



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Application for Authority to Print Invoices

BIR Form No.
1906
January 2024 (ENCS)

Fill in all applicable white spaces. Mark all appropriate boxes with an "X"

1 Taxpayer's Identification Number (TIN) <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> <div style="background-color: #cccccc; width: 10px; height: 10px;"></div> </div>	2 ATP APPLIED FOR <div style="margin-top: 5px;"> <input type="checkbox"/> Head Office <input type="checkbox"/> Branch Office </div>	3 RDO Code <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="width: 10px; height: 10px;"></div> <div style="width: 10px; height: 10px;"></div> <div style="width: 10px; height: 10px;"></div> </div>
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4 Registered Name *(Last Name, First Name, Middle Name for Individual)/(Registered Name for Non-Individual)*

5 Trade/Business Name, if applicable	

6 Business Address (Indicate applicable complete head or branch office address)									
									6A ZIP Code

7 Contact Number	8 Email Address

Accredited Printer's Details

9 Printer's TIN	10 Printer's Accreditation Number	11 Date of Accreditation (MM/DD/YYYY)
- - -		

12 Printer's Name (Last Name, First Name, Middle Name for Individual)/(Registered Name for Non-Individual)

13 Printer's Business Address (Indicate applicable complete head or branch office address)									
									13A ZIP Code

14 Contact Number	15 Email Address

Details of Application for Invoices

16 Manner of Invoices	<input type="checkbox"/> Bound	<input type="checkbox"/> Loose Leaf
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17 Description of Invoices *(Attach additional sheet/s, if necessary)*

A. For Principal Invoices

Description	TYPE		No. of Boxes/ Booklets		No. of Sets per Box/ Booklet	Serial No.			No. of Copies per Set
	VAT	Non-VAT	Loose	Bound		Start		End	
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							

B. For Secondary Invoices

Description	TYPE		No. of Boxes/ Booklets		No. of Sets per Box/ Booklet	Serial No.			No. of Copies per Set
	VAT	Non-VAT	Loose	Bound		Start		End	
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							

18 Declaration

I declare, under the penalties of perjury that this application has been made in good faith, verified by me and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give consent to the processing of my information as contemplated under the *Data Privacy Act of 2012 (RA No. 10173) for legitimate and lawful purposes.

Stamp of BIR Receiving Office
and Date of Receipt

TAXPAYER/AUTHORIZED REPRESENTATIVE
(Signature over Printed Name)

Title/Position of Signatory

Date of Release of Authority to Print

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(MM/DD/YYYY)

***Note:** The BIR Data Privacy Policy is in the BIR website (www.bir.gov.ph)

Documentary Requirements:

For Manual Bound Invoices:

- ☐ 1. Final clear sample of OWN Invoices/Supplementary Invoices; (1 original) and
- ☐ 2. For subsequent application
Last issued ATP (1 photocopy) or Printer Certificate of Delivery (PCD) (1 photocopy); or Any booklet from the last issued ATP. (Booklet to be presented)

For Manual Loose Invoices:

- ☐ 1. Permit to Use Loose Leaf Invoices; (1 photocopy)
- ☐ 2. Final clear sample of OWN Invoices/Supplementary Invoices; (1 original) and
- ☐ 3. Last issued ATP for subsequent application. (1 photocopy)

Additional Documents , if applicable:

- ☐ 1. If transacting through a Representative:

For Individual:

- 1.1 Special Power of Attorney (SPA) executed by the taxpayer-applicant indicating specific transaction; [1 original for first time submission, if authorized to more than one transaction, submit certified true copy (together with the original copy for presentation and validation only]
- 1.2 Any government-issued ID of the taxpayer and authorized representative; (1 photocopy, both with one specimen signature)

For Corporation/Non-Individual:

- 1.1 Board Resolution/Written Resolution (in case of OPC) or Secretary’s Certificate, indicating the purpose and the name of the authorized representative; [1 original for first submission, if authorized to more than one transaction, submit certified true copy (together with the original copy for presentation and validation only)]
- 1.2 Any government-issued ID of one of the signatories and authorized representative. (1 photocopy, both with one specimen signature)

Only the head office shall file the “Application for Authority to Print (ATP) Invoices”. One (1) application should be filed and one (1) permit should be issued for every establishment (head office or each branch). The data that should appear in the ATP are the data pertaining to the establishment that will use the invoices.