

DATE OF RECEIPT (Form revised as of September 4, 2020)

APPLICATION FORM FOR CERTIFICATE OF ZONING COMPLIANCE

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To be accomplished by APPLICANT				
1. NAME OF OWNER / APPLICANT:	2. NAME OF CORPORATION: (If applicable, if not print "N/A")			
First Name Middle Name Family Name	Complete Name			
Contact Number (s)	Contact Number(s)			
3. ADDRESS OF OWNER / APPLICANT:	4. ADDRESS OF CORPORATION: (If applicable, if not print "N/A")			
O. ADDICESS OF OWNER, ALT LIGARI.	4. ADDICEOS OF CONTONATION. (II applicable, II for plint film)			
No. Road / Street Name Barangay / Province / City / Purok / Sitio Municipality / Town	No. Road / Street Barangay / Province / City / Name Purok / Sitio Municipality / Town			
5. NAME OF AUTHORIZED REPRESENTATIVE:	6. ADDRESS OF AUTHORIZED REPRESENTATIVE:			
First Name Middle Name Family Name	No. Road / Street Barangay / Purok Province / City /			
Contact Number (s)	Name / Sitio Municipality / Town			
7. PROJECT TYPE AND TITLE:	8. PROJECT NATURE:			
THE THOUSAND THEE	□ New Development □ Others (Please specify):			
	☐ Improvement			
9. PROJECT LOCATION:	10. PROJECT AREA (IN SQUARE METERS):			
9. PROJECT LOCATION.	Lot: square meters			
	'			
No. Road / Street Name Barangay / Province / City / Purok / Sitio Municipality / Town	Building: Total Floor Area: square meters			
11. RIGHT OVER LAND: (Please check appropriate box) ☐ Owner ☐ Others: (Please specify)	12. PROJECT TENURE: (Please check appropriate box) □ Permanent			
☐ Others. (Flease specify)	Temporary (Please specify years)			
13. PROJECT COST CAPITALIZATION (in Philippine Peso):				
In Figures (Php 000,000.00)	In Words			
To be accomplished by ZONING INSPECTOR II				
14. EXISTING LAND USES OF PROJECT SITE: (Please check appropriate bo				
□ Residential: □ R-1 □ R-2 □ R-3 □ Institutio	, , , , , , , , , , , , , , , , , , , ,			
□ Commercial: □ C-1 □ C-2 □ Industrial □ Vacant / Idle				
15. LAND USES OF SURROUNDING PROPERTIES FIFTY TO ONE HUNDRED METERS (50M100M.) AS DEEMED APPROPRIATE FROM THE				
LOT BOUNDARY OF PROJECT (Please attach photos of site and surroundi	ing areas)			
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I hereby declare under the penalties of perjury that the above information has and belief is true and correct.	been furnished in good faith, verified by me and to the best of my knowledge			
Owner / Applicant / Authorized Representative (Signature Over Printed Name)	Position / Title			
(digitatore ever i finited Name)				
Republic of the Philippines)				
City of Baguio) S.S.				
SUBSCRIBED AND SWORN TO before me this day of	, 202 at Baguio City, Philippines, affiant exhibited to me			
his/her Community Tax Certificate Noissued at	on, 202			
Doc. No.:				
Page No.:				
Book No.: Series of 20	NOTARY PUBLIC			