(To be filled out by BIR) DLN: _____

Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Bringing In Revenues for Nation-building

Application for Registration

BIR Form No.
1902
October 2025 (ENCS) P1

For Individuals Earning Purely Compensation Income (Local and Alien Employee)

- - - 0 0 0 0 0
New TIN to be issued, if applicable *(To be filled out by BIR)*

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

1 BIR Registration Date *(To be filled out by BIR) (MM/DD/YYYY)* | **2** PhilSys Card Number (PCN)

Part I - Taxpayer/Employee Information

3 Taxpayer Identification Number *(TIN)* *(For Taxpayer with existing TIN)* - - - 0 0 0 0 0 | **4** RDO Code *(To be filled out by BIR)* | **5** Taxpayer Type ☐ Local ☐ Resident Alien ☐ Special Non-Resident Alien

6 Taxpayer's Name
(Last Name) | *(First Name)*
(Middle Name) | *(Suffix)* | **7** Gender ☐ Male ☐ Female

8 Civil Status ☐ Single ☐ Married ☐ Widow/er ☐ Legally Separated

9 Date of Birth *(MM/DD/YYYY)* | **10** Place of Birth

11 Mother's Maiden Name *(First Name, Middle Name, Last Name, Suffix)*

12 Father's Name *(First Name, Middle Name, Last Name, Suffix)*

13 Citizenship | **14** Other Citizenship, if applicable

15 Local Residence Address
Unit/Room/Floor/Building No. | *Building Name/Tower*
Lot/Block/Phase/House No. | *Street Name*
Subdivision/Village/Zone | *Barangay*
Town/District | *Municipality/City*
Province | *ZIP Code*

16 Foreign Address

17 Municipality Code *(To be filled out by BIR)* | **18** Tax Type: **INCOME TAX** | **19** Form Type: **BIR Form No. 1700** | **20** ATC: **II 011**

21 Identification Details *[government issued ID (e.g., passport, driver's license, etc.), company ID, etc.]*

Type	Number	Effectivity Date *(MM/DD/YYYY)*	Expiry Date *(MM/DD/YYYY)*

Issuer | Place/Country of Issue

22 Preferred Contact Type
☐ Landline Number ☐ Fax Number ☐ Mobile Number
☐ Email Address *(required)*

Part II - Spouse Information *(if applicable)*

23 Employment Status of Spouse ☐ Unemployed ☐ Employed Locally ☐ Employed Abroad ☐ Engaged in Business/Practice of Profession

24 Spouse Name
(Last Name) | *(First Name)*
(Middle Name) | *(Suffix)* | **25** Spouse TIN - - - 0 0 0 0 0

26 Spouse Employer's Name *(**If Individual**, Last Name, First Name, Middle Name, Suffix) (**If Non-Individual**, Registered Name) (Attach additional sheet/s, if necessary)*

27 Spouse Employer's TIN - - -

Part III – For Employee with Two or More Employers (Multiple Employments) Within the Calendar Year

28 Type of Multiple Employments

☐ Successive Employments *(With previous employer/s within the calendar year)*

☐ Concurrent Employments *(With two or more employers at the same time within the calendar year)*

(If successive, enter previous employer/s; if concurrent, enter secondary employer/s)

Previous and/or Concurrent Employments During the Calendar Year *(Attach additional sheet/s, if necessary)*

28A Name of Employer	
28B Employer's TIN	- - -
28C Name of Employer	
28D Employer's TIN	- - -
28E Name of Employer	
28F Employer's TIN	- - -

29 Declaration

I declare under the penalties of perjury that this application, and all its attachments, have 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 my consent to the processing of my information as contemplated under the *Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

Taxpayer (Employee)/Authorized Representative
(Signature over Printed Name)

Part IV – Primary/Current Employer Information

30 Type of Registered Office ☐ Head Office ☐ Branch Office

31 TIN - - -

32 RDO Code

33 Employer's Name ***(If Individual**, Last Name, First Name, Middle Name, Suffix) (**If Non-Individual**, Registered Name)*

34 Employer's Address

Unit/Room/Floor/Building No.	*Building Name/Tower*
Lot/Block/Phase/House No.	*Street Name*
Subdivision/Village/Zone	*Barangay*
Town/District	*Municipality/City*
Province	*ZIP Code*

35 Contact Details

Landline Number	Fax Number	Mobile Number

36 Relationship Start Date/Date Employee was Hired (*MM/DD/YYYY*)

37 Municipality Code *(To be filled out by BIR)*

38 Declaration

I declare under the penalties of perjury that this application and all its attachments, have 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 my consent to the processing of my information as contemplated under the *Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

EMPLOYER/AUTHORIZED REPRESENTATIVE
(Signature over Printed Name)

Title/Position of Signatory

Stamp of BIR Receiving Office and Date of Receipt

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

Documentary Requirements:

For Local Employees (Already Hired):

☐ 1. Any government-issued ID (e.g., PhilID/ePhilID, Passport, Driver's License/eDriver's License) that shows the name, address and birthdate of the applicant. In case the ID has no address, any proof of residence; (1 photocopy)

For Foreign Nationals/Alien Employee:

☐ 1. Passport (Bio page, including date of entry/arrival and exit/departure stamp, if applicable); (1 photocopy)

Additional documents, if applicable, for local & alien:

☐ 1. Marriage Contract, for married female; (1 photocopy)

☐ 2. In the case of employer manually securing TIN on behalf of its employees due to system unavailability or technical issue:

- (a) Letter of Authority (LOA) with company letterhead (if applicable) signed by the President or HR Head indicating the company name and its authorized representative; (1 original)
- (b) Any government-issued ID of the signatory (for signature validation); [1 certified true copy with original specimen signature (wet)]
- (c) Any government-issued ID of the authorized person; [1 photocopy with one original specimen signature (wet)]
- (d) Transmittal List of Newly Hired Employees with a place of assignment and certifying that the list is its newly hired employees; (1 original)
- (e) Printed copy of ORUS error message, if technical issue (1 original)

POSSESSION OF MORE THAN ONE TAXPAYER IDENTIFICATION NUMBER (TIN) IS CRIMINALLY PUNISHABLE PURSUANT TO THE PROVISIONS OF THE NATIONAL INTERNAL REVENUE CODE OF 1997, AS AMENDED.