

CITY GOVERNMENT OF SAN FERNANDO, PAMPANGA

CITIZEN'S CHARTER

2023 (4th Edition)



This Citizen's Charter 2023 (4th Edition) is approved for posting.

Vilma B. Caluag City Mayor



I. Mandate:

Local government units shall endeavor to be self-reliant and shall continue exercising the powers and discharging the duties and functions currently vested upon them. They shall also discharge the functions and responsibilities of national agencies and offices devolved to them pursuant to this Code. Local government units shall likewise exercise such other powers and discharge such other functions and responsibilities as are necessary, appropriate, or incidental to efficient and effective provision of the basic services and facilities enumerated in Section 17 of the Local Government Code.

II. Vision:

By 2040, The City of San Fernando (P) will be a model city in social development where citizens live in a healthy, safe and sustainable environment with sufficient economic opportunities and rich cultural heritage; with stronger public governance institutions, responsible citizenry and a smart sustainable city.

III. Mission:

We commit to improve the quality of life of Fernandinos, regardless of their gender, age and physical ability, through judicious use of government resources, in partnership with the private sector and the active participation of the citizenry.

IV. Service Pledge:

The City Government of San Fernando, Pampanga is committed to enhance customer satisfaction and public trust by providing quality public service and by promoting transparency and accountability in all levels of the stakeholders, and to ultimately align all its initiatives towards the city's strategic direction.

We strive toward the maintenance and continual upgrading of our services by developing strategies and methods to keep abreast with the new and ever increasing demands and challenges of public service.

To this end, we shall implement and maintain at all levels in the organization the following policies:

- 1. Ensure that all applications shall be effectively and efficiently processed on time.
- 2. Ensure that all requirements and processes shall be clear and transparent to all concerned as documented in the Citizen's Charter.
- 3. Offer services that shall ensure compliance with legal and statutory requirements.
- 4. Constantly review the strategic objectives to ensure their relevance to the establishment and continual improvement of the Citizen's Charter.

All offices involved shall at all times ensure strict adherence to the documented Citizen's Charter.



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Business License and Permit Division

External Services



1. BUSINESS RETIREMENT CERTIFICATE

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Business Retirement Certificate to those who ceased their operations within the territorial jurisdiction of the City of San Fernando, (P).

Office or Division:	Business License and Permit Division (BLPD) located at Ground Floor, Plaza Vidal de Arrozal - Atrium			
Classification:	Simple			
Type of Transaction:	G2B – Government to I	Business Entity		
Who may avail:	Business Entity			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE		
Application For Retirement (2)		Business License and Permit Division - Window 11		
2. Location/Sketc	h (1 original)	Business License and Permit Division - Window 11		
3. Latest Mayor's	Permit (1 original)	Business Owner		
4. For declaration of Gross Sales: - For Non-BIR Registered taxpayers - Affidavit of Gross Sales/Receipts for the latest taxable periods (1 original) - For BIR Registered taxpayers,		-Notarial Services		
any of the following: a. Income Tax Re year (1 photocopy)	turns of the preceding	-Bureau of Internal Revenue		
the preceding year	tage Tax Returns of (1 photocopy) breakdown of sales of	-Bureau of Internal Revenue		
each branch (if consoriginal) - For Non-Operation	solidated ITR) (1 n of Business- Affidavit	-Company Accountant/Manager		
of Non- Operation for taxable period/s (1 of		-Notarial Services		
Other supporting documents: -Affidavit of Business Retirement signed by both partner - for		-Notarial Services		
partnership (1 original) -Board Resolution/Secretary's Certificate for Business Retirement – for corporation		-Company's Corporate Secretary		
(1 photocopy) -Authorization Letter original)	if representative (1	-Business Owner		

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE
1. Accomplish the application form & submit all the necessary documents required at the Business License and Permit Division – Window 11. Wait while the staff prepares	1. Receive, evaluate and verify the application form and documentary requirements. 1.1 Issue Inspection Stub	None	2 minutes	Receiving Clerks/ Licensing Officer II (Business License and Permit Division)
the Inspection Stub. Return on date indicated in the stub.	1.2 Endorse the documents to Inspector for inspection	None	1 day upon receipt	License Inspector (Business License and Permit Division)
	1.3 Update all necessary information needed for the computation of taxes on the e-BPLS, print the assessment slip. Approve assessment.	Refer to 2017 Revised Revenue Code & Market Code of the CSFP *Copy of the Revenue Code at BLPD Windows 11 and 14	2 minutes	Assessment Clerks/ Assessment Officer/ BLPD Chief (Business License and Permit Division)
2. Give the Inspection Stub to BLPD staff at the Business License and Permit Division – Windows 15 or 16	2. Release the Assessment Slip to the client	None	2 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)

3. Pay the corresponding taxes & fees at the City Treasurer's Office – Window 8 and receive the Official Receipt.	3. Collect the correct amount of money as payment for the issuance of Business Retirement Certificate.	None	3 minutes	Local Revenue Collection Officer III (City Treasurer's Office)
4. Wait while the BLPD staff prepares the Business Retirement Certificate	4. Print, approve and segregate the Certification	None	3 minutes	Releasing Clerks/ Licensing Officer II/ BLPD Chief (Business License and Permit Division)
5. Claim the Business Retirement Certificate at the Business License and Permit Division. – Windows 15 or 16	5.Release the Certification	None	2 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)
	TOTAL:	None	1 day and 14 minutes	

Note: If based on the inspection conducted, the business still operates, the processing for the retirement will be suspended and the taxpayer will be required to either renew his/her permit or cease its operation.



2. CERTIFICATE OF NO BUSINESS

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Certificate of No Business to affirm the validity of business record/information of an individual.

Office or Division:	Business License and Permit Division (BLPD) located at Ground Floor, Plaza Vidal de Arrozal-Atrium					
Classification:	Simple					
Type of	G2C – Government to Citizen					
Transaction:						
Who may avail:	CSFP Residents	5				
CHECKLIST OF REC	QUIREMENTS	W	HERE TO SECU	RE		
1. Certificate of No E	Business					
from the Barangay	y Hall (1	-Barangay Hall				
original for presen	•					
photocopy)						
2. Authorization Lette	er and ID of	-Owner of the C	Certification/Repre	esentative		
the owner (if repre						
original for presen	, ,					
photocopy)	itation and i					
рпососору)	AGENCY	FEES TO BE	PROCESSING	PERSON		
CLIENT STEPS	ACTIONS	PAID	TIME	RESPONSIBLE		
1.Submit the	1. Receive,	IAID	111111	REOF OROIDEE		
Certificate of No	check and					
Business at the	verify the			Releasing Clerks/		
Business License	document.			Licensing Officer II		
and Permit	1.1 Inform	None	5 minutes	(Business License		
Division –	the client to			and Permit Division)		
Windows 15 or 16	pay at the City					
	Treasurer's					
	Office	- · · · · · · · · · · · · · · · · · · ·				
2. Pay the	2. Collect the	Refer to 2017				
corresponding fees	correct amount	Revised				
at the City Treasurer's Office	of money as	Revenue Code &				
– Window 9 and	11 7					
– Window 9 and the Certificate.receive the Official		Market Code of the CSFP		Local Revenue		
Receipt	2.1 Print the	*Copy of the	5 minutes	Collection Officer		
	Official	Revenue		(City Treasurer's		
	Receipt	Code at		Office)		
	,	BLPD				
		Windows 11				
		and 14				

3. Give the Official Receipt to BLPD staff at Windows 15 or 16 and wait while the staff prepares the Certification	3. Encode, print, approve and segregate the Certificate	None	10 minutes	Releasing Clerks/ Licensing Officer II / BLPD Chief (Business License and Permit Division)
4.Claim the Certification of No Business at the Business License and Permit Division – Windows 15 or 16	4. Release the Certificate of No Business	None	5 minutes	Releasing Clerks Licensing Officer II (Business License and Permit Division)
	TOTAL:	None	25 minutes	



3. MAYOR'S PERMIT FOR BUSINESS (NEW BUSINESS)

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Mayor's / Business Permit for regulating the operation of businesses within the territorial jurisdiction of the City of San Fernando, (P). Any person doing business with the City of San Fernando, (P) can avail of this service.

Office or Division: Business License and Permit Division (BLPD) located at Ground				
Office of Division.	Floor, Plaza Vidal de	` ,		
Classification:	Simple			
Type of Transaction:		Business		
Who may avail:	Businessmen	, <u>Daomicoo</u>		
CHECKLIST OF R		WHERE TO SECURE		
1. Business Application		Business License and Permit Division – Window 11		
2. Location/Sketch (1 o	riginal)	Business License and Permit Division – Window 11		
3. Barangay Business (Clearance	Business License and Permit Division		
4. DTI/SEC/CDA/ DHSUD – for business name registration (1 original copy for presentation and 1 photocopy for Business License and Permit Division)		Department of Trade and Industry Office/ Securities and Exchange Commission Office/ Cooperative Development Authority Office/ Department of Human Settlements and Urbar Development		
5. Community Tax Cert	ificate	Business License and Permit Division		
6. Tax Declaration (1 pl	notocopy)	City Assessor's Office – Window 18		
Any of the following applicable forms of ownership of lot (1 photocopy): -Owner's Duplicate Copy (TCT); -Lease proposal -Contract of Lease duly notarized; -Certificate of Lease duly notarized; -Deed of Absolute Sale duly notarized; -Authorization Letter (notarized) and/ or		-Owner of the property -Lessor of the property -Notarial Services -Owner or Lessor of the property		
Notice of Award; -LHSD Certification if within Northville Subdivision; -NHA Certification if within San Fernando Heights, Bulaon Resettlement, San Fernando Ville (former AFP-PNP-Ville); -Deed of Donation and/ or Special Power of Attorney duly notarized;		-Local Housing Settlement Division -Notarial Services/Person being represented		

Contract to Call dub materias du and	N
-Contract to Sell duly notarized; and -	-Notarial Services
Sworn Statement as Heir of the property	-Notarial Services
-Photocopy of Certificate of Occupancy/ Use	
(except for kiosks, carts, ambulant vendors,	Desired a Common of the City Deliblica
public market stalls, security and janitorial	Business Owner or Office of the City Building
services deployed in commercial	Official
establishments/ malls, construction with total	
cost of PHP 15,000 and below)	
-Sanitary Permit, Environmental Management	The following requirements are to be
Permit, Zoning Certificate, Fire Safety	facilitated by the Business License and
Inspection Certificate, and Clearances from	Permit Division
OCBO and Barangay	
Other supporting documents:	Natarial Caminas
-Affidavit/Undertaking on Non-Operations of	-Notarial Services
Games – for internet (1 original)	Congress (DACCOD) (Congress) in a
-Grant of Authorities from Congress/	-Congress/PAGCOR/Sangguniang
PAGCOR/ Sangguniang Panlungsod	Panlungsod
Franchise – for amusement entities (1	
photocopy)	CCTV System Installar/ Pusings Owner
- Compliance to Ordinance No. 2018-029 or	-CCTV System Installer/ Business Owner
"The 2018 CCTV System Ordinance of the City	
of San Fernando, Pampanga	
-CCTV System Certification	
-Letter of Undertaking to Comply to CCTV	
Ordinance	
- Homeowner's Clearance/Certification – (if	
within approved residential subdivision) /	-Homeowner's Association; Neighborhood;
Neighborhood's Consent nearby, minimum of 4	Developer
periphery units (if no homeowner's	
association)/ Developer's Consent (for newly	
developed subdivision) - 1photocopy (original	
for presentation)	
-CMOD Clearance- if within the	O't Madad O continue Di inica
new/old public markets (CMOD	-City Market Operations Division
Stamped)	
-License to work for entertainers/models &	
results of the Cervical Urethral Smear	
- for night clubs/entertainment	-Rural Health Unit II (Barangay
establishments (1 original for	Health Center-Sindalan)
presentation 1 photocopy)	Induiti Contor Ciridalari)
-Certificate of Certified Water Operator	
Course/Letter of Commitment, Sanitary Plan,	
Physical/Chemical Test (Every 6 months raw	-Sanitary Engineer/ Water Laboratory
and product), Sanitary Engineer's Report,	, , ,
Microbiological Test	

Total Coliform, E. Coli & Heterotrophic Plate Count – product every month; raw every six months; -Initial/Operational Permit/Clearance from CHD-3 (DOH)/ Barangay Resolution of No Objection - for memorial park, Cemetery or private burial ground (1 original for presentation and 1 photocopy) -Feasibility study reviewed & approved by the Secretary of Health or his duly authorized representative – for crematorium (1 original for presentation and 1 photocopy) -Design of Water Treatment Plant Facilities for industrial establishments Barangay Resolution of No Objection for poultry & piggery (1 original for presentation and 1 photocopy) -NRL Certificate of proficiency – last 5 years: Picture of Physical Location of the Laboratory; PRC License to Operate; DOH Certificate of Accreditation; NRL Licensure Exam for water Sampler; DENR Environment Clearance- for water laboratory(1 original for presentation and 1 photocopy)

-Department of Health

- Department of Health

-Water Laboratory

-Barangay Hall

-Department of Health/ Professional Regulation Commission/ Department of Environment and Natural Resources Office

NOTE: For <u>Shared Passive Telecommunication Tower Infrastructure (PTTIs)</u>, the requirement is only the filled-out Application Form for Business.

