

REQUEST FOR CERTIFICATION OF EXISTING OUTSTANDING TAX LIABILITY/IES FOR ONE-TIME ABATEMENT OF MICRO TAXPAYERS PURSUANT TO REVENUE REGULATIONS NO. 004-2026

(Date)

(Head/Designation)

(Name of Issuing Office)

In connection with the application for One-time abatement of MICRO taxpayer, the taxpayer below respectfully requests for information of any outstanding internal revenue tax liability/ies and/or stop-filer cases based on the records of your Office.

Name of Taxpayer :
T.I.N. :
Address :

Your prompt action on this matter is highly appreciated.

(Name and Signature of Requesting Taxpayer/Authorized Representative)

(To be filled-out by the issuing office)

CERTIFICATION OF EXISTING OUTSTANDING TAX LIABILITY/IES FOR ONE-TIME ABATEMENT OF MICRO TAXPAYERS PURSUANT TO REVENUE REGULATIONS NO. 004-2026

This is to certify that the above-named taxpayer has the following record/s as of _____:

1. Stop-Filer Cases

Form Type	Return Period	No. of Cases	Remarks

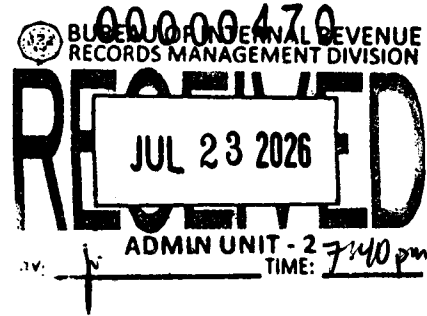
(use additional sheet, if necessary)

2. Outstanding Tax Liability/ies

Assessment No./ Case No.	Date Issued/ Assessment	Tax Type	Taxable Period/ Year	Tax Liabilities					Partial Payment on or before Dec. 31 2025, if any	Net Basic Tax as of December 31, 2025	Status [If Transferred out (indicate in this column name of office, date of & reason for transfer)]	Remarks (if with/without Application for Compromise Settlement/Abatement of Penalties)
				Basic	Interest	Surcharge	Compromise Penalty	Total Amount Due & Demandable				

(use additional sheet, if necessary)

Issued this _____ day of _____, 202____.
Note: This Certification shall be valid for only one (1) month.



(Name of Head of Office/Designation/Signature)
(Name of Issuing Office)