

Republic of the Philippines  
Department of Agriculture  
**FIBER INDUSTRY DEVELOPMENT AUTHORITY**  
Quezon City

Control No. : \_\_\_\_\_  
Date Applied : \_\_\_\_\_  
Date Released : \_\_\_\_\_  
License Expires on : \_\_\_\_\_

**APPLICATION FOR GRADING/BALING ESTABLISHMENT (GBE) LICENSE**  
(Renewal)

The Administrator  
FIDA, Quezon City

Thru : The Fiber Regional Director  
Region \_\_\_\_\_

Madam:

I have the honor to apply for the renewal of my **Grading/Baling Establishment (GBE) License** pursuant to PD 652 in relation to Executive Order Nos. 709 and 116 and in accordance with the provisions of FIDA Revised Administrative Order No. 1:

1. Name of Establishment : \_\_\_\_\_  
Address : \_\_\_\_\_ Tel. No.: \_\_\_\_\_ Fax No. \_\_\_\_\_ E-mail \_\_\_\_\_  
Metro Mla. (if any) \_\_\_\_\_ Tel. No.: \_\_\_\_\_ Fax No. \_\_\_\_\_ E-mail \_\_\_\_\_;
2. That I, \_\_\_\_\_, \_\_\_\_\_ (Nationality)  
residing at \_\_\_\_\_ with TIN : \_\_\_\_\_  
represent the above establishment as \_\_\_\_\_ (Pres./Mgr./Prop.);
3. That the approved marks of my establishment are :  
\_\_\_\_\_ Initial of Station \_\_\_\_\_ Registered Mark \_\_\_\_\_ Establishment No.;
4. That my previous license number \_\_\_\_\_ was issued on \_\_\_\_\_ at \_\_\_\_\_;
5. That I am exporting \_\_\_\_\_ (kinds) fiber/s to \_\_\_\_\_ (country);
6. That I am submitting the following documents to support my application:  
 Report of Operation for the Preceding Year in FIDA form.  
 List of Fiber Trader/s and Employed Classifier/s in FIDA form.
7. That the following is/are the amendments and/or change/s in my original application/s:  
1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_
8. That I shall allow FIDA representative/s to have free access to my bodega/establishment;
9. That my establishment pressed \_\_\_\_\_ bales during the preceding year;
10. That I shall provide a segregating partition in case commodities other than fiber are also stored in the same bodega;
11. That I shall submit statistical information/data required by FIDA;
12. That I have \_\_\_\_\_ (number) employee/s of whom \_\_\_\_\_ (number) is/are male/s and \_\_\_\_\_ (number) is/are female/s with an average of \_\_\_\_\_ (number) dependent/s per employee ;

13. That I and my personnel shall at all times comply with the FIDA rules and regulations.

I hereby certify under the penalty of law to the veracity of the above statements and that this application was prepared by me or my authorized representative under my personal direction.

\_\_\_\_\_  
Signature of Applicant Over Printed Name

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REPUBLIC OF THE PHILIPPINES)  
PROVINCE OF \_\_\_\_\_) S.S.  
Municipality of \_\_\_\_\_)

SUBSCRIBED AND SWORN to before me on this \_\_\_ day of \_\_\_\_\_ 200\_\_ affiant exhibiting to me his/her Community Tax Certificate No. \_\_\_\_\_ issued at \_\_\_\_\_ on \_\_\_\_\_ 200\_\_\_\_.

Notary Public  
Until December 200 \_\_

Doc. No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Series of \_\_\_\_\_

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**CERTIFICATION**  
(To be filled out by Licensing Personnel)

I hereby certify that the application of \_\_\_\_\_ for Grading/Baling Establishment (GBE) License has been reviewed/verified by me and that all the requirements are duly complied with.

Application fee of \_\_\_\_\_ (P\_\_\_\_\_) and license fee of \_\_\_\_\_ (P\_\_\_\_\_) for a total of \_\_\_\_\_ (P\_\_\_\_\_) was paid under OR No. \_\_\_\_\_ dated \_\_\_\_\_.

Remarks: \_\_\_\_\_.

