



**NATIONAL LIBRARY OF THE PHILIPPINES**  
T.M. Kalaw Street, Ermita, Manila, 1000 Philippines

(You must provide one publishable address, applicants will not be processed without this information)

**PUBLISHER'S INFORMATION**

<b>Business Name of Publisher:</b>		
<b>Address:</b>		<b>Postal code</b>
<b>Former Name (if any)</b>		
<b>Contact Person:</b>		<b>Position:</b>
<b>Tel No.:</b>	<b>Mobile No.:</b>	<b>E-mail:</b>

**PUBLISHING INFORMATION**

How many titles of music/musical scores have you published?
How many titles of music/musical scores do you intend to publish within the next ten years?
What forms of publications produced? <i>(Please check)</i>
<input type="checkbox"/> printed music <input type="checkbox"/> musical scores <input type="checkbox"/> microform music <input type="checkbox"/> electronic music <input type="checkbox"/> others
What languages will be used?
<input type="checkbox"/> English <input type="checkbox"/> Filipino <input type="checkbox"/> Others <i>(please specify)</i>
What is the field of specialization of your publications? <i>(subject/topic)</i>

**PROCESSING INFORMATION**

ISMN Application will be process for ONE DAY only (**Saturdays, Sundays and Holidays are excluded**) upon completion of the requirements.

ISMN will be issued ONLY to the authorized company representative. Person other than the ISMN will be issued ONLY to the authorized company representative. Person other than the authorized company representative will be required for a **Certificate of Authorization**.

**PROCESSING SURCHARGE: P120.00**

You may choose any of the following methods of payment:

1. Cash
2. Postal Money Order (made payable to: **National Library of the Philippines**)
3. Check (Manager, Company, Cashier)

Contact Person: **MS. NIÑA B. FRONDA**  
Chief, Bibliographic Services Division  
email: [isbn@nlp.gov.ph](mailto:isbn@nlp.gov.ph)

\_\_\_\_\_  
Printed Name under Signature

\_\_\_\_\_  
Date

(Do not fill below the line)

Publisher prefix assigned: Block of ISMN required:	10 _____ 100 _____ 1000 _____
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ISSUED BY: _____
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