**CARPER LAD Form No. 4**

(Revised CARP-LAD Form No. 8)

**Landowner’s Letter reply to noc**

|  |
| --- |
| **${date}** |
| Date |

**The Municipal Agrarian Reform Officer**

DAR Municipal Office

Municipality/City of Sogod

Province of Southern Leyte

Sir/Madame:

Per Notice of Coverage (NOC) of my landholding under the Comprehensive Agrarian Reform Program (CARP) received/published on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, pertaining to the landholding registered in the name of **${firstname} ${middlename} ${familyname}** and embraced by OCT/TCT No. **${octNo}**, and/or Tax Declaration No. **${taxNo}** with Lot No. **${lotNo}** and Approved Survey No. **${surveyNo}**, with an area of **${surveyArea}** hectares, more or less, located at, **${municipality}, ${barangay}** (Municipality,Barangay)

I am submitting herewith the following attached record/documents (check appropriate box):

|  |  |
| --- | --- |
|  | 1. Sketch map of the area of my landholding which I have chosen as my retained area together with the Manifestation to Retain; (CARPER LAD Forms 5 & 6) |
|  | 2. The list of my child/ren who I nominate as preferred beneficiary/ies to be screened under the Department of Agrarian Reform’s (DAR’s) rules and regulations, including the certified copy/ies of NSO birth certificate/s of my preferred beneficiary/ies or two (2) other documents indicating my parental relationship to each of my nominated preferred beneficiary/ies. (CARPER LAD Form No. 7) |

3. The Certification on my Duly attested list of tenants, lessees, and/or regular farmworkers.

(CARPER LAD Form No. 8)

4. Manifestation to Apply/Petition for Exemption/Exclusion Clearance or File Protest on CARP Coverage. (CARPER LAD Form No. 9)

Please acknowledge receipt hereof.

Very truly yours,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature over Printed Name of Landowner)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

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