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Accomplish the application form & submit all the necessary documents required at the Business License and Permit Division – Window 11.	1. Receive, evaluate and verify the application form and documentary requirements. 1.1 Endorse the documents to City Planning and Development Coordinator's Office	None	None	Receiving Clerks/ Licensing Officer II (Business License and Permit Division)
2. Wait while the BLPD staff prepares the Inspection Stub. Return on the date indicated in the stub.	2. Prepare the Inspection Stub and give to the client	None	30 minutes	Receiving Clerks/ Licensing Officer II (Business License and Permit Division)

	1	l	 	
	2.1.Endorse the documents to Inspector for inspection (JIT Inspection) 2.2 After inspection, endorse the documents to the Assessment Section for assessment.	None	1 day upon receipt of application	License Inspector (Business License and Permit Division) Inspectors from Regulatory Offices, (City Health Office, City Environment and Natural Resources Office, Office of the City Building
	2.3 Encode all necessary information needed for the computation of taxes on the e-BPLS, print the assessment slip.	Refer to 2017 Revised Revenue Code & Market Code of the CSFP	1 hour and 25	the City Building Official) Assessment Clerks/ Assessment Officer/ BLPD Chief (Business License and Permit Division)
	2.4. Endorse the documents to the regulatory offices for encoding.2.5 Approve assessment slip.	*Copy of the Revenue Code at BLPD Windows 11 and 14	minutes	Clerk FSEU/ Clerks from Regulatory Offices (City Health Office, City Environment and Natural Resources Office, Office of the City Building Official)
3. Give the Inspection Stub at the City Treasurer's Office –Windows 8 or 9	3. Give the Assessment Slip to the Client.	None	2 minutes	Local Revenue Collection Officer (City Treasurer's Office)
4. Pay the corresponding taxes & fees at the City Treasurer's Office – Windows 6 or 10 and receive the Official Receipt and	4. Collect the correct amount of money as payment for the issuance of Mayor's Permit.4.1. Print the Official Receipt & claim stub.	None	28 minutes	Local Revenue/ Collection Officer (City Treasurer's Office)

Claim stub. Return on the date indicated in the stub.	4.2 Approve Mayor's Permit.	None	Within 4 hours	City Administrator/ Administrative Assistant (City Administrator's Office) and City Mayor/ Executive Assistant IV/- Admin. Officer II (City Mayor's Office)
	4.3 Print Barangay Business Clearance and Mayor's Permit	None	12 minutes	Administrative Aide/ Licensing Officer II (Business License and Permit Division)
5. Claim the Mayor's Permit at the Business License and Permit Division – Windows 15 or 16.	5. Receive the claim stub and Release the Mayor's Permit	None	6 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)
	TOTAL:	None	1 day, 6 hours & 43 minutes	

Note: (1) If upon ocular inspection the business has a violation, a Notice of Denial duly approved by the Head of Office or Authorized personnel will be issued to the client and it will not proceed to next step –Assessment until compliant.

- (2) Applications with amendments or changes follow the steps for new application
- (3) For client who avail the courier service, up to step 4 only. Wait for the permit to be delivered by the partner courier to your business address. (New and Renewal)
- (4) Approval of Mayor's Permit is thru the system (e- BPLS) after payment. (New and Renewal)
- (5) Releasing of Mayor's Permit may take longer during peak season (at least 3 days) (New and Renewal)
 - (6) No FSIC, no release of permits
- (7) For <u>Shared Passive Telecommunication Tower Infrastructure (PTTIs)</u>, the only requirement is the filled-out Application Form for Business



4. MAYOR'S PERMIT FOR BUSINESS (RENEWAL)

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Mayor's / Business Permit for regulating the operation of businesses within the territorial jurisdiction of the City of San Fernando, (P). Any person doing business with the City of San Fernando, (P) can avail of this service.

Office or Division: Business License and Permit Division (BLPD) located at				
Office of Division.	Ground Floor, Plaza Vidal de Arrozal-Atrium			
Classification:	Simple			
	'			
Type of Transaction:	G2B – Government to Business			
Who may avail:	Businessmen	W//===================================		
CHECKLIST OF REQUIRE		WHERE TO SECURE		
Business Application For	rm (2 original)	Business License and Permit Division – Window 11		
2.Barangay Business Clea	rance	Business License and Permit Division		
3.Community Tax Certificate		Business License and Permit Division		
4.For declaration of Gross	Sales:			
- For Non-BIR Registered t	axpavers, indicate the			
Gross Sales/Receipts on the Application Form				
- For BIR Registered taxpayers, any of the				
following:		D (1)		
a. Income Tax Returns of the preceding year		-Bureau of Internal Revenue		
(1 photocopy)				
b. VAT or Percentage Tax Returns of the preceding year (1 photocopy)c. Affidavit of Gross Sales/ Receipts/		-Bureau of Internal Revenue		
Notarized Certification of breakdown of sales of each branch (if consolidated ITR) (1original)		-Notarial Services/Company Accountant/Manager		
 -For Non-Operation of Business- Affidavit of Non-Operation for the latest taxable period/s (1 original) - For Banks- Notarized Joint Statement of 		-Notarial Services		
Annual Income (signed by a designated Officer of the Head Office and by the Branch Manager) (1original)		-Company Head Office and Branch Manager		

Other supporting documents: -PCAB Contractor's License – for contractor, sub-contractors, specialty contractors engaging in the construction		-Department of Trade and Industry		
agency (if new business on previous year) (1 photocopy) -BSP Proof of Registration (received application form at the BSP or Certificate of Registration) – for pawnshops, foreign exchange dealers, money changers & remittance agents (if new business on		-Bangko Sentral ng Pilipinas		
previous year) (1 photocopy) -Grant of Authorities from Congress/ PAGCOR/ Sangguniang Panlungsod Franchise – for amusement entities If existing grant is already expired (1		-Congress/PAGCOR/Sangguniang Panlungsod		
photocopy) -Physical/Chemical Test (every six months raw and product) & Microbiological Test Total Coliform, E. Coli & Heterotrophic Plate Count (product every month; raw every six months) – for water refilling station -Tax Declaration- for lessor of commercial		- Water Laboratory -City Assessor's Office – Window 18		
buildings (1 photocopy- BFP) Fire Safety Inspection Certificate		Business Owner/ Bureau of Fire Protection		
Sanitary Permit, Environmental Management Permit, and Clearances from OCBO and Barangay		The following requirements are to be facilitated by the Business License and Permit Division		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Accomplish the application form & submit all the necessary documents required at the Business License and Permit Division – Window 11	1. Receive, evaluate, and verify the application if not included in the "negative list".	None	40 minutes	Receiving Clerks / Licensing Officer II (Business License and Permit Division)

*If the application is included in the "negative list", applicant will be endorsed to the concerned regulatory office/offices for compliance prior to assessment. Negative list-are the list of non- compliant business establishments 2.Wait while the assessment clerk computes for the tax due at the Business License and Permit Division — Windows 12-14	2. Retrieve the taxpayer information from the e-BPLS, renew and update all the pertinent information necessary in assessment. 2.1 Print the assessme nt slip. 2.2 Approve Assessment slip.	Refer to 2017 Revised Revenue Code & Market Code of the CSFP *Copy of the Revenu e Code at BLPD Windows 11 and 14		Assessment Clerks/ Assessment Officer/ BLPD Chief (Business License and Permit Division)
3.Pay the corresponding taxes & fees at the City Treasurer's Office and receive the Official Receipt and Claim stub	3. Collect the correct amount of money as payment for the issuance of Mayor's Permit. Print the Official Receipt & claim stub	None	30 minutes	Local Revenue Collection Officer (City Treasurer's Office)

	3.1Approve Mayor's Permit.	None	4 hours	City Administrator/ Administrative Assistant (City Administrator's Office) and City Mayor/ Executive Assistant IV/ Admin. Officer II (City Mayor's Office)
	3.2Print of Sanitary Permit	None	2 minutes	Administrative Aide/ CHO Personnel (Business License and Permit Division)
	3.3 Print Mayor's Permit and Barangay Business Clearance	None	12 minutes	Administrative Aide/ Licensing Officer II (Business License and Permit Division)
4.Claim the Mayor's Permit on the date indicated in the claim stub at the Business License and Permit Division	4.Receive the claim stub and Release the Mayor's Permit	None	6 minutes	Releasing Clerks Licensing Officer II / BLPD Chief (Business License and Permit Division)
	TOTAL:	None	5 hours and 30 minutes	



5. MAYOR'S PERMIT FOR BUSINESS (SPECIAL PERMIT)

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Special Permits to those who promote/advertise their business within the territorial jurisdiction of the City of San Fernando, (P).

Office or Division:	Business License and Permit Division (BLPD) located at Ground			
	Floor, Plaza Vidal de Arrozal-Atrium			
Classification:	Simple			
Type of Transaction:	G2C / G2B / G2G			
Who may avail:	All			
CHECKLIST OF REQU	CHECKLIST OF REQUIREMENTS WHERE T			CURE
Request Letter (1 original for presentation and 1 photocopy)		-Requesting client		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit the request letter at the Business License and Permit Division – Windows 12-14	1. Receive, check and verify the request	None	5minutes	Administrative Assistant/ Assessment Officer (Business License and Permit Division)
2. Wait while the assessment clerk computes for the fee due at the Business License and Permit Division - Windows 12-14	2. Prepare the Order of Payment approved by the BLPD Chief. 2.1 Issue Order of Payment	Refer to 2017 Revised Revenue Code & Market Code of the CSFP *Copy of the Revenue Code at BLPD Windows 11 and 14	5 minutes	Assessment Clerks/ Assessment Officer/ BLPD Chief (Business License and Permit Division)
3. Pay the corresponding fees at the City Treasurer's Office	3. Collect the correct amount of money as	None	5 minutes	Collection Clerk (City Treasurer's Office)

– Window 4 and receive the Official Receipt	payment for the issuance of Mayor's Permit - Special Permit. 3.1 Print the Official Receipt.			
4. Give the Official Receipt to BLPD Windows 12-14 and wait while the staff prepare the Permit	4. Encode, print, approve and segregate the Mayor's Permit - Special Permit	None	15 minutes	Assessment Clerks Assessment Officer/ BLPD Chief (Business License and Permit Division) City Administrator / Admin. Assistant (City Administrator's Office)
5.Claim the Special Permit at the Business License and Permit Division	5. Release the Mayor's Permit - Special Permit	None	5 minutes	Assessment Clerks (Business License and Permit Division)
TOTAL:		None	35 minutes	



6. PERMIT TO OPERATE (TEMPORARY PERMIT)

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Permit to Operate (*Temporary Permit*) to ambulant vendors, seasonal businesses and short-term businesses like contractors and mall exhibitors in the City of San Fernando, (P).

