| Date of Receipt | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Date Issued | |
| Amount Paid | |
| APPLICATION FOR LOCATIONAL CLEARAN | CE/CERTIFICATE OF ZONING COMPLIANCE |
| 1. NAME OF APPLICANT | 2. NAME OF CORPORATION |
| | |
| 3. ADDRESS OF APPLICANT | 4. ADDRESS OF CORPORATION |
| 3. ADDRESS OF AFFEIGANT | 4. ADDRESS OF CORPORATION |
| | |
| 5. NAME OF AUTHORIZED REPRESENTATIVE | 6. ADDRESS OF AUTHORIZED REPRESENTATIVE |
| | |
| 7. PROJECT TYPE | 8. PROJECT AREA (In sq. m.) |
| | |
| 9. PROJECT LOCATION | |
| 5. 1 Nos201 2007(116)(| |
| 40 DIQUE OVERLAND | 44 000 1507 1471105 |
| 10. RIGHT OVERLAND () Land owner () Other, specify | 11. PROJECT NATURE () Permanent |
| () Lessee | () Temporary (specify) |
| | |
| 12. EXISTING LAND USES OF PROJECT SITE | |
| () Residential () Industrial () Vacant/Idle () Agriculture (specify) () Institutional () Commercial () Other (specify) () Tenanted () Non-Tenanted | |
| () | () |
| 13. PROJECT COST/CAPITALIZATION (In peso) | |
| | |
| 44 IF THE DD0 IFOT ADDI IED FOR 10 THE OUR IED | OT OF WEITTEN NOTICES FROM THE OFFICE/ROADD |
| 14. IF THE PROJECT APPLIED FOR IS THE SUBJE | CT OF WRITTEN NOTICES FROM THIS OFFICE/BOARD |
| AND/OR DEPLITIZED ZONING ADMINISTRATION | TO THE EFFECT OF REQUIRING FOR PRESENTATION |
| | TO THE EFFECT OF REQUIRING FOR PRESENTATION OF ZONING COMPLIANCE OR TO APPLY FOR |
| OF LOCATIONAL CLEARANCE/CERTIFICATE LOCATIONAL CLEARANCE. () YES () N | OF ZONING COMPLIANCE OR TO APPLY FOR |
| OF LOCATIONAL CLEARANCE/CERTIFICATE LOCATIONAL CLEARANCE. () YES () N If Yes, answer the following: | OF ZONING COMPLIANCE OR TO APPLY FOR |
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Notary Public