

BUREAU OF FIRE PROTECTION

Region 1 **Province of Pangasinan** BFP1







ΑP	PLI	CA	TIC	N	NU	MB	ER

FIRE SAFETY EVALUATION CLEARANCE APPLICATION FORM

DDO IECT OWA	JED														
PROJECT OWN															
PROJECT TITL															
PROJECT LOCA	ATION														
OWNER ADDRESS															
	F CONTRACTOR/ AL CONTRACTOR														
AUTHORIZED REPRESENTATIVE															
TOTAL FLOOR AREA (M²):								NO. OF STOREY:							
CONTACT NUMBER :							EN	EMAIL ADDRESS:							
ATTACHED DOCUMENTARY REQUIREMENTS															
[] THREE (3) COMPLETE SETS OF THE FOLLOWING (PROPOSED PLAN): [] ARCHITECTURAL DOCUMENTS															
CRO	FCA	FSEC	FC(be fill						MFM	CF	20	
DATE: DATE:			DATE:	DATE:		BPE DATE:		C,FSES		DATE:		DATE:			
IN OUT		DUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	
PAALALA: "MAHIGPIT NA IPINAGBABAWAL NG PAMUNUAN NG BUREAU OF FIRE PROTECTION SA MGA KAWANI NITO ANG MAGBENTA O MAGREKOMENDA NG ANUMANG BRAND NG FIRE EXTINGUISHER" "FIRE SAFETY IS OUR MAIN CONCERN" FP-QSF-FSED-001 REV.03 (08.02.23)															
RE PRO	B	URE	AU	OF F	RE P	ROTE	CTIC	N							

Region 1 Province of Pangasinan BFP1 Urbiztondo, Pangasinan 📞 (Station Number) 🌐 (Station Email) **CLAIM STUB**



CERTIFIED BY:

CUSTOMER RELATION OFFICER

DATE

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

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