Office or Division:	Business License and Permit Division (BLPD) located at Ground			
	Floor, Plaza Vidal de	Arrozal-Atrium		
Classification:	Simple			
Type of Transaction:	G2B – Government t	o Business		
Who may avail:	Businessmen			
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE		
1. Business Application	Form (1 original)	Business License and Permit Division -		
		Window 11		
2. Location/Sketch (1 or	riginal)	Business License and Permit Division - Window 11		
3. Barangay Business		Business License and Permit Division		
4. DTI/SEC/CDA/DHSU name registration (1 presentation and 1 p Business License an	original copy for shotocopy for	Department of Trade and Industry Office/ Securities and Exchange Commission Office/ Cooperative Development Authority Office/ Department of Human Settlements and Urban Development Office		
5.Community Tax Certific	cate	Business License and Permit Division		
Other supporting documents: -Affidavit/Undertaking on Non-Operations of Games – for internet (1 original)		-Notarial Services		
-Grant of Authorities PAGCOR/ Sanggun Franchise – for amus (1 photocopy)	iang Panlungsod	-Congress/PAGCOR/Sangguniang Panlungsod		

- Compliance to Ordinance No. 2018-029 or	
"The 2018 CCTV System Ordinance of the	
City of San Fernando, Pampanga	-CCTV System Installer/ Business Owner
- Homeowner's Clearance/Certification – (if	
within approved residential subdivision) /	
Neighborhood's Consent nearby, minimum of	
4 periphery units (if no homeowner's	
association)/ Developer's Consent (for newly	
developed subdivision) - 1photocopy	
(original for presentation)	
-Health Card ID – for food establishments (1	-City Health Office – 1 st Floor (Main)

- original for presentation and 1 photocopy) -Contract Agreement – for contractors (1 photocopy) -Notice of Award/ Contract of Lease – for -Contractor short-term business (3 months and below) 1 original for presentation and 1 photocopy) -Owner of the Property -Neighborhood's Consent /Homeowner's Clearance/Certification- if within residential approved subdivision (1 photocopy) -Homeowner's -CMOD Clearance- if within the new/old public markets (CMOD Stamped) -City Market Operations Division -Photocopy of Certificate of Occupancy/ Use (except for kiosks, carts, ambulant vendors, -Office of the City Building Official public market stalls, security and janitorial services deployed in commercial establishments/ malls, construction with total cost of PHP 15,000 and below) -License to work for entertainers/models & -Business Owner/ Office of the City Building results of the Cervical Urethral Smear Official for night clubs/entertainment establishments (1 original for presentation 1 photocopy) -Rural Health Unit II (Barangay Health -Certificate of Certified Water Operator Center- Sindalan) Course/Letter of Commitment, Sanitary Plan, Physical/Chemical Test, Sanitary Engineer's Report, Microbiological Test Total Coliform, -Sanitary Engineer/ Water Laboratory E. Coli & Heterotrophic Plate Count – for water refilling station (1 original for presentation) -Initial/Operational Permit/Clearance from CHD-3 (DOH)/ Barangay Resolution of No Objection - for memorial park, Cemetery or -Department of Health private burial ground (1 original for presentation and 1 photocopy) -Feasibility study reviewed & approved by the Secretary of Health or his duly authorized representative – for crematorium (1 original for - Department of Health presentation and 1 photocopy) -Design of Water Treatment Plant Facilities for industrial establishments -Barangay Resolution of No Objection - for
 - -Department of Health/ Professional Regulation Commission/ Department of Environment and Natural Resources Office

-Water Laboratory

-Barangay Hall

poultry & piggery (1 original for presentation

-NRL Certificate of proficiency – last 5 years;

Sampler: DENR Environment Clearance- for

water laboratory(1 original for presentation

Picture of Physical Location of the Laboratory; PRC License to Operate; DOH Certificate of Accreditation; NRL Licensure Exam for water

and 1 photocopy)

and 1 photocopy)

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Accomplish the application form & submit all the necessary documents required at the Business License and Permit Division – Window 11.	Receive, evaluate and verify the application form and documentary requirements.	None	30 minutes	Receiving Clerks / Licensing Officer II (Business License and Permit Division)
2. Wait while the BLPD staff prepares the Inspection Stub. Return on the date indicated in the stub.	2. Prepare the Inspection Stub and give to the client	None		Receiving Clerks / Licensing Officer II (Business License and Permit Division)
	2.1 Endorse the documents to Inspector for inspection			License Inspector (Business License and Permit Division)
	2.2 After inspection, endorse the documents to the assessment section for assessment.	None	1 day upon receipt of applicatio n	Inspectors from Regulatory Offices (Bureau of Fire Protection, City Health Office, City Environment and Natural Resources Office, Office of the City Building Official)
	2.3 Assess the Permit to Operate 2.4. Endorse the documents to the regulatory offices for encoding. (If applicable) 2.5 Approve assessment slip.	Refer to 2017 Revised Revenue Code & Market Code of the CSFP *Copy of the Revenue Code at BLPD Windows 11 and 14	40 minutes	Assessment Clerks Assessment Officer/ BLPD Chief (Business License and Permit Division) Clerks from Regulatory Offices (if applicable) (Bureau of Fire Protection, City Health Office, City Environment and Natural Resources Office, Office of the City Building Official)

	<u></u>		_	
3. Give the Inspection Stub and wait for the assessment slip at the Business License and Permit Division –Window 15 or 16	3 Give the Assessment Slip to the Client.	None	30 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)
4. Pay the corresponding taxes & fees at the City Treasurer's Office – Windows 8 or 9 and receive the Official Receipt and Claim stub. Return on the date indicated in the stub.	4 Collect the correct amount of money as payment for the issuance of Mayor's Permit. 4.1. Print the Official Receipt & claim stub.	None		Local Revenue Collection Officer (City Treasurer's Office)
5. Give the Official Receipt to BLPD Windows 15 or 16 and wait for the Permit to Operate.	5 Prepare the Permit to Operate, approved by BLPD Chief. Print the Barangay Business Clearance. Then endorse it to the City Administrator's Office for signature.	None	15 minutes	Releasing Clerks/ Administrative Aide/ Licensing Officer II / BLPD Chief (Business License and Permit Division) City Administrator/ Administrative Assistant (City Administrator' s Office)
6. Claim Permit to Operate	6 Release the Permit to Operate.	None	5 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)
	TOTAL:	None	1 day and 2 hours	

Note: (1) Permit to Operate (Temporary Permit) is issued only to applicants with no proof of ownership of the lot/property to present which will be verified at the City Assessor's Office. (2) Permit to operate (Temporary Permit) is issued to ambulant vendors, seasonal businesses and short-term businesses like contractors and mall exhibits (Steps 1, 4, 5 and 6 will apply). (3) No FSIC, no release of permits



7. OTHER BUSINESS CERTIFICATIONS

The Business License and Permit Division under the City Administrator's Office is directly responsible for the issuance of Certifications to affirm the validity of business record/information of an individual.

Office or Division:	Business License and Permit Division (BLPD) located at Ground				
	Floor, Plaza Vidal de Arrozal-Atrium				
Classification:	Simple	Simple			
Type of Transaction:	G2C / G2B / G2G				
Who may avail:	All				
CHECKLIST OF REQU	JIREMENTS		WHERE TO SE	CURE	
1. Request Letter (1 Or	iginal or 1	Requesting	client		
photocopy)		Requesting	Client		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Submit the	ACTIONS	BLFAID	IIIVIL	KLOFONOIDEL	
request letter at the Business License and Permit Division – Windows 15 or 16	Receive, check and verify the request	None	5 minutes	Releasing Clerks Licensing Officer II (Business License and Permit Division)	
2. Wait while the staff prepares the certificate at the Business License and Permit Division – Windows 15 or 16	2. Encode, print, segregate and approve the Certification	None	10 minutes	Releasing Clerks/ Licensing Officer II/ BLPD Chief (Business License and Permit Division)	
3.Claim the Certification at the Business License and Permit Division Windows 15 or 16	3. Release the Certification	None	5 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)	
	TOTAL:	None	20 minutes		

Note: For Authorized Representative – bring Authorization letter and photocopy of I.D of the owner or Board Resolution/Secretary's Certificate for Corporation.



8. CERTIFIED TRUE COPY

The Business License and Permit Division under the City Administrator's Office is directly responsible for the Certified True Copy to affirm the authenticity of the business record/information of an individual.

Office or Division:	Business License and Permit Division (BLPD) located at Ground					
Classification		Floor, Plaza Vidal de Arrozal-Atrium				
Classification:	_	Simple				
Type of Transaction:	G2C / G2B / G2G					
Who may avail:	All	10/	LIEDE TO CE			
CHECKLIST OF R		VV	HERE TO SEC	JUKE		
Mayor's Permit (1 O photocopy)		Requesting clien				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE		
1.Submit the Mayor's Permit at the Business License and Permit Division – Windows 15 or 16	Receive, check and verify the Mayor's Permit	None	5 minutes	Releasing Clerks Licensing Officer II (Business License and Permit Division)		
2. Pay the corresponding taxes & fees at the City Treasurer's Office – Windows 8 or 9 and receive the Official Receipt	1. Collect the correct amount of money as payment for the Certified True Copy & Print the Official Receipt	Refer to 2017 Revised Revenue Code & Market Code of the CSFP *Copy of the Revenue Code at BLPD Windows 11 and 14	3 minutes	Local Revenue Collection Officer (City Treasurer's Office)		
3. Wait while the staff prepares the Certified True Copy - Business License and Permit Division – Windows 15 or 16	3. Stamp the Mayor's Permit with "Certified True Copy"	None	5 minutes	Releasing Clerks/ Licensing Officer II/ BLPD Chief (Business License and Permit Division)		
3.Claim the Certified True Copy at the Business License and Permit Division Windows 15 or 16	3. Release the Certified Mayor's Permit	None	2 minutes	Releasing Clerks/ Licensing Officer II (Business License and Permit Division)		
	TOTAL:	None	15 minutes			



City Treasurer's Office

External Services



1. PAYMENT OF ASSESSOR'S ANNOTATION AND CERTIFICATION FEE

The City Treasurer's Office maintains a tax information system where each taxpayer has a record. Tax clearance or certification based on the taxpayer's record is issued upon request of the taxpayer. Any person/individual and/or juridical entity that has a real property unit such as land, building and machinery and establishes, operates, conducts or maintains a business within the City can avail of this service.

044	Lo:: -				
Office or Division:	City Treasurer's C	City Treasurer's Office-License and Permit Division			
Classification:	Simple				
Type of Transaction:	G2C / G2B / G2G				
Who may avail:	All				
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	ECURE	
Order of Payment		Window	30 & 31		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Submit order payment	1. Receive, review and verify the order of payment	None	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)	
2. Pay the corresponding fees and receive the Official Receipt	2. Accept the correct amount of money, print and issue the official receipt.	PHP 50.00/ page	5 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)	
TOTAL:		PHP 50.00/ page	7 minutes		

Note: (1) There shall be corresponding amount from every person requesting annotation of certain documents, certified true copy of Tax Declaration and other certifications from the City Assessor's Office, the following fees on a per page basis:

a) Certified True Copy of Tax Declaration	P50.00
b.) Owner's Copy of Tax Declaration	25.00
c.) Property Holdings	50.00/page
d.) No Property	50.00
e.) Certificate of No Improvement (CNI)	50.00
f.) Tax Map (Blue/while print)	100.00/sheet
	plus P50.00 if certified (reproduction of which will be on the account of the requester)
g.) Tax Map (Computer Generated)	150.00/sheet
	Plus P50.00 if certified
h.) Annotation	50.00/document
i.) Other Certifications	50.00/document
j.) Verification	10.00/rpu (positive or negative result)
k.) Reclassification Fee	500.00/has/RPU, if the property is less than a hectare, assessment of fee will be a fraction thereof but should not be less than P50.00
I.) Cancellation Fee	300.00/RPU
m.) Inspection Fee (if within reglementary period)	200.00/visit/RPU
n.) Inspection Fee (if beyond reglementary period)	300.00/visit/RPU
o.) Declaration Fee	50.00

2. PAYMENT OF BUSINESS TAX

The City Treasurer's Office under the License and Permit Division is directly responsible for the real business tax payments operating within the territorial jurisdiction of the City of San Fernando, (P).

