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| **REPUBLIC OF THE PHILIPPINES** | | | | | | | | |
| **PROVINCE OF CEBU** | | | | | | | | |
| **CITY OF NAGA** | | | | | | | | |
|  | | | | | | | | |
| OFFICE OF THE CITY MAYOR | | | | | | | | |
| **PERMITS AND LICENSES DIVISION** | | | | | | | | |
|  | | | | | | | | |
| **BPLS CONSOLIDATED INSPECTION REPORT FROM** | | | | | | | | |
|  | | | | | | | | |
| BUSINESS NAME: | Adriatico Eyewear and More | | | | | | | |
| PROPRIETOR: | ADRIATICO, CLAIRE G | | | | | | | |
| ADDRESS: | Alfaco City Of Naga Cebu | | | | | | | |
| DATE OF INSPECTION: | July 15, 2019 | | | | | | | |
|  |  | | | | | | | |
| STATUS OF BUSINESS: |  |  | NEW | X | | RENEWAL | | |
|  | | | | | | | | |
| OFFICE | FINDINGS | | | | | | REMARKS | INSPECTORS SIGNATURE OVER PRINTED NAME |
| Treasury |  |  |  | | | |  |  |
|  | X | CONFORMING/ALLOWABLE | | | |  |
|  |  |  | | | |  |
|  |  | NON-CONFORMING | | | |  |
|  |  |  | | | |  |
| Planning and Development |  |  |  | | | |  |  |
|  | X | COMPLYING | | | |  |
|  |  |  | | | |  |
|  |  | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| Engineering |  |  |  | | | |  |  |
|  |  | COMPLYING | | | |  |
|  |  |  | | | |  |
|  | X | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| Building Official |  |  |  | | | |  |  |
|  | X | COMPLYING | | | |  |
|  |  |  | | | |  |
|  |  | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| Environment And Natural Resources |  |  |  | | | |  |  |
|  |  | COMPLYING | | | |  |
|  |  |  | | | |  |
|  | X | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| Rural Health Unit |  |  |  | | | |  |  |
|  |  | COMPLYING | | | |  |
|  |  |  | | | |  |
|  | X | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| Fire Station |  |  |  | | | |  |  |
|  | X | COMPLYING | | | |  |
|  |  |  | | | |  |
|  |  | NON-COMPLYING | | | |  |
|  |  |  | | | |  |
| *FOR BPLO USE* | | | | | | | | |
| **RECOMMENDATION:** | | | | | | | | |
|  | |  | APPROVED FOR PROCESSING | | | | | |
|  | |  |  | | | | | |
|  | | X | RETURN TO THE APPLICATION FOR COMPLIANCE OF THE ABOVE NOTED VIOLATION | | | | | |
|  | |  |  | | | | | |
|  | |  | OTHERS, (SPECIFIED BELOW) | | | | | |
|  | |  |  | | | | | |
|  | | | | | | | | |
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|  | | | | |  | | | |
|  | | | | | *Business Permit and Licensing Officer-Designate* | | | |
| NOTES: | | | | | | | | |
| DRAW SKETCH MAP OF THE ESTABLISHMENT AT THE BACK OF THE FORM | | | | | | | | |
|  | | | | | | | | |
| FURNISH THE OPERATOR & BPLO WITH INDIVIDUAL INSPECTION REPORT FROM EACH REGULATORY OFFICE | | | | | | | | |
|  | | | | | | | | |
| PLEASE SEE INDIVIDUAL INSPECTION REPORT FOR ANY VIOLATIONS NOTED HEREIN. | | | | | | | | |
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