Attested by:

Verified by:

\_\_\_\_\_  
Fiber Regional Director

\_\_\_\_\_  
Printed Name and Signature

\_\_\_\_\_  
Designation

Republic of the Philippines  
Department of Agriculture  
**FIBER INDUSTRY DEVELOPMENT AUTHORITY**  
Quezon City  
Region \_\_\_\_\_

\_\_\_\_\_  
Date of Inspection

**REPORT ON INSPECTION/EVALUATION OF FACILITIES/PREMISES  
(FOR GBE, CLASS A TRADER & TRADER-EXPORTER ONLY)**

1. Name of Establishment \_\_\_\_\_
2. Address: \_\_\_\_\_ IS/Reg. Mark: \_\_\_\_\_ Class: \_\_\_\_\_
3. Location of warehouse/premises & facilities: \_\_\_\_\_

<b>Facilities/Premises:</b>	<b><u>Rating</u></b>	<b><u>Standard Rating</u></b>
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- |  |       |                    |
|--|-------|--------------------|
| a. With partition to segregate fiber in case other commodities are stored in the same bodega | _____ | 30%                |
| b. With clean storage and adequate classification area                                       | _____ | 20%                |
| c. With adequate lighting facilities   | _____ | 20%                |
| d. With hanging poles/other similar facilities for drying                                    | _____ | 10%                |
| e. With restriction signs, such as "no smoking"<br>"no plastic allowed", etc.                | _____ | 10%                |
| f. Weighing Device: (if defective – 0%)  | _____ | <u>10%</u><br>100% |

4. Number of licensed classifiers employed by the applicant: \_\_\_\_\_;
5. Floor area of warehouse: \_\_\_\_\_ sq. m.; adequate  ; inadequate  (Pls. check)
6. Kind of pressing machine:  ordinary  high density ;
7. With cloth tag  without cloth tag  ;
8. With locker  without locker  for government stamps & other facilities for FIDA employee assigned thereat;
9. FIDA Signboard : Complied  ; Not Complied  ; New license  (To be complied within 60 days)
10. Price Bulletin : Complied  Not complied  ;

I/We hereby certify that the foregoing inspection report was based on the actual inspection conducted by undersigned FIDA representative on the facilities/premises of the above establishment/licensee.

Remarks/Recommendations: \_\_\_\_\_

Conforme: \_\_\_\_\_ Re-inspected/Re-evaluated by : \_\_\_\_\_  
Operator/Manager Print Name and Signature

\_\_\_\_\_  
Designation

Note:

Establishments with rating below 75% in facilities/premises shall not be issued licenses

Republic of the Philippines  
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Region \_\_\_\_\_, \_\_\_\_\_

**Annual Report of Operation**

(Grading/Baling Establishment)

Name of GBE : \_\_\_\_\_

Address : \_\_\_\_\_

Establishment No. \_\_\_\_\_ Initial of Station \_\_\_\_\_ Reg. Mark \_\_\_\_\_ Class \_\_\_\_\_

1. Dealing with \_\_\_\_\_ fibers.

2. Origin of Fiber/s:

Fiber/s

District of Production/Province

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Baling Operation :

a. Volume of fibers baled for own operation \_\_\_\_\_

b. Volume of fibers baled for others (State name and address of person/entity)

\_\_\_\_\_

\_\_\_\_\_

Name

Address

4. Inspection of fibers :

a. Volume of bales inspected : \_\_\_\_\_

( ) For Export \_\_\_\_\_ ( ) For Local consumption \_\_\_\_\_

(No. of Bales)

(No. of Bales)

b. ( ) Total No. of Bales Pressed \_\_\_\_\_ as verified from Primary  
Certificates by the Licensing officer.

c. Volume of approved bales : \_\_\_\_\_

5. Volume of Sales/Outlets:

( ) For Export \_\_\_\_\_ ( ) For Local Consumption \_\_\_\_\_

(No. of Bales)

(No. of Bales)

6. Employed \_\_\_\_\_ licensed classifier/s the preceding year.

(number)

7. Total volume of bales pressed the preceding year

Kind

Volume

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Certified Correct:

\_\_\_\_\_

Pres./Prop./Manager

Attested by:

\_\_\_\_\_  
Signature of FIDA Representative  
Over Printed Name