Office or Division: City Treasurer's Office-License and Permit Division						
Classification:		Simple				
Type of Transaction:	•	G2B – Government to Business Entity				
Who may avail:	Businessmen					
CHECKLIST OF R	EQUIREMENTS	W	HERE TO SE	CURE		
1. Business Assessmen	ıt Slip	Business Lice	nse and Perm	it Division (BLPD)		
2. Community Tax Certi	ficate	City Treasurer	's Office – Wi	ndows 5 and 6 /		
(for presentation upon p	ayment, original or	Barangay Hall		naowo o ana o i		
photocopy)		3 7				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE		
Submit approved assessment slip and all the necessary documents required	Receive, evaluate, and verify approved assessment slip	None	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)		
2.Wait while the collecting officers encodes the business control number	2. Retrieve the taxpayer information from the BCS	Refer to 2017 Revised Revenue Code & Market Code of the CSFP	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)		
3.Pay the corresponding taxes & fees and receive the Official Receipt and Claim stub	3. Accept the correct amount of money as payment for the issuance of Mayor's Permit. Print the Official Receipt & claim stub	None	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)		
TOTAL:		Refer to 2017 Revised Revenue Code & Market Code of the CSFP	5 minutes	,		



3. PAYMENT OF LOCAL CIVIL REGISTRY

The City Treasurer's Office maintains a tax information system where the taxpayer upon verification has recorded marriage, birth, death and other related documents issued upon request of the taxpayer.

Office or Division:	City Treasurer's Office-License and Permit Division			
Classification:	Simple			
Type of Transaction:	G2C / G2B / G2G			
Who may avail:	All			
CHECKLIST OF REQU	IREMENTS		WHERE TO SE	CURE
1 .Order of Payment	t	Window 42		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit order payment, violation ticket, assessment slip	1.Receive, review and verify the order of payment	None	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
2. Pay the corresponding fees and receive the Official Receipt	2. Accept the correct amount of money, print and issue the official receipt.	PHP 50.00/ page	5 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
	TOTAL:	PHP 50.00/ page	7 minutes	



4. PAYMENT OF OTHER BUSINESS CERTIFICATIONS

The City Treasurer's Office maintains a tax information system where each taxpayer has a record of his/her historical payments of taxes due to the City. Business clearance or certification based on the taxpayer's record is issued upon request of the taxpayer.

Office or Division: City Treasurer's Office-License and Permit Division					
		City Treasurer's Office-License and Permit Division			
Classification:		Simple			
Type of Transaction:	G2C / G2B / G2G				
Who may avail:	All				
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	CURE	
 Order of Payment 		Window	6 to 10		
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON	
OLILINI OILI O	ACTIONS	BE PAID	TIME	RESPONSIBLE	
1.Submit order payment	1. Receive, review and verify the order of payment	None	1 minute	Administrative Aide/Local Revenue Collection Officer(License and Permit Division)	
2. Pay the corresponding fees and receive the Official Receipt	2. Accept the correct amount of money, print and issue the official receipt	PHP 50.00/ page	2 minutes	Administrative Aide/Local Revenue Collection Officer(License and Permit Division)	
TOTAL:		PHP 50.00/ page	3 minutes		

Note: (1) Certificate of No Tax Liability

 a. Proof of exemption, such as tax declaration for exempt real properties, SEC registration and/or certification from accredited agencies;

Note: (2) Certificate of Full Payment

- b. Proof of payment or official receipt, if available; Note: (3) Certificate of Business Tax Exemption
- c. Proof of exemption, Board of Investment (BOI) Certificate, SEC registration and/or certification from accredited agencies;

Note: (4) Certificate of Business Tax Payments

- d. Proof of payment or official receipt, if available.
- e. No Business.
- 100. Brgy clearance w/no reg. business.



5. PAYMENT OF OTHER MISCELLANEOUS FEES

The City Treasurer's Office under the License and Permit Division is directly responsible for the collections of all other miscellaneous fees.

O(C) D: : :	O'' T 1 0	.cc. 1 ;	1.D. 11.D. 11.	
Office or Division:	City Treasurer's Office-License and Permit Division			
Classification:	Simple			
Type of Transaction:	G2C / G2B / G2G			
Who may avail:	All	1		
CHECKLIST OF REQU			WHERE TO SE	
Order of Payment			office concerned	/ BLPD
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit order payment	1.Receive, review and verify the order of payment	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
2. Pay the corresponding fees and receive the Official Receipt	2. Accept the correct amount of money, print and issue the official receipt.	Refer to 2017 Revised Revenue Code & Market Code of the CSFP	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
	TOTAL:	Refer to 2017 Revised Revenue Code & Market Code of the CSFP	3 minutes	



6. PAYMENT OF REAL PROPERTY TAX OR AMILYAR

The City Treasurer's Office under the Real Property Tax Division is directly responsible for the collection of real property tax payments within the territorial jurisdiction of the City of San Fernando, (P). Any person/individual and/or juridical entity who own a real property unit such as land, building, machinery and other improvements affixed or attached to the real property shall pay the imposed annual tax.

Office or Division	Office or Division: City Treasurer's Office-Real Property Tax Division					
Classification:		Simple				
Type of Transacti	on:	G2C – Governme	nt to Citizen			
Who may avail:		Citizen/Businessn	nen/All Governme	nt Agencies		
CHECKLIST O	FRE	QUIREMENTS	WHI	ERE TO SECU	JRE	
8. Proof of paymen documents	nt or a	any available	Windows 38, 39,	41, 42		
CLIENT STEPS	AG	ENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
Secure number at the information desk	and app doc	eceive, evaluate verify the lication form and umentary lirements.	None	1 minute	Administrative Aide (Real Property Division)	
2. Wait while the verification/assess ment clerk computes for the tax due	2. Encode all		None	5 minutes	<i>Administrative</i> <i>Aide</i> (Real Property Division)	
3. Pay the corresponding taxes	amo pay the colle	ccept the correct bunt of money as ment and endorse documents to ection officers	AV x 1% x no. of years x 2 (Basic & SEF)	4 minutes	Local Revenue Collection Officer (CTO)	
4. Receive the Official Receipt	4. Issuance of Official Receipt		None	2 minutes	Administrative Aide (Real Property Division)	
TOTAL:			AV x 1% x no. of years x 2 (Basic &	12 minutes		

Note: (1) Presentation of any of the following documents:

- 1. Proof of last payment i.e. previous tax receipts or clearance
- 2. Tax bill or statement of real property tax delinquency, if applicable
- 3. Copy of Latest Tax Declaration, if taxpayer has no record on hand.
- 4. Copy of Transfer of Certificate of Title (TCT), if taxpayer has no record on hand



7. PAYMENT OF SUPERVISION AND ENFORCEMENT REGULATION FEE

The City Treasurer's Office under the License and Permit Division is directly responsible for the collections supervisions and enforcement regulation fee.

Office or Division:	City Treasurer's C	ffice-License	e and Permit Divis	ion
Classification:	Simple			
Type of Transaction:	G2C / G2B / G2G	G2C / G2B / G2G		
Who may avail:	All			
CHECKLIST OF REQU	IIREMENTS		WHERE TO SE	CURE
Traffic Citation Ticket		Public Orde	er and Safety Coo	rdinating Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit traffic citation ticket	1. Receive, review and verify the order of payment	None	4 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
2. Pay the corresponding fees and receive the Official Receipt. Proceed to POSCO main building	2. Accept the correct amount of money, print and issue the official receipt.	Refer to 2017-34 of Traffic Managem ent Code of City of San Fernando, (P)	2 minutes	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
TOTAL:		Refer to 2017-34 of Traffic Managem ent Code of City of San Fernando, (P)	6 minutes	



8. SECURING COMMUNITY TAX CERTIFICATE - CORPORATION

The City Treasurer's Office under the License and Permit Division is directly responsible for the collection of community tax for juridical entity engaged in or doing business in the Philippines whose principal office is located in the City of San Fernando, (P)

Office or Division:	City Treasurer's (Office-License	and Permit Division	on		
Classification:	Simple	Simple				
Type of Transaction:	G2B – Governme	nt to Business	s Entity			
Who may avail:	Businessmen					
CHECKLIST OF REQ	UIREMENTS		WHERE TO SEC	URE		
Present application		 Windows 5 a	and 6			
Business and Lice	nse and Permit	Trandows of				
Divisions						
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Accomplish business application form together with all the necessary documents	1.Receive, review and verify personal data form	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)		
2.Wait while the administrative aide and local revenue collection officer computes for the tax due	2. Encode the taxpayer's personal information in the CTC System. Compute tax due and inform the taxpayer	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)		
3. Pay the corresponding taxes & receive the community	3. Accept the correct amount of money as payment for the issuance of community tax certificate	Basic Tax of P500 plus P2 for every P5,000	1 minute	Local Revenue Collection Officer (City Treasurer's Office)		
	TOTAL:	Basic Tax of P500 plus P2 for every P5,000	3 minutes			

- Note: (1) Presentation of any of the following documents for business: For declaration of Gross Sales:
- For Non-BIR Registered taxpayers, indicate the Gross Sales/Receipts on the Application Form
- For BIR Registered taxpayers, any of the following:
- a. Income Tax Returns of the preceding year (1 photocopy)
- b. VAT or Percentage Tax Returns of the preceding year (1 photocopy)
- c. Certification of breakdown of sales of each branch (if consolidated ITR) (original)
- -For Non-Operation of Business- Affidavit of Non-Operation for the latest taxable period/s (original)
- For Banks- Notarized Joint Statement of Annual Income (signed by a designated Officer of the Head Office and by the Branch Manager) (original) Other supporting documents:
- -PCAB Contractor's License for contractor, sub-contractors, specialty contractors engaging in the construction agency (if new business on previous year) (1 photocopy) -BSP Proof of Registration (received application form at the BSP or Certificate of Registration) for pawnshops, foreign exchange dealers, money changers & remittance agents (if new business on previous year) (1 photocopy)
- -Grant of Authorities from Congress/ PAGCOR/ Sangguniang Panlungsod Franchise for amusement entities



9. SECURING COMMUNITY TAX CERTIFICATE INDIVIDUAL FOR BUSINESS

The City Treasurer's Office under the License and Permit Division is directly responsible for the collection of community tax on individual persons engaged in business within the territorial jurisdiction of the City of San Fernando, (P).

