



REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG PANANALAPI
KAWANIHAN NG INGATANG-YAMAN
(BUREAU OF THE TREASURY)

Attachment 1
Fidelity Bond Application Form
(Revision No. 02 Date: May 30, 2022)

RISK NUMBER

(to be accomplished by BTr Officer)

REQUEST FOR APPLICATION FOR BONDING AND/OR CANCELLATION OF
FIDELITY BOND OF ACCOUNTABLE PUBLIC OFFICER

INSTRUCTIONS:		1. ACCOMPLISH THIS FORM CORRECTLY		3. MARK APPROPRIATE BOXES <input type="checkbox"/> WITH CHECK <input checked="" type="checkbox"/> "✓"	
2. PRINT ENTRIES LEGIBLY IN CAPITAL LETTERS					
TYPE OF APPLICATION:		<input checked="" type="checkbox"/> NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/> CANCELLATION, please proceed to Item Nos. 24-32		OLD RISK NUMBER: For Renewal	
1. NAME		SACLAO ARJAY LINGAT		PASSPORT SIZE ID PHOTO	
		Surname Given Name Name Ext. (e.g., Jr.) Middle Name			
2. ADDRESS		273 PUROK TALDAWA, PALIGUI, APALIT PAMPANGA, PAMPANGA			
3. DATE OF BIRTH (mm/dd/yyyy)		11/03/2000			
4. PLACE OF BIRTH		APALIT. PAMPANGA			
5. SEX		<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		7. CIVIL STATUS	
6. TIN		637183563		<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> WIDOWED	
				<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED	
10. MONTHLY INCOME (Salaries, allowances, business income and the like)		7,500.00		8. CONTACT NUMBER	
				9068648524	
				9. EMAIL ADDRESS	
				adeysaclao@gmail	
11. ESTIMATED MONTHLY EXPENSES		6,000.00			
12. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?					
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
If yes, give details: _____					
13. a. Have you ever been charged of any administrative and/or criminal offense?			b. Have you ever been found guilty of any administrative and/or criminal case before any administrative body, tribunal or court?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
If yes, give details: _____			If yes, give details: _____		
Case No/s: _____			Case No/s: _____		
Date Filed: _____			Date Filed: _____		
Status of Case/s: _____			Status of Case/s: _____		
14. CHARACTER REFERENCE (Individual must not be related up to the fourth degree by consanguinity or affinity to applicant)					
NAME		ADDRESS		CONTACT NUMBER	
HERMINIGILDO ALFONSO AQUINO		PALIGUI, APALIT, PAMPANGA		9695671457	
KENNETH DIZON BAUTISTA		PALIGUI, APALIT, PAMPANGA		9551779297	
EDILBERTO LINGAT DIZON JR.		PALIGUI, APALIT, PAMPANGA		9218869595	
15. I declare that the answer to the foregoing questions are true to the best of my knowledge and belief. I fully understand that any misrepresentation made in this application and supporting documents shall cause the filing of administrative/criminal case(s) against me.					
Government Issued ID		: DRIVERS LICENSE		ARJAY LINGAT SACLAO / 04/07/2024	
ID/License/Passport Number		: C1520003016		Signature over Printed Name /Date Accomplished	
Date/Place of Issue		: 11/03/2019 LTO - SACOP,			
16. SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued Government ID as indicated above.					
Doc. No. _____		Page No. _____		Signature of Officer/Person Administering Oath	
Book No. _____		Series of _____			

