



BUREAU OF FIRE PROTECTION AUTOMATED CLEARANCE SYSTEM

Service Made FAST- EASY - RELIABLE (02) 426 0219 / 426 0246 www.bfp.gov.ph

FSIC

APPLICATION FORM

CHECK BOX OF CLEARANCE APPLIED FOR

<input type="checkbox"/> FIRE SAFETY INSPECTION CERTIFICATE For Issuance of Occupancy Permit	<input type="checkbox"/> FIRE SAFETY INSPECTION CERTIFICATE For Issuance of Business Permit/ Certificate of Annual Inspection for PEZA	
	<input type="checkbox"/> NEW BUSINESS	<input type="checkbox"/> RENEWAL

Business Identification Number (BIN)	Tax Identification Number (TIN)

NAME OF OWNER			
ESTABLISHMENT NAME			
TRADE NAME		BUSINESS NATURE	
EXACT BUSINESS ADDRESS			
LANDLINE/FAX		CELLPHONE NUMBER	EMAIL ADDRESS
AUTHORIZED REPRESENTATIVE (If Applicant is not the Owner)			

ATTACHED DOCUMENTARY REQUIREMENTS

FSIC FOR OCCUPANCY PERMIT

- ☐ COPY OF APPLICATION FORM FOR CERTIFICATE OF
OCCUPANCY FROM OFFICE OF THE BUILDING OFFICIAL
OR ASSESSMENT OF FEES FROM OBO
- ☐ PHOTOCOPY OF CERTIFICATE OF COMPLETION
- ☐ AS-BUILT PLAN (If Necessary)

NOTE: Incomplete documentary requirements will be returned to
the applicant.

FSIC FOR BUSINESS PERMIT

- ☐ BUSINESS PERMIT APPLICATION FORM OR TAX ASSESSMENT
BILL FROM THE BUSINESS PERMIT AND LICENSING OFFICE
- ☐ COPY OF FIRE INSURANCE (IF ANY)
- ☐ AFFIDAVIT OF UNDERTAKING OF NO
ALTERATION TO BUILDING (For NEW Business
with Valid FSIC Issued for Occupancy)

I hereby certify the correctness of the information provided above and the completeness of the attached
documents.

SIGNATURE OVER PRINTED NAME

DATE

VERIFIED BY:	DATE RECEIVED	
	TIME RECEIVED	

BFP-QSF-FSED-002 REV.00 (06.01.18)

NOTE: Authorized Representative must present an Authorization Letter and Copy of Owner's Identification Card
CONTACT INFORMATION: email:

DATE

CUSTOMER RELATION OFFICER

CERTIFIED BY:

FSIC
APPLICATION

CLAIM STUB