

#### REQUESTING PARTY

Complete Name of the Requestor:

Title/Prefix

First Name

Middle Name

Last Name

Suffix

Address:

House/Building No./Building Name

Street Name

Barangay

City/Municipality

Province

Region

Country

Zip Code

Telephone No.

Mobile No.

Fax No.

Email Address

Sex:

☐

Male

☐

Female

Citizenship:

Social Classification:

☐

Abled

☐

Differently-abled

☐

Indigenous Person

☐

Senior Citizen

☐

Youth

☐

Out-of-school Youth

Proof of Valid Identification:  
(Please attach copy)

☐

Passport

☐

SSS/GSIS ID

☐

Voter's ID

☐

Driver's License

☐

Postal ID

☐

Others (Please specify: \_\_\_\_\_)

Preferred Mode of  
Communication:

☐

Landline

☐

Fax

☐

Email

☐

Mobile

Preferred Mode of Receiving

☐

Email

☐

Registered Mail

☐

Private courier

Requested Information:

☐

Fax

☐

Pick-up at DTI

(If your request is successful, we will be sending the documents to you in this manner)

#### REPRESENTATIVE/GUARDIAN (if applicable)

Complete Name of

Representative/ Guardian:

Title/Prefix

First Name

Middle Name

Last Name

Suffix

Proof of Valid Identification:  
(please attach copy)

Valid Proof of Authority:  
(please attach copy)

#### REQUESTED INFORMATION

Title of Document Requested :

☐

Photocopy

☐

Softcopy

Note: Please provide as much detail as you can

Date/Period Covered

(DD/MM/YYYY – DD/MM/YYYY):

Specific Purpose (Please be as specific as possible):

Note: The following general averments of the purpose such as "for information," "for research," "for legal purposes" or other similarly worded purpose shall not be considered to have met the requirement of specificity.

#### UNDERTAKING

**Privacy Notice:** All personal data collected herein shall be processed according to the provisions of the Data Privacy Act of 2012 (DPA), its Implementing Rules and Regulations (IRR), and related issuances.

I declare and certify under oath that:

- The undersigned whose name and signature appears here and all the information provided in this form are complete and correct;
- I hereby agree and consent to the collection and processing of my personal data, as provided through this form, for the purpose of evaluating the validity of my request for information;
- I understand that my personal information may be shared across DTI for the purpose of monitoring and evaluation; the use of which shall be governed by the Data Privacy Act of 2012 and related laws and issuances;
- I assure the notification of DTI should there be any amendment in my personal information;
- The requested information shall only be used for the stated purpose and that I will not misuse any information obtained from this Office;
- I have read the privacy notice and understand that the DTI may collect, use, disclose and process personal information contained in this request;
- I have provided the necessary proof/s of identity (government ID), authority (if applicable) and at least one (1) contact detail; and
- I shall pay the necessary fees for reproduction, copying, certification and/or mailing if applicable under the circumstance.

I understand that any violation of this Undertaking will result in the denial of my request. I likewise understand and I am aware that the giving of false or misleading information or using forged documents is a criminal offense that is punishable under the law.

Signature Over Printed Name

Date Accomplished (DD/MM/YYYY)

Please affix right thumbmark if unable to write

FOI RECEIVING OFFICER (For internal use only)

Tracking Number:

Received by:

(Last Name, First Name, Middle Name)

Date received:

(DD/MM/YYYY)

☐ ARTA | ☐ 3 days ☐ 7 days ☐ 20 days

☐ FOI

Action/s Taken:

REVIEW and APPROVAL: The Trade and Industry Information is accurate with no typographical, grammatical and factual error

Reviewed By:

Approved By:

Name & Signature

Position

Name & Signature

Position

DEPARTMENT OF TRADE AND INDUSTRY  
**TRADE AND INDUSTRY INFORMATION**  
**REQUEST FORM**  
FY \_\_\_\_\_

Document Code	FM-TII-01
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Effective Date	March 03, 2025