



Republic of the Philippines
SOCIAL SECURITY SYSTEM
APPLICATION TO LEASE INVESTMENT PROPERTY (ALIP)
COMPANY/BUSINESS

☐ NEW ☐ RENEWAL

PLEASE READ THE INSTRUCTIONS AND REMINDERS AT THE BACK BEFORE FILLING OUT THIS FORM. PRINT ALL INFORMATION IN CAPITAL LETTERS AND USE BLACK INK ONLY.

PART I - TO BE FILLED OUT BY THE PROSPECTIVE LESSEE

A. PROPERTY INFORMATION

LEASE OF ☐ RESIDENTIAL UNIT ☐ OFFICE ☐ PARKING SLOT ☐ COMMERCIAL SPACE/UNIT ☐ LOT : _____ SQ.M.
PROPERTY (RM/FLR/UNIT NO. & BLDG. NAME/LOT NO.) (BARANGAY/DISTRICT/LOCALITY) (CITY/MUNICIPALITY) (PROVINCE)

B. INTENT TO LEASE

_____ (Applicant), as herein represented by the undersigned, intends to lease the above property to be used as a _____ starting _____, 20____ for a term of _____ (months/year).

Preferred Mode of Payment:

☐ Issuance of Postdated Checks (Account should be under applicant's name)
☐ Advance payment (Minimum of 6 months)

SIGNATURE OVER PRINTED NAME OF OWNER/
AUTHORIZED REPRESENTATIVE & POSITION

C. COMPANY/BUSINESS INFORMATION

EMPLOYER/SS NUMBER _____ BUSINESS NAME _____
TAX IDENTIFICATION NUMBER _____ NATURE OF BUSINESS _____ VAT EXEMPT? Yes/No _____
☐ PEZA ☐ Others, specify _____
MAIN OFFICE ADDRESS (RM/FLR/UNIT NO. & BLDG. NAME/LOT NO.) (STREET NAME) (SUBDIVISION) (BARANGAY/DISTRICT/LOCALITY)
(CITY/MUNICIPALITY) (PROVINCE) (COUNTRY) (ZIP CODE) LENGTH OF STAY: _____
☐ Own ☐ Rent
FOREIGN ADDRESS (RM/FLR/UNIT NO. & BLDG. NAME) (STREET NAME) (SUBDIVISION) (BARANGAY/DISTRICT/LOCALITY)
(CITY/MUNICIPALITY) (PROVINCE) (COUNTRY) (ZIP CODE) LENGTH OF STAY: _____
☐ Own ☐ Rent
APPLICANT WAS REFERRED BY BROKER? ☐ Yes ☐ No

D. OWNER'S/AUTHORIZED REPRESENTATIVE'S INFORMATION (APPLICANT)

SSS NUMBER _____ NAME (LAST NAME) (GIVEN NAME) (MIDDLE NAME)
TAX IDENTIFICATION NUMBER _____ E-MAIL ADDRESS _____ OFFICE TEL. NUMBER _____ CELL PHONE NUMBER _____ OFFICE FAX NUMBER _____
HOME ADDRESS (RM/FLR/UNIT NO. & BLDG. NAME/LOT NO.) (STREET NAME) (SUBDIVISION) (BARANGAY/DISTRICT/LOCALITY)
(CITY/MUNICIPALITY) (PROVINCE) (COUNTRY) LENGTH OF STAY: _____
☐ Own ☐ Rent ☐ Company Provided ☐ Living with Relatives
POSITION _____ DEPARTMENT _____ LENGTH OF SERVICE _____

E. CERTIFICATION, DATA PRIVACY CONSENT AND AUTHORIZATION

- 1 I/We certify that all information furnished herein are true and correct to the best of my/our knowledge.
2 I/We hereby consent to :
• the collection, data capture, storage, retention and sharing of my personal data to carry out the purpose of this application;
• disposal of the application in the manner consistent with the Data Privacy Act.
3 I/We trust that all these data shall be kept confidential by SSS.

OWNER/ REPRESENTATIVE	OCCUPANT (For Residential Units Only)
1 X 1	1 X 1

PRINTED NAME OF OWNER/
AUTHORIZED REPRESENTATIVE _____ SIGNATURE _____ DATE _____
PRINTED NAME OF OCCUPANT
(FOR RESIDENTIAL UNITS ONLY) _____ SIGNATURE _____ DATE _____

PART II - TO BE FILLED OUT BY SSS

RECEIVED AND SCREENED BY

SIGNATURE OVER PRINTED NAME _____ DEPARTMENT _____ DESIGNATION _____ DATE & TIME _____

Perforate Here



SOCIAL SECURITY SYSTEM
APPLICATION TO LEASE SSS PROPERTY - COMPANY/BUSINESS
ACKNOWLEDGEMENT STUB

PROPERTY _____ NAME (LAST NAME) (GIVEN NAME) (MIDDLE NAME) _____ CONTROL NUMBER _____
RECEIVED AND SCREENED BY _____ DATE RECEIVED _____ RECEIVING DEPARTMENT _____
SIGNATURE OVER PRINTED NAME _____ DESIGNATION _____

