specify the target range for the items you will be using. For example, indicate the number of tickets, ballots, or cards you plan to distribute or collect, such as "5-10 ballots" or a similar range for other items.* | | --- | --- | | Donation Boxes, Coin Banks & Similar Forms | *Note: Please specify the target range for your donation collection efforts. For example, indicate the number of donation boxes and coin banks you plan to use or expect to place, such as "100-120 donation boxes" and "5-10 coin banks.* | | Benefit Shows (concerts, fashion shows, and other forms of entertainment) | *Note: Please specify the type of benefit show you are organizing. This includes details such as the nature of the event (e.g, concert, fashion show)* | | Photos or Painting Exhibits & Similar Forms | *Note: Please specify the type of exhibit you are organizing. This includes the nature of the exhibit, such as whether it involves photos, paintings, or other visual arts, and any other relevant details.* | | Written Requests (Letters of Appeal, Envelopes, Greeting Cards & Similar Forms) | *Note: Please specify the target range for your written requests. For example, indicate the number of requests you plan to send out or expect to receive, such as "70-110 written requests* | | Distribution, circulation, publication, or posting of written advertisement or other similar forms; | *Note: Please specify the target range of your requests. For example, indicate the number of requests you plan to send out, such as "20-50 distribution/circulation/publication/ posting of written advertisement”* | | Mass Media campaign (Radio, Television, Cinema, Magazines, Newspapers, Billboards & Similar Forms) | *Note: Please specify the types of mass media you will be using for your solicitation. Include details about the specific media outlets or platforms (e.g., particular radio stations, TV channels, cinema advertisements, magazine titles, newspaper names, billboard locations).* | | Sports Activities (Fun Runs, Marathons, Cycling & Similar Activities) | *Note: Please specify the type of sports activity you are organizing. This includes the nature of the event (e.g., fun run, marathon, cycling race), the format, and any other relevant details.* | | Sale of Goods (Rummage Sale, Garage Sale & Similar Forms) | *Note: Please specify the nature of your sale of goods. This includes the type of items being sold, the format of the sale (e.g., rummage sale, garage sale), and any other relevant details about the event* | | Text Messages and Social Media (Facebook, X, Instagram, TikTok) | *Note: Please specify the social media platforms you will use for solicitation, including any relevant details about how you will use these platforms (e.g., types of posts, frequency of updates, targeted audience).* | | Popularity contests, beauty pageants, and other events which requires the contestants to conduct  public solicitations | *Note: Please specify the nature of the contest or event, including any relevant details about how contestants will be involved in public solicitations. This includes the format of the event, the role of public solicitations, and any other pertinent information.* | | Other methodologies that may be allowed by the DSWD, the PSWDO, the CSWDO, or the MSWDO | *Note: Please specify the methodology you plan to use or propose. Include a description of the approach, its purpose, and any other relevant details.* | | | | | | | | | | | | |
| **Donation Intermediaries / Depository Bank for Donations**  *(Please check the appropriate box)*  GCASH PAYMAYA BANK ACCOUNT: *(Please provide ONLY the name of the Bank)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  OTHERS: (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Projected Total Amount to be Raised (PhP)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Purpose/Objective of the Solicitation Activity**  *Note: Please provide a detailed description of the purpose of this public solicitation activity. Clearly and concisely explain how this activity will benefit the intended beneficiaries. The purpose of the activity should not be fewer than 20 words but not more than 50 words. Further, please spell-out abbreviated terms.* | | | | | (e.g. The purpose of the solicitation activity is to **raise Php 2,000,000.00 to support the XYZ Foundation’s continuous operation and expansion of the foster care program for abandoned and neglected children in the Philippines.)** | | | | | | |
| **Target Date (Period) for the Public Solicitation** | | | | | **Start Date (mm/dd/yyyy)** | | | | | **End Date (mm/dd/yyyy)** | |
|  | | | | |  | |
| ***Target Beneficiaries***   | **Type**  ***(Please indicate the type of beneficiary/ies of the solicitation activity, i.e. Children, Family, Women, Persons with disability, Older Persons, Youth, Communities)*** | **Number of Beneficiaries** | **Target Areas** | | --- | --- | --- | | ***Example: Children*** | ***100 children*** | ***Region NCR and III*** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | | | | | | | | | | |
| Upon submission of this application, I hereby certify that the foregoing information/statement is to my knowledge, true, correct, complete, and updated.    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **SIGNATURE OF APPLICANT/AGENCY HEAD** | | | | | | | | | | | |