

BI FORM NO. CCS-A-NTSP-2016 This document may be reproduced and is NOT FOR SALE **APPLICATION FORM FOR REQUEST FOR CERTIFICATE OF NOT THE SAME PERSON (NTSP)**

Paste here recent 2x2 colored	SUBJECT'S PERSONAL INFORMATION Last Name													
picture with white background.														
The photo must be taken within the	First/Given Name	_												
last three (3) months from the date of application.														
A scanned copy photo and photo	Middle Name													
wearing eyewear like eyeglasses or	Other Name (c) (Alice (cc)													
colored contact lenses will not be accepted.	Other Name(s)/Alias(es)													
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	2													
Date of Birth [DD-MMM-YYYY e.g. 0	- 01 JAN 1990] Gender													
Duce of Birth [DD Minist 1111 c.g. o	M F													
Place of Birth														
Citizenship (Nationality)														
Citizenship/Nationality														
Residential/Registered Address House/Unit No., Street, Subdivision														
Tiodse, offic No., Street, Subdivision														
Barangay, Municipality/City														
Province, Zip Code														
Passport Number														
l disport Number														
Contact Number(c) in the Philip														
Contact Number(s) in the Philip Landline	Mobile Mobile													
Landine	Mobile													
Purpose:		_												
Date [DD-MMM-YYYY]	Signature over PRINTED NAME of Applicant													
	Certification and Clearance Section (CCS) Window													
	RECEIVED: Date & Time													
	RELEASED: Date & Time													
To be filled out by Authorized RI Pers	Connel Only!	_												

be filled out by Authorized BI Personnel Only]



CERTIFICATE OF NOT THE SAME PERSON CLAIM STUB

Name of SUBJECT[Last Name, First/Given Name, Middle Name]

Date of Birth [DD-MMM-Y	YYY]										
Citizenship/Nationality											

- Always present this claim stub upon claiming your certificate.
- Unclaimed certificate shall be automatically cancelled after 30 days from the date of issuance.
- If claimed by an authorized representative, present a Special Power of Attorney (SPA) and original ${\sf SPA}$ valid government-issued ID.

Date & Time FILED

Date & Time RELEASED