PART III- OCCUPANT INFORMATION (FOR LEASE OF RESIDENTIAL UNIT) (Please use additonal sheet, if necessary)						
NAME (LAST NAME) (GIVEN NAME) (MIDDLE NAME)			AGE	NATIONALITY	RELATIONSHIP TO LESSEE	CONTACT NO./EMAIL ADDRESS
PART IV- SSS ACCREDITED BROKER'S INFORMATION						
Type <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> COMPANY		BROKER/COMPANY NAME			REPRESENTATIVE/EMPLOYEE NAME	
EMPLOYER/SS NUMBER		LICENSE NO.	EXPIRATION DATE (MM/DD/YYYY)		E-MAIL ADDRESS	
TAX IDENTIFICATION NUMBER		CELL PHONE NUMBER	TELEPHONE NUMBER		FAX NUMBER	
HOME/COMPANY ADDRESS (RM/FLT/UNIT NO. & BLDG. NAME) (HOUSE/LOT & BLK. NO.) (STREET NAME) (SUBDIVISION)						
(BARANGAY/DISTRICT/LOCALITY) (CITY/MUNICIPALITY) (PROVINCE) (COUNTRY)						
INSTRUCTIONS						
<div>1) Accomplish one (1) copy of this form. Erasures and alterations must be countersigned.</div> <div>2) Place a checkmark on the applicable box.</div> <div>3) Affix recent 1 x 1 photo</div> <div>4) Write "N/A" for items not applicable</div> <div>5) This application shall be filed personally by the prospective lessee/authorized representative/real estate broker</div> <div>6) Submit this form to Investment Property Department(IPD) and the required documents listed below</div>						
DOCUMENTARY REQUIREMENTS GUIDE						
IDENTIFICATION REQUIREMENTS (Present the original) Any of the following: <div><input type="checkbox"/> 1 SSS/GSIS ID/UMID</div> <div><input type="checkbox"/> 2 Passport</div> <div><input type="checkbox"/> 3 Driver's License</div> <div><input type="checkbox"/> 4 Government issued ID</div>			ADDITIONAL DOCUMENTARY REQUIREMENTS (Present the original) <div>For Sole Proprietorship</div> <div><input type="checkbox"/> 6 DTI Registration</div> <div>For Corporation/partnership/joint venture</div> <div><input type="checkbox"/> 6 SEC Registration of the Lessee or in case of a foreign entity, a license to do business in the Philippines</div> <div><input type="checkbox"/> 7 Articles of Incorporation/Partnership, By Laws of the Lessee as amended, if any</div> <div><input type="checkbox"/> 8 Mayor's Permit issued by the City or Municipality where the principal place of business of the Lessee is located</div> <div><input type="checkbox"/> 9 Board Resolution duly certified by the Corporate Secretary authorizing the lease as well as authorized signatories to execute the Contract of Lease</div> <div>For Government Agencies</div> <div><input type="checkbox"/> 6 Board Resolution duly certified by the Corporate Secretary authorizing the lease as well as authorized signatories to execute the Contract of Lease</div> <div><input type="checkbox"/> 7 Applicable law creating the government agency/entity</div> <div><input type="checkbox"/> 8 Proof of fund availability</div>			
DOCUMENTARY REQUIREMENTS (Present the original) <div><input type="checkbox"/> 1 Latest Income/Business Tax Return, if applicable</div> <div><input type="checkbox"/> 2 Certificate of Registration (COR) from BIR/ BIR Form 2303</div> <div><input type="checkbox"/> 3 Tax Clearance issued by BIR</div> <div><input type="checkbox"/> 4 Certificate Under oath that prospective lessee is free and clear of all tax liabilities to the government</div> <div><input type="checkbox"/> 5 Sketch plan, specification,scope of work and cost estimate of proposed improvement, if any</div>						
KEY POLICIES						
<div><div>Lease of SSS properties is on "as-is-where-is" basis.</div><div>Effectivity/ Move-In Date shall be the first day of the month following the month of receipt of the Notice of Approval issued by IPD.</div><div>Payment of Security Deposit, Advance Rent and issuance of PDC shall be made before move-in date.</div><div>Contract of Lease shall be signed by the Lessee/Lessee's authorized signatory/ies at the SSS Main Office.</div><div>Incomplete documentary requirements will not be accepted.</div></div> <div>I/We understand that this application is subject to evaluation and approval by the approving authorities and confirmation by the Social Security Commission (SSC).</div> <div><div>PRINTED NAME OF APPLICANT</div><div>SIGNATURE</div><div>DATE</div></div>						