Office or Division:	City Treasurer's Office-License and Permit Division			ivision	
Classification:	Simple	Simple			
Type of Transaction:	G2C – Governmer	G2C – Government to Citizen			
Who may avail:	All				
CHECKLIST OF REQU	IREMENTS		WHERE TO	SECURE	
1. Business application	form	Window 6			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE	
1.Accomplish the personal data form	1.Receive, review and verify business application form	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)	
2.Wait while the administrative aide and local revenue collection officer computes for the tax due	2.Compute tax due and inform the taxpayer	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)	
3. Pay the corresponding taxes & receive the community tax certificate	3.Accept the correct amount of money as payment for the issuance of community tax certificate	Basic Tax of P5 plus P1 for every P1,000	1 minute	Local Revenue Collection Officer (City Treasurer's Office)	
TOTAL:		Basic Tax of P5 plus P1 for every P1,000	3 minutes		

Note: (1) Presentation of any of the following documents for business: For declaration of Gross Sales:

- For Non-BIR Registered taxpayers, indicate the Gross Sales/Receipts on the Application Form
- For BIR Registered taxpayers, any of the following:
- a. Income Tax Returns of the preceding year (1 photocopy)
- b. VAT or Percentage Tax Returns of the preceding year (1 photocopy)
- c. Certification of breakdown of sales of each branch (if consolidated ITR) (original)
- -For Non-Operation of Business- Affidavit of Non-Operation for the latest taxable period/s (original)



10. SECURING COMMUNITY TAX CERTIFICATE - INDIVIDUAL

The City Treasurer's Office under the License and Permit Division is directly responsible for the collection of community tax on individual persons.

Office or Division:	(City Treasurer's C	Office-License	and Permit Divis	sion
Classification:		Simple			
Type of Transaction		G2C – Governme	ent to Citizen		
Who may avail:		All			
CHECKLIST OF REC	QUIR	EMENTS		WHERE TO SE	CURE
1. Personal Data Fori	m		Public Assis	tance and Comp	laints Division
2. Submit the applica	tion f	orm		ve Aide/Local Re nse and Permit D	
3. Wait while the verification clerk computes for			Window 1		
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1.Accomplish the personal data form	and	Receive, review verify personal a form	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
2.Wait while the administrative aide and local revenue collection officer computes for the tax due	taxp infor CTC Con and	incode the payer's personal rmation in the C System. Inpute tax due inform taxpayer	None	1 minute	Administrative Aide/Local Revenue Collection Officer (License and Permit Division)
3. Pay the corresponding taxes & receive the community tax certificate	3. A corr mor for t com	accept the ect amount of ney as payment he issuance of nmunity tax ificate	Basic Tax of P5 plus P1 for every P1,000	1 minute	Local Revenue Collection Officer (City Treasurer's Office)
		TOTAL:	Basic Tax of P5 plus P1 for every P1,000	3 minutes	

11. PAYMENT OF TAX ON TRANSFER OF REAL PROPERTY OWNERSHIP



The City Treasurer's Office under the Real Property Tax Division is directly responsible for the collection of tax on transfer of real property ownership on the sale, donation, barter, or on any other mode of transferring ownership or title of real property within the territorial jurisdiction of the City of San Fernando, (P).

Office or Division: City		City Treasu	City Treasurer's Office - Real Property Tax Division				
Classification:		Simple					
Type of Transaction	on:	G2C – Gov	G2C – Government to Citizen				
Who may avail:			inessmen/All Government Agencies				
CHECKLIST OF	REQUIR	EMENTS	WHERE TO	SECURE			
1. Present the red	quired do	cuments	Window 38				
CLIENT STEPS		GENCY CTIONS	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE		
1. Submit the all the necessary documents	1. Rece evaluate docume requirer	e entary	None	3 minutes	Administrative Aide/Local Revenue Officer (Real Property Division)		
2.Wait while the verification/assess ment clerk computes for the tax due	2.Compute tax due and inform the taxpayer		None	2 minutes	Administrative Aide/Local Revenue Officer (Real Property Division)		
3. Pay the corresponding taxes	2. Accept the correct amount of money as payment and endorse the documents to collection officers		75% of 1% of the Fair Market Value or Consideration whichever is higher	3 minutes	Administrative Aide/Local Revenue Officer (Real Property Division)		
4. Receive the Official Receipt	3. Issuance of Official Receipt		None	2 minutes	Administrative Aide/Local Revenue Officer (Real Property Division)		
		TOTAL:	75% of 1% of the Fair Market Value or Consideration whichever is higher	10 minutes			

Note: (1) Presentation of any of the following documents:

- a. Original Copy of Deed of Sale/Donation.b. Photocopy of Deed of Sale/Donation.
- c. Latest Tax Declaration;
- d. Land Tax Clearance;
- e. Certificate of No Improvement, if applicable



City Planning and Development Coordinator's Office

External Services



1. SECURING LOCATIONAL CLEARANCE / ZONING FOR BUILDING

The City Planning and Development Coordinator's Office (CPDCO) is responsible for the issuance of the Locational Clearance/Zoning Certificate for Building. All enterprises and private persons constructing a new building or applying for expansion/renovation are required to secure a Locational Clearance/Zoning Certificate upon application of a Building Permit. This should be done before the start of construction to ensure that the building/business is allowed in the chosen location as per the Comprehensive Land Use Plan (CLUP) of the City.

Office or Division:	City Planning and Development Coordinator's Office / City Hall Main Building, 2 nd floor					
Classification:	Simple					
Type of Transaction:	G2G – Government to G	Government				
Who may avail:		City Building Official (OCBO)				
CHECKLIST OF I	REQUIREMENTS	WHERE TO SECURE				
Unified Application Permit	Form for Building	-Office of the City Building Official				
2. One set blueprint o Architectural Plans (i. Plan/s & Elevation Pla by Architect/ Civil Eng the conformity of the o	e. Perspective, Floor an/s) signed & sealed gineer concerned with	-Applicant / Architect / Engineers				
plan duly signed and	teprint copy of location sealed by a registered applicable to tenants/	-Applicant / Geodetic Engineer				
4. Photocopy of Certif Transfer Certificate of Register of Deeds (no lessee)		-Register of Deeds				
5. Photocopy of any of the following Forms of Ownership/ Right-Over Land Documents: 5.1. Notarized Contract of Lease/ Award Notice/ Offer Sheet (if client is leasing the space)		-Property Owner / Notary public				
5.2. Notarized Deed of Assignment/ Deed of Donation/ Usufruct		-Property Owner / Notary public				
5.3. Notarized Dee	ed of Absolute Sale	-Property Owner / Notary public				
or Contract to Sell						
5.4. Notarized Cor		-Property Owner / Notary public				
5.5. Notarized Aut	hority to Construct	-Property Owner / Notary public				

	T =
5.6. Notarized Affidavit of Heir	-Property Owner / Notary public
5.7. Notarized Memorandum of	-Property Owner / Notary public
Agreement	
5.8. Notarized Waiver of Rights	-Property Owner / Notary public
5.9. Lease Proposal	-Property Owner
6. Photocopy of Tax Declaration	-City Assessor's Office
7. Photocopy of Bill of Materials	-Applicant / Architect / Engineers
duly signed and sealed by a registered	
Civil Engineer or Architect	
8. Barangay Clearance (for construction)	-Office of the City Building Official
Other Supporting Documents	
9. If the applicant is not the registered	
owner, any of the following will be	
required:	
9.1. Special Power of Attorney	-Applicant / Attorney
9.2. Notarized Authorization Letter	-Property Owner / Notary Public
	-Corporation / Company
9.3. Secretary's Certificate or Board	, , , , , , , , , , , , , , , , , , , ,
Resolution authorizing the applicant as	
representative.	
10. Neighbors consent, minimum	
of 4 periphery units/ Homeowner's	
Clearance/ Certification if within	-Applicant / Accredited Homeowners
approved residential subdivision	Association
11. Traffic Impact Assessment (if	
building floor area is more than 5000	-Transport Planner
square meters)	
12. For locations requiring land	O
reclassification – Sangguniang	-Sangguniang Panlungsod
Panlungsod Resolution/ Ordinance (on	
the approved reclassification) 13. Additional requirements for Base Stations	-National Telecommunication Commission
and other Telecommunications	National Teleconnitiunication Commission
Infrastructure:	
13.1. Homeowner's Association Consent or	
Certification:	
a. For locations with a registered	
Homeowner's Association, a Homeowner's	
Consent shall be required for Passive	
Telecommunications Tower Infrastructure that	-Property Owner
are to be located within residential communities.	
b. For locations without a registered	
Homeowner's Association, the applicant shall	

be required to submit a **Certification** that there is no existing duly registered homeowner's association in the proposed project site.

c. **Undertaking** (not a prerequisite to the issuance of the certification, clearance, or permit) that they will conduct social preparation or will endeavor to educate the affected homeowners, households or families as to their health and safety protocols.

-Applicant

- 13.2. Height Clearance Permit or Validated Affidavit of Undertaking, whichever is applicable:
- a. If located within CAAP Critical Area (as verified in CAAP website), a **Height Clearance Permit** (HCP) from the Civil Aviation Authority of the Philippines (CAAP) is required for all proposed PTTIs that are fifty (50) meters or higher above the elevation of the ground

- Civil Aviation Authority of the Philippines (CAAP)

b. If located outside CAAP Critical Area or tower height is below fifty (50) meters, there is no need to require a Height Clearance Permit (HCP) from the CAAP. Instead, applicants are only required to submit an **Affidavit of Undertaking** (AOU) certified by a Geodetic Engineer.

- Geodetic Engineer

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CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Office of the City Building Official shall conduct site inspection with the Joint Inspection Team	Conduct site inspection with Joint Inspection Team	Non e	8 hours (Simple, Complex Application) 16 hours (Highly Technical Application)	Zoning Officer III/ Zoning Inspector II/ Project Development Officer II (CPDCO)
Submit properly accomplished Unified Application Form & documentary requirements	2.1. Receive the application form Check the completeness & authenticity of the requirements	No ne		Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Draftsman III/Administrative Assistant II/Aide (CPDCO)

2.2. Determine if client conform to Approved Subdivision Plan with Development Permit; Comprehensive Land Use Plan & (CLUP) Zoning Ordinance (ZO) 2.3. If requirements conform to the CLUP & in	None	1.5 hours (Simple Application) 3 hours (Complex Application) 9 hours (Highly Technical Application)	Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Draftsman III/Administrative Assistant II/Aide (CPDCO) Zoning Officer III/Zoning Inspector II/ Project Development Officer
accordance with the Compatibility Matrix; record information			II/ Draftsman III/Administrative Assistant II/Aide (CPDCO)
2.4. Compute applicable fees including applicable penalty, if any.	Schedule of fees as per: Art. 31, Sec. 125-128 of the 2017 Revenue and Market Code	10 minutes (Simple Application) 20 minutes (Complex Application) 60 minutes (Highly Technical Application)	Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Draftsman III/Administrative Assistant II/Aide (CPDCO) Zoning Officer
2.5. Record, encode and prepare Zoning Certificate/ Locational Clearance.	None	15 minutes (Simple Application) 30 minutes (Complex Application) 90 minutes (Highly Technical Application)	III/Zoning Inspector II/ Project Development Officer II/ Draftsman III/Administrative Assistant II/Aide (CPDCO)
2.6. Review & approve	None	2 hours (Simple Application) 4 hours	Department Head/ Architect IV/Zoning

	Zoning Certificate / Locational Clearance		(Complex Application) 12 hours (Highly Technical Application)	Officer III(CPDCO)
3. Receive Zoning Certificate / Locational Clearance	3. Release Zoning Certificate / Locational Clearance	None	5 minutes (Simple Application) 10 minutes (Complex Application) 30 minutes (Highly Technical Application)	Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Draftsman III /Administrative Assistant II/Aide (CPDCO)
TOTAL		None	1.5 working days (Simple Application) 2 working days(Complex Application) 5 working days (Highly Technical Application)	



Based on Art. 31, Sec. 125 to 128 of the 2017 Revenue and Market Code

I. ZONING/LOCATIONAL CLEARANC	E
A. Residential Structure (single attack	ched or detached)
1. P 100,000 and below	P 288.00
2. Over P100,000 to P 200,000	P 576.00
3. Over P 200,000	P 720.00 + (1/10 of 1%
	excess of P 200,000.00)
B. Apartments/Townhouses	
1. P500,000 and below	P 1,440.00
2. Over P 500,000 to P 2 Million	P 2,160.00
3. Over P 2 Million	P 3,600.00 + (1/10 of 1% of cost
	in
	excess of P2 Million regardless
	of the
	number of floors)
C. Dormitories	
 Project Cost of P 2 Million and 	P 3,600.00
below	P 3,600.00 + (1/10 of 1% of cost
2. Project Cost of Over P 2 Million	in excess of P2 Million regardless
	of the number of doors)
D. Institutional	
P 2 Million and below	P 2,880.00
2. Over P 2 Million	P 2,880.00 + (1/10 of 1% of cost
	in excess of P 2 Million)
E. Commercial, Industrial, Agro-Indu	
1. P 100,000 and below	P 1,440.00
2. Over P100,000 to P 500,000	P 2,160.00
3. Over P 500,000 – P 1 Million	P 2,880.00
4. Over P 1 Million – P 2 Million	P 4,320.00
5. Over P 2 Million	P 7,200.00 + (1/10 of 1% of cost
	in
	excess of P 2 Million)
F. Special Uses/ Special Projects (ga	soline station, cell sites,
slaughterhouse,	
treatment plant, etc.)	
 P 2 Million and below 	P 7,200.00
2. Over P 2 Million	P 7,200.00 + (1/10 of 1% in
	excess of P 2 Million)



2. SECURING ZONING CERTIFICATE FOR BUSINESS PERMIT

The City Planning and Development Coordinator's Office (CPDCO) is responsible for the issuance of the Zoning Certificate. Business establishments are required to secure a Zoning Certificate upon application of a Business Permit to ensure that the proposed utilization of the lot is in accordance with the City Land Use Plan (CLUP) and other relevant zoning and land use ordinances.

Office or Division:	City Planning and Development Coordinator's Office / City Hall Main Building, 2 nd floor		
Classification:	Simple		
	G2G – Government to Government		
Who may avail:	Applicant / BLPD		
CHECKLIST OF I		WHERE TO SECURE	
Application Form for Business		Business License and Permit Division	
2. Tax Declaration	(photocopy)	Applicant / City Assessor's Office	
3. Applicable Forms of			
(1 photocopy): whichever	•		
applicable		-Registry of Deeds	
3.1. Owners duplicate	copy (TCT)	-Building / Property Owner, Notary public	
3.2. Contract of Lease	e		
(duly notarized)		-Notary Public	
3.3. Contract to Sell (,	-Notary Public	
3.4. Deed of Absolute		Natama Dadalia	
(duly notarized	,	-Notary Public	
3.5. Deed of Donation and/or Special Power of Attorney (duly notarized) 3.6. Authorization letter		-Building / Property Owner	
(notarized) and/or Notice of Award/ Certification 3.7. Sworn Statement as Heir of		-Building / Property Owner	
the Property (duly notarized) 3.8. LHSD Certification – if within		-Local Housing Settlement Division	
Northville Subdivision 3.9. NHA Certification – if within San Fernando Heights, Bulaon Resettlement, and San Fernando Ville (AFP-PNP Ville) 3.10. Lease Proposal 3.11. Certificate of Lease (duly Notarized)		-National Housing Authority	
		-Building / Property Owner -Building / Property Owner, Notary public	

4. OTHER SUPPORTING DOCUMENTS: 4.1. Neighborhood's Consent, minimum of 4 periphery units (if no Homeowner's Association) / Homeowner's Clearance or Certification (if within approved residential subdivision) / Developer's Consent (for newly developed subdivisions)	-Applicant / Accredited Homeowners Association / Subdivision Developer
4.2. CMOD Clearance – if within New Public Market / Market Plaza (Stamped application with stall number)	-City Market Operations Division (CMOD)
5. Additional requirements for business applications with amendments:	
5.1. Amendments in Ownership:5.1.a. Change in Marital Status: Marriage Certificate (photocopy)	-Applicant / PSA
5.1.b. Transfer of Ownership thru Consanguinity / Affinity (whichever is applicable / duly notarized): Updated Lease Proposal (no need to be notarized), Updated Contract of Lease, Updated Certificate of Lease, Updated Contract to Sell, Updated Deed of Absolute Sale, Updated Deed of Donation, Updated Special Power of Attorney, Updated Authorization Letter, Updated Notice of Award, Sworn Statement as Heir of Property, CMOD Clearance (Public Markets), Neighbors Consent – 4 units or Homeowner's Clearance (if within registered subdivisions), LHSD Certification (within Northville Subdivision) or NHA Certification (San Fernando Heights, Bulaon Resettlement, San	-Applicant / Notary Public -CMOD - Applicant / Accredited Homeowners Association
Fernando Ville)	-Business License and Permit Division
5.2. Amendments in Business Name: photocopy of Updated Barangay Business Clearance	-Business License and Permit Division
5.3. Amendments in Location and / or Type of Business Operation and / or Expansion of Services: same requirements for New Business Applications	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure and submit properly accomplished application form: Zoning Certificate for Business & Documentary requirements	Receive the application Check the completeness & authenticity of the requirements	None		Architect IV/Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Planning Officer/Draftsman III/Administrative Assistant II/Aide (CPDCO)
2. Wait while the staff evaluates the application and accomplish the routing slip	2.1. Determine conformity to the Compatibility Matrix &/or Comprehensive Land Use Plan (CLUP) 2.2. Record & encode pertinent information in logbook for the proper documentation of application. 2.3. Review & approve the application (if it is in compliance to existing & applicable laws & ordinances)	None	9 minutes	Architect IV/Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Planning Officer/Draftsman III/Administrative Assistant II/Aide (CPDCO) Department Head/ Architect IV/ Zoning Officer III (CPDCO)
3. Sign the logbook and receive the accomplished routing slip.	3. Release the accomplished routing slip. File the Zoning certificate for Business	None		Architect IV/Zoning Officer III/Zoning Inspector II/ Project Development Officer II/ Planning Officer/ Draftsman III/Administrative Assistant II/Aide (CPDCO)
	TOTAL:	None	9 minutes	



3. SECURING ZONING CERTIFICATE FOR LAND

The City Planning and Development Coordinator's Office (CPDCO) is responsible for the issuance of the Zoning Certificate for Land. Site zoning is requested by a taxpayer and/or any individual to enable the property owner to determine whether the use of the parcel of land is in accordance with the approved Comprehensive Land Use Plan and Zoning Ordinance.

Office or Division:	City Planning and Development Coordinator's Office / City				
	Hall Main Building, 2 nd floor				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	All				
	REQUIREMENTS			O SECURE	
Health Declaration	Form	Guard Post (Entrance)			
2. One (1) copy of loca		Applicant / Geodetic Engineer			
signed and sealed by a registered					
Geodetic Engineer					
3. One (1) photocopy of Title		Applicant / Reg	gistry of De	eds	
4. One (1) photocopy of		Applicant / City			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE	
Declaration Form and the documentary requirements	1. Receive & check the completeness & authenticity of the requirements	None	15 minutes	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)	
2. Wait while the staff evaluates the use of the parcel of land	2. Evaluate the use of the parcel of land using the Comprehensive Land Use Plan (CLUP) Matrix & the Zoning Ordinance (ZO)	None	60 minutes	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)	
3. Receive the Order of Payment	3. Compute based on the schedule of fees: Zoning Certificate for Land and Prepare the Order of Payment	Based on; Art. 31, Sec. 125-128 of the 2017 Revenue and Market Code	10 minutes	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)	

4. Pay corresponding fee to the City Treasurer's Office (CTO)	4. Instruct client to pay corresponding fee to the City Treasurer's Office (CTO)	Based on; Art. 31, Sec. 125-128 of the 2017 Revenue and Market Code	1 minute	CTO Staff (City Treasurer's Office)
5. Submit copy of Official Receipt	5. Receive copy of proof of payment	None	1 minute	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)
6. Wait while the certificate is prepared	6.1. Prepare & record Zoning Certificate for Land	None	30 minutes	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)
	6.2 Review & Approve Zoning Certificate for Land	None	20 minutes	Department Head (CPDCO)
7. Receive Zoning Certificate for Land	7. Release Zoning Certificate for Land	None	15 minutes	Architect IV / Zoning Officer III / Zoning Inspector II / Project Development Officer II / Planning Officer / Draftsman II / Administrative Assistant II / Aide (CPDCO)
	TOTAL:		2 hours and 32 minutes	



Office of the City Building Official

External Services



1. BUILDING PERMIT AND OTHER ANCILLARY AND ACCESSORY PERMITS

The Office of the City Building Official is primarily responsible for the issuance of building permit and other ancillary and accessory permits and other related permits as mandated by law particularly the National Building Code (P.D. 1096) and other referral codes in order to promote public safety, order and welfare towards a sustainable and sound environment catering to City of San Fernando's development. Any person, firm or corporation who wishes to erect, construct, enlarge, alter, repair, move, improve, convert, demolish, equip, use, occupy, or maintain any building or structure can avail of these services.

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Office or Division:	Office of the City Building Official (OCBO) located at Plaza Vidal de		
	Arrozal (Atrium), City Hall, City of San Fernando, Pampanga		
Classification:	Highly Technical		
Type of Transaction:	G2C – Government	to Citizen / G2B – Government to Business /	
	G2G – Government	to Government	
Who may avail:	Citizen / Business / Government		
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE	
1. Fully accomplish	ned, originally		
signed and sealed			
licensed professi			
following forms (i			
- **Four (4) copies			
Unified Application			
Building Permit		Office of the City Building Official (Receiving	
- Two (2) copies of		Window)	
Sanitary/Plumbin			
- Two (2) copies of Application			
for Electrical Permit			
- Two (2) copies of Electrical Permit			
- Two (2) copies of Mechanical Permit			
- Two (2) copies of Electronics Permit			
Note: For Ancillary and Accessory			
Permit applications only, submit			
photocopy of approved Building Permit			
(if applicable)	a banding i citilit		
in applicable)			

2 AATha fallowing acts of plans all	
2. ^^The following sets of plans, all originally signed and sealed by	Respective Professionals
respective professionals:	respective i foressionals
- **Four (4) sets of Architectural Plans	
- Three (3) sets of Civil/Structural Plans	
- Three (3) sets of Sanitary/Plumbing	
Plans	
- Three (3) sets of Electrical Plans with	
Short Circuit and Voltage Drop Calculations	
- Three (3) sets of Mechanical Plans	
- Three (3) sets of Electronic Plans	
Legend:	
**Additional one (1) copy of Unified	
Application Form for Building Permit	
and one (1) set of Architectural Plans for	
projects within Heritage District and	
Declared Heritage Structure (for CTIPO)	
^^Additional one (1) set of plans and	
copies of documentary requirements for	
projects located along National Roads is	
required	
-In the event of multiple applications of	
typical design of structure like	
subdivision, the applicant may apply	
and submit one typical set of plans per	
block but with individual lot plan and	
site development plan	
3. Four (4) sets of Location Plan, originally	Licensed Geodetic Engineer
signed and sealed	_
4. Four (4) sets of Cost Estimates/ Bill of	
Materials, all originally signed and sealed,	Licensed Architect or Civil Engineer
notarized	
5. Four (4) sets of Specifications, all	Licensed Architect or Civil Engineer
originally signed and sealed	Election of the Engineer
6. Three (3) sets of Hydraulic Analysis, for	
new and additional fire protection system,	Professional Mechanical Engineer
all originally signed and sealed	
7. Three (3) sets of Fire Protection Plan	
including Automatic Fire Suppression	
System (AFSS), Fire Detection and Alarm	
System (FDAS), Kitchenhood Suppression	Professional Mechanical Engineer
System (KHSS) and Centralized LPG Line	
System (for BFP) – if applicable	

0 Tl (0) (() (i D (i i	
8. Three (3) sets of Valid Professional Licenses and Latest PTR with 3 specimen signature and seal	Respective Professionals
9. Two (2) sets of Structural Design	
Analysis and Seismic Analysis, for two (2)	
storey buildings/ structures with height of	Licensed Architect or Civil Engineer
7.5	Lissings of the Linguistics
meters or more and warehouses, all	
originally signed and sealed	
10. Two (2) sets Boring and Plate Load	
Tests, Structural Design Analysis and	Licensed Civil Engineer
Seismic Analysis for three (3) storey	g
buildings and higher, all originally signed	
and sealed	
11. One (1) copy of DOLE Certification for	
Construction Safety and Health Program	Department of Labor and Employment (DOLE)
12.One (1) copy Traffic Impact Assessment	Traffic Engineer
- if building floor area is more than 5,000	
square meters (for CPDCO)	
13. One (1) copy Affidavit of Undertaking –	-Office of the City Building Official (Receiving
for Building Permit applications with 30	Window)
days grace period submission of other	-Notarial Services
government clearances	
14. Two (2) copies of the following	
documents:	
Certified True Copy of Transfer Certificate	
of Title from Register of Deeds	
**In case the applicant is not the	
registered owner of the lot, two (2)	
copies of any of the following duly notarized document shall be submitted:	
- Contract of Lease or Award Notice/ Offer	-Pagistar of Doods Jacatad at Capital
Sheet	-Register of Deeds located at Capitol Compound
- Deed of Absolute Sale/ Donation/	-Owner of the property
Usufruct	-Notarial Services
- Contract of Sale	
- Authority to Construct	
- Affidavit of Heirs	
- Memorandum of Agreement	
- Waiver of Rights	
16. One (1) copy of Certified Tax	City Assessor's Office
Declaration	2,

Property Tax Receipt or Real Property Tax Clearance (to be facilitated by OCBO) 18. Any of the following will be required in cases when the applicant is not the registered owner (1 original, 1 photocopy) Corporate Secretary – for corporation Special Power of Attorney Notarized Authorization Letter 19. Sangguniang Panlungsod Resolution/Ordinance on the approved reclassification – for reclassified land 20. One (1) copy of Barangay C1.One (1) copy of Homeowner's Clearance or Neighborhoods Consent nearby, minimum of 4 periphery units, if applicable – (for CPDCO) 22. One (1) copy of Zoning Certificate or Locational Clearance (to be facilitated by OCBO) 23. One (1) copy of Fire Safety Evaluation Clearance (to be facilitated by OCBO) 24. One (1) copy of Lifting of the Presumption for 50 years and over structure from any Cultural Agencies (from CTIPO – to be facilitated by OCBO) 25. One (1) copy of Conformity for new buildings within Heritage District (from CTIPO – to be facilitated by OCBO) 27. Additional Documentary Requirements for Base Stations and other Telecommunication Infrastructure: If the applicant is a Mobile Network Operator (MNO): Certificate of Repistration to Provide		
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buildings within Heritage District (from CTIPO – to be facilitated by OCBO) 26. One (1) copy of Clearances from other government agencies such as CAAP, DENR, DOH, NHA, DPWH, etc., if necessary (to be submitted within 30 days from the date of submission) 27. Additional Documentary Requirements for Base Stations and other Telecommunication Infrastructure: If the applicant is a Mobile Network Operator (MNO): Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or Certificate of Registration to Provide		
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26. One (1) copy of Clearances from other government agencies such as CAAP, DENR, DOH, NHA, DPWH, etc., if necessary (to be submitted within 30 days from the date of submission) 27. Additional Documentary Requirements for Base Stations and other Telecommunication Infrastructure: If the applicant is a Mobile Network Operator (MNO): Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or Certificate of Registration to Provide		Since of the only Building Official
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necessary (to be submitted within 30 days from the date of submission) 27. Additional Documentary Requirements for Base Stations and other Telecommunication Infrastructure: • If the applicant is a Mobile Network Operator (MNO): - Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or - Certificate of Registration to Provide	1 0	Applicable government agency/les
from the date of submission) 27. Additional Documentary Requirements for Base Stations and other Telecommunication Infrastructure: If the applicant is a Mobile Network Operator (MNO): Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or Certificate of Registration to Provide		
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Telecommunication Infrastructure: • If the applicant is a Mobile Network Operator (MNO): - Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or - Certificate of Registration to Provide		
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Operator (MNO): - Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or - Certificate of Registration to Provide		- National Telecommunication
- Certified True Copy of National Telecommunication Commission's Provisional Authority (PA); or - Certificate of Registration to Provide		Commission
Telecommunication Commission's Provisional Authority (PA); or Certificate of Registration to Provide	, , ,	
Provisional Authority (PA); or Certificate of Registration to Provide		
- Certificate of Registration to Provide		
- Certificate of Registration to Provide - Department of Information and	- , , ,	
	- Certificate of Registration to Provide	- Department of Information and

Telecommunication Services

- If the applicant is an Independent Tower Company (ITC) constructing a Passive Telecommunication Tower (PTTI) or other passive structures:
- Certified True Copy of the ITC
 Certificate of Registration (issued by DICT)
- If the telecommunication structure is proposed to be located on a privately-owned land within residential subdivision:
- Written certification under oath executed by the responsible officer of the company that there is no other available or suitable site within the coverage area except the subject property inside the subdivision project and said location will best serve the purpose of interconnectivity effectively and efficiently
- Undertaking that they will conduct social preparation among the affected homeowners, households or families
- Radiofrequency Radiation (RFR)
 Evaluation Report from the Center for
 Device Regulation, Radiation, Health, and
 Research of the Food and Drug
 Administration (FDA-CDRRHR) not
 applicable for passive infrastructures

Communication Technology (DICT)

- Responsible Officer of the company
- Center for Device Regulation, Radiation, Health, and Research of the Food and Drug Administration (FDA-CDRRHR)

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	ROCESSINC TIME	PERSON RESPONSIBL E
1. Submit all the necessary forms and documents required at OCBO Receiving Window.	1. Check the completeness of the required documents and indicate the time in and date in the Routing Slip. Encode application details in the receiving logbook. Then, print the	None	50 minutes (simple) / 1hour,	Administrative Assistant/ Aide (OCBO)

Receive Acknowledgeme nt Receipt (Wait for the results of evaluation within 3 working days)	Verification Form, Routing Slip, Acknowledgement Receipt, Evaluation – Nonconformity Compliance Sheet and Joint Inspection Report for Building and other Ancillary and Accessory Permits.		50 minutes (complex)	
	**For Sign Permit and Demolition Permit applications, encode the pertinent information and print the applicable permit.			
	1.1 Endorse the documents to the City Treasurer's Office and City Tourism and Investment Promotion Office (if applicable) for verification.	None		Administrative Assistant/ Aide OCBO Monitoring Officer
	1.2 Stamp the plans and application forms with "RECEIVED" and indicate the date of receipt as well as the assigned application control number.	None		Administrative Assistant/ Aide (OCBO)
	1.3 Fill out the Routing Slip completely and issue the acknowledgement receipt / feedback to the applicant.	None		Administrative Assistant/ Aide (OCBO)

			<u> </u>
1.4 Endorse the			
application to the BFF			Administrative
Plan Evaluator then to	0		Assistant/ Aide
the Architect and			(OCBO)
Engineers for technic	al		(ООВО)
evaluation. Also,			
endorse to the JIT			
Leader for the conduc	ot		
of joint inspection.			
' '	None	10 hours	
Note: Technical	110110	(simple) /	
evaluation may be		32 hours	
conducted			
		(complex	
simultaneously with the	ie)	
ocular inspection.			
1.5 Indicate time in a	and		Architect and
	Ni.		Engineers
date in the Routing S	·		(OCBO) and
Verify and evaluate t			Building Plan
plans and document	S		Evaluator (BFP)
as to technical			
requirements of their	•		
respective fields /			
disciplines.			
1.6 Accomplish and s	ign		Architect and
the Evaluation –			Engineers
Nonconformity			(OCBO),
Compliance Sheet.			Building Plan
Notes:			Evaluator
Notes:	n is		(BFP),
1.6.1 If the application compliant to the Nation			Processing
Building Code (P.D.	niai		and Evaluation
1096) and other refer	ral		Division Chief
code of each disciplin			(OCBO) and
sign on the approval i	· ·		(City Building
of the plans.			Official
1.6.2 If the application	n is		(OCBO)
not compliant, record			(3323)
findings in the Evalua	tion		
- Nonconformity	,		
Compliance Sheet an			
the nonconformity in the			
Nonconforming Output	IIS		

Logbook. Nonconforming outputs shall be monitored with a period of thirty (30) calendar days after the technical deficiencies were communicated to the client. 1.6.3 If the applicant fails to comply with the technical requirements after a period of thirty (30) calendar days, the inspector/s will conduct an ocular inspection. 1.6.4 For completely and partially constructed, demolished or installed. a Demand Letter will be served. 1.6.5 Notice of violations will be served if the applicant fails to comply after the issuance of a Demand Letter, Refer procedures on **OCULAR** INSPECTION Note 1.12.3 1.6.6 If the applicant fails to comply after the final notice of violation. application will be endorsed to the City Legal Office for appropriate legal actions. 1.6.7 For applications with notice/s issued during the conduct of saturation, and the applicant fails to comply. a demand letter and/or due notice/s, whichever applicable will be served prior to endorsement to the City Legal Office for appropriate legal actions. Follow the procedures in Note 1.6.3 of Technical

Evaluation			
1.7 Fill out the Routing Slip.	None		Architect and Engineers (OCBO) and Building Plan Evaluator (BFP)
1.8 Receive and attach the Locational / Zoning Clearance and Order of Payment from the CPDCO and other documents from BFP to the application documents.	None		Administrative Assistant/ Aide (OCBO)
1.9 Indicate the time in and date on the Routing Slip and endorse the application to the Processing and Evaluation Division Chief and City Building Official.	None		Administrative Assistant/ Aide (OCBO)
1.10 Review and application and applicable permits.	None		Processing and Evaluation Division Chief (OCBO) and City Building Official (OCBO)
1.11 Fills out completely the Routing Slip.	None		Administrative Assistant/ Aide (OCBO)
1.12 Conduct joint inspection from the date of application and record the results of the inspection and recommendation on the report. Notes: 1.12.1 If the applicant fails to comply with the technical requirements,	None	1 working day	Building Inspector (OCBO), Fire Safety Enforcer (BFP), Zoning Inspector (CPDCO), Tourism Representative (CTIPO), and Barangay Representative

conduct ocular inspection within five (5) working days from the last day of the thirty (30) days grace period to determine the status of construction. 1.12.2 If noncompliance was noted by all or any of the regulatory offices, joint inspection shall be conducted by the OCBO and concerned office or the OCBO only as the case may be. 1.12.3 For applications which were issued with a Demand Letter. inspection shall be conducted three (3) days after the date of receipt of the Demand Letter. If Notice of Violations will be served, inspection shall be conducted three (3) days after the receipt of every corresponding notice. 1.12.4 For not yet constructed, demolished or installed, a quarterly inspection will be conducted to monitor the application from the proposed date of construction and will be canceled by the Building Official after a period of one (1) year from the date of

application.			
1.13 Request the	None		Building
applicant to sign on the			Inspector
Inspection Report and			(OCBO)
furnish him/her a copy			
of it. Endorse the			
applicant's documents			
to the Assessment			
Officer.			5 " "
1.14 Fill out the	None		Building
Routing Slip completely			Inspector (OCBO)
and endorse the			(ОСВО)
documents to the			
Assessment Officer.	Nama		Administrative
1.15 Retrieve the set of	None		Assistant / Aide
application documents allotted for the CPDCO			(OCBO)
and attach the			(333)
verification form and			
joint inspection report.			
Then endorse the			
documents to the			
CPDCO.			
1.16 Indicate the time	None	1 hour	Assessment
in and date on the	140110	(simple) / 2	Officer
Routing Slip. Assess		hours	(OCBO)
and encode all		(complex)	
applicable fees. For the		(00111)	
Location Clearance			
fees and FSEC fees,			
copy of assessment			
based on the CPDCO's			
order of payment and			
BFP's assessment			
form.			
1.17 Print one (1) copy	None		Assessment
of Assessment Slip,			Officer
four (4) copies of Order			(OCBO)
of Payment and sign			
on each copy.			
	·		

	1.18 Endorse the Assessment Slip and Order of Payment to the Processing and Evaluation Division Chief and the City Building Official for the review and approval.	None		Assessment Officer (OCBO)
	1.19 Review and approve of Assessment Slip and Order of Payment.	None	2hou 2 hours (simple) / 6 hours (complex)	Processing and Evaluation Division Chief and City Building Official (OCBO)
	1.20 Fill out the Routing Slip and endorse it to the Revenue Collection Clerk (CTO) together with the Order of Payment.	None		Assessment Officer (OCBO)
2. Present Acknowledgeme nt Receipt to the City Treasurer's Office – Window 31)	2.1 Receive the Acknowledgment Receipt from the applicant.	Refer to Schedule of Fees and other Charges of the Revised Implementing Rules and Regulations (IRR) of the National Building Code of the Philippines	10 minutes	Revenue Collection Clerk (CTO)
	2.2 Retrieve the Order of Payment from file.2.3 Indicate the date	(P.D. 1096) / Other Regulatory Fees / Ordinances		
	and time on the Routing Slip and encode the payment details and collect the correct amount of money from the client.			Revenue Collection Officer/ Clerk (CTO)
	2.4 Print Official Receipt Payment to the client			

			A director's 4 44
	3.9 Stamp the plans		Administrative
	and application with		Assistant/ Aide
	ïSSUED" and indicate		(OCBO)
	the date of issuance.		
	Segregate the		
	approved Building		
	Plans and Permit into		
	two (2) sets (OCBO and		
	Owner's copy).		
	3.10 Issue the approved		Administrative
	permits to the applicant		Assistant/ Aide
	and request him to		(OCBO)
	accomplish the		
	previously issued		
	acknowledgment		
	receipt/ feedback form		
	after which will be		
	dropped accordingly by		
	the applicant to the		
	designated suggestion		
	box.		
			Administrative
	3.11 Fill out the Routing		Assistant/ Aide
	Slip and request the		(OCBO)
	applicant to sign on		(ОСВО)
	releasing the logbook to		
	signify receipt of		
	documents.		
4.Receive			
approved permits			
and drop Client's			
Feedback Form in			
the Suggestion			
Box at OCBO			
Releasing			
Window			

TOTA	Refer to Schedule of Fees and other Charges of the Revised Implementing Rules and Regulations (IRR) of the National Building Code of the Philippines (P.D. 1096) / Other Regulatory Fees / Ordinances	
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2. CERTIFICATE OF FINAL ELECTRICAL INSPECTION/COMPLETION (SMALL ELECTRICAL)

The Office of the City Building Official is primarily responsible for the issuance of Certificate of Final Electrical Inspection/ Completion (Small Electrical) as mandated by law particularly the National Building Code (P.D. 1096) and its Implementing Rules and Regulations in order to obtain services of the electric utility company and as compliance to Philippine Electrical Code (R.A. 7920).

Office or Division:	Office of the City Building Official (OCBO) located at Plaza Vidal de Arrozal (Atrium), City Hall, City of San Fernando, Pampanga		
Classification:	Highly Technical		
Type of Transaction:		t to Citizen / G2B – Government to Government to Government	
Who may avail:	Citizen / Business /	Government	
CHECKLIST OF RE	EQUIREMENTS	WHERE TO SECURE	
**One (1) copy of ac Application for Final Inspection/ Complete	Electrical	Office of the City Building Official (Receiving Window)	
2. Two (2) copies Certificate of Final Electrical Inspection/ Completion, all originally signed and sealed by a professional electrical engineer		Office of the City Building Official (Receiving Window)	
3. Two (2) copies of Application for Electrical Permit, all originally signed and sealed by a professional electrical engineer		Office of the City Building Official (Receiving Window)	
4. Two (2) copies of Electrical Permit, all originally signed and sealed by a professional electrical engineer		Office of the City Building Official (Receiving Window)	
5. Three (3) sets of Electrical Layout, all originally signed and sealed by a professional electrical engineer		Office of the City Building Official (Receiving Window)	

6. **One (1) copy of Transfer Certificate of Title or Award Notice from any government or private housing organization. Note: In case the applicant is not the registered owner of the lot, submit 1 copy of any of the following duly notarized documents showing proof of ownership: - Contract of Lease or Award Notice/ Offer Sheet - Deed of Absolute Sale/ Donation/ Usufruct - Contract of Sale - Authorization from Lot Owner - Affidavit of Heirs Legend: ** - initial requirement to be submitted. The rest of the documentary requirements will be submitted after the conduct of inspection.		-Register of -Owner of th -Notarial Ser	e property	
6. One (1) copy Cert Inspection – to be se be facilitated by Ot	ecured at the BFP (to	Bureau of Fire Protection (BFP)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish Application for CFEIC and wait for the schedule of ocular inspection. Submit proof of ownership at OCBO Receiving Window	1. Determine the registered owner of the lot based on the submitted documents prior to receiving the application. Notes: *If the applicant is the registered owner, proceed to the next procedure. *If the applicant is not the registered owner, return the application to the client and provide reasons for returning it.	None		Administrative Assistant/ Aide (OCBO)

		1		
	1.1 Indicate date and			
	time on the Routing			
	Slip.			Administrativ
				e Assistant/
	1.2 Schedule the	None	1 hour	e Assistanti Aide
	inspection and			(OCBO)
	encode application			(0020)
	details in the logbook.			
	1.3 Print the routing			
	slip and two (2)			
	copies of CFEIC			
	Inspection/	None		
	Evaluation Report.	None		Administrative
	Fill out complete			Assistant/ Aide
	details on the routing			(OCBO)
	slip and endorse it to			
	the Electrical			
	Engineer of			
	Inspection and			
	Enforcement Division			
	(IED) together with			
	the application form.			
	1.4 Conduct an			
	ocular inspection	None	2 working	Electrical
	within two (2) working		days	Engineer of
	days from the date of		-	IED (OCDO)
	application and			(OCBO)
	record the results of			
	the inspection and			
	recommendations on			
	the report.			
	1.5 Request the			Electrical
	applicant to sign in the			Engineer of
	report and furnish the			IED (OODO)
	applicant a copy of it.			(OCBO)
	1.6 Fill out the details			Electrical
	on the Routing Slip.			Engineer
				(OCBO)
1.1 Submit all the	1.7 Receive and check		1 hour	Administrative
necessary forms	the other required			Assistant/ Aide
and documents	documents from the			(OCBO)
required at OCBO	client. Prepare and			
Receiving	issue the			
Window	Acknowledgment			
	Receipt to the			
•		201	•	

1.2 Receive Acknowledgemen t Receipt (Wait for the results of evaluation within 3 working days)	applicant. Stamp the documents with "RECEIVED" and indicate the date of receipt. 1.8 Indicate the time	Administrative
	in and date on the Routing Slip. Endorse the application to the Electrical Engineer of IED for technical evaluation and the electrical layout to the BFP.	Assistant/ Aide (OCBO)
	1.9 Verify and evaluate the documents as to technical requirements.	Electrical Engineer of IED (OCBO) Building Plan Evaluator (BFP)
	1.10 Accomplish and sign the CFEIC Inspection/ Evaluation Report including electrical permits. Notes: *If the application is compliant to the National Building Code (P.D. 1096) and its Implementing Rules and Regulations, signs on the Certificate of Final Electrical Inspection/ Completion and Electrical Permit. *If the application is not compliant, record the findings	Electrical Engineer of IED (OCBO) Building Plan Evaluator (BFP)

	_		
in the Evaluation			
Report and the			
nonconformity in the			
Nonconforming			
Outputs Logbook.			
*If the applicant fails			
to comply with the			
technical			
requirements after a			
period of one (1)			
year, the application			
will be canceled by			
the Building Official.			
1.11 Fill out the			Electrical
Routing Slip			Engineer of IED
completely and			(OCBO)
endorse the			
applicant's			
documents to the			
Assessment Officer.			
1.12 Indicate the		1 hour	Assessment
time and date on the			Officer (OCBO)
Routing Slip, assess			
and indicate			
applicable fees in			
the order of			
payment in three (3)			
copies. For CEI			
fees, copy the			
assessment based			
on BFP's			
assessment form.			
1.13 Fill out the			Assessment
Routing Slip			Officer
completely and			(OCBO)
endorse the			
application to the			
OCBO Chief for the			
review.			A
1.14 Indicate the			Administrativ
time in and date on			e Assistant /
the Routing Slip			Aide (OCBO)
then endorse it to			
the IED Chief and			
OCBO Chief.			

	1.15 Review and		4 hours	IED Chief and
	approve the application, Certificate of Final Electrical Inspection/ Completion and Order of Payment			City Building Official
	1.16 Fill out completely the Routing Slip			Administrative Assistant / Aide (OCBO)
		None		
2. Present Acknowledgement Receipt to	Receive Acknowledgeme nt Receipt from the applicant and	Refer to Schedule of Fees	5 minutes	Administrative Assistant / Aide (OCBO)
the City Treasurer' s Office – Window 31)	issue the necessary documents to the applicant for payment to the City Treasurer's Office Order of Payment 2.1 Receive the documents from the client and check if the Order of Payment is signed by the authorized signatory 2.2 Encode the payment details and collect the correct amount of money from the client.	and other Charges of the Revised Implementi ng Rules and Regulation s (IRR) of the National Building Code of the Philippines (P.D. 1096) / Other Regulator y Fees / Ordinance s		Revenue Collection Clerk (CTO)
	2.3 Print the Official Receipt and fill out the Routing Slip completely.			Revenue Collection Clerk (CTO)

	2.3 Issue the Official Receipt together with the other documents to the OCBO Liaison Officer .			Revenue Collection Clerk (CTO)
3.Receive approved CFEIC and accomplish Client's Feedback Form then drop it in the Suggestion Box at OCBO Releasing Window	3. Receive from the CTO the documents and indicate the time in and date on the routing slip.	None	55 minutes	Administrativ e Assistant/ Aide (OCBO)
	3.1 Receive and attach the Certificate of Electrical Inspection including BFP's assessment to the application documents.			
	3.2 Encode details of application and payment on the logbook.	None		Administrative Assistant/ Aide (OCBO)
	3.3 Fill out all copies of Certificate of Final Electrical Inspection/ Completion, Electrical Permit and Electrical Layout.	None		Administrative Assistant/ Aide (OCBO)
	3.4 Stamp the electrical layout and application forms with "ISSUED" and indicate the date of issuance.	None		Administrative Assistant/ Aide (OCBO)

3.5 Segregate the approved Certificate of Final Electrical Inspection/ Completion into two (2) sets: Owner's Copy and Office File Copy.			Administrative Assistant/ Aide (OCBO)
3.6 Issue the approved documents to the applicant and request him to accomplish the previously issued feedback form/ acknowledgement receipt after which will be dropped accordingly by the applicant to the designated suggestion box.	None		Administrative Assistant/ Aide (OCBO)
3.7 Fill out the Routing Slip completely and request the applicant to sign on it to signify receipt of documents.	None		Administrative Assistant/ Aide (OCBO)
TOTAL:	Refer to Schedule of Fees and other Charges of the Revised Implementing Rules and Regulations (IRR) of the National Building Code of the Philippines (P.D. 1096) / Other Regulatory Fees / Ordinances	3 Working Days	



3. CERTIFICATE OF OCCUPANCY

The Office of the City Building Official is primarily responsible for the issuance of Certificate of Occupancy/Use before occupying a building or structure, as mandated by law. It is also