17. AMOUNT OF ACCOUNTABILITY <table style="width: 100%; margin-top: 10px;"> <tr> <th style="width: 40%;"></th> <th style="width: 10%; text-align: center;">P</th> <th style="width: 50%; text-align: center;">AMOUNT OF ACCOUNTABILITY</th> </tr> <tr> <td colspan="3">(a) Public Funds</td> </tr> <tr> <td>(1) As Collecting Officer</td> <td style="text-align: center;">P</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(2) As Disbursing Officer</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(3) As Signing Officer</td> <td></td> <td style="text-align: right;">50,317.88</td> </tr> <tr> <td>(4) Investment Officer (GS Investments, Time Deposits, etc.)</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="3">(b) Public Property</td> </tr> <tr> <td>(1) Inventories (per GAAM)</td> <td style="text-align: center;">P</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(2) Property, Plant & Equipment (Net Book Value)</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="3">(c) Forms and other valuables</td> </tr> <tr> <td>(1) Internal Revenue Stamps</td> <td style="text-align: center;">P</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(2) Postage and other Stamped Stock</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(3) Official Receipt</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(4) Others Forms and valuables</td> <td></td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>TOTAL AMOUNT</td> <td style="text-align: center;">P</td> <td style="text-align: right; border-top: 1px solid black; border-bottom: 3px double black;">50,317.88</td> </tr> </table>		P	AMOUNT OF ACCOUNTABILITY	(a) Public Funds			(1) As Collecting Officer	P	0.00	(2) As Disbursing Officer		0.00	(3) As Signing Officer		50,317.88	(4) Investment Officer (GS Investments, Time Deposits, etc.)		0.00	(b) Public Property			(1) Inventories (per GAAM)	P	0.00	(2) Property, Plant & Equipment (Net Book Value)		0.00	(c) Forms and other valuables			(1) Internal Revenue Stamps	P	0.00	(2) Postage and other Stamped Stock		0.00	(3) Official Receipt		0.00	(4) Others Forms and valuables		0.00	TOTAL AMOUNT	P	50,317.88	18. NAME OF OFFICE OR AGENCY PALIGUI, APALIT PAMPANGA, PAMPANGA (LGU-BRGY)
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19. ADDRESS OF OFFICE OR AGENCY APALIT PAMPANGA, PAMPANGA <div style="display: flex; justify-content: space-between; margin-top: 5px;"> Municipality/City Province </div>																																														
20. STATION/DIVISION (Place of assignment) BARANGAY PALIGUI APALIT																																														
21. TITLE OF POSITION OR DESIGNATION SANGGUNIANG KABATAAN (SK) CHAIRMAN																																														
22. DATE OF DESIGNATION OR ASSUMPTION OF ACCOUNTABILITY <div style="display: flex; justify-content: space-around; margin-top: 5px;"> 2023 11 13 </div> <div style="display: flex; justify-content: space-around; font-size: small; margin-top: 5px;"> Year Month Day </div>																																														
23. BOND PERIOD COVERAGE <div style="margin-top: 5px;"> <input checked="" type="checkbox"/> One (1) year <input type="checkbox"/> Two (2) years <input type="checkbox"/> Three (3) years </div>																																														
THIS BLOCK TO BE FILLED ONLY IN CASE OF BOND CANCELLATION																																														
24. OFFICE OR AGENCY AND STATION																																														
25. NAME OF OFFICERS TO BE RELIEVED <div style="display: flex; justify-content: space-between; margin-top: 5px;"> Surname Given Name Middle Name </div>	26. PRESENT POSITION OR DESIGNATION																																													
27. AMOUNT OF BOND	28. RISK NUMBER AND EFFECTIVITY DATE																																													
29. DATE OF RELIEF <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Year Month Day </div>	30. CAUSE OF RELIEF																																													
31. THIS IS TO CERTIFY THAT, as Head of Agency of PALIGUI, APALIT PAMPANGA, PAMPANGA (LGU-BRGY) , I verified the truthfulness of the answers to the questions contained on the face of this form and found them correct insofar as can be ascertained and that the applicant is a safe and conservative risk. Hence, the undersigned is recommending approval and authorizing the request for <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Application for Bonding <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal </div> <input type="checkbox"/> Cancellation of Bond </div> <div style="margin-top: 10px;"> of the above accountable public officer. </div> <div style="text-align: right; margin-top: 20px;"> HERMINIGILDO A. AQUINO, 04/09/2024 AGENCY ADMIN Signature over Printed Name of Head of the Agency/Date Accomplished </div>																																														
THIS BLOCK TO BE FILLED BY BTr ONLY																																														
32. AMOUNT OF BOND RECOMMENDED <div style="text-align: right; margin-top: 10px;">45,000.00</div>	33. AMOUNT OF BOND PREMIUM PAYABLE <div style="text-align: right; margin-top: 10px;">675.00</div>																																													
<div style="margin-top: 10px;"> This is to certify that I have carefully evaluated the request for of Fidelity Bond of the above-mentioned accountable public officer. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input type="checkbox"/> APPLICATION </div> <div style="width: 45%;"> <input type="checkbox"/> RENEWAL <input type="checkbox"/> CANCELLATION </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> Name & Signature of BTr Officer </div> <div style="width: 45%;"> DATE </div> </div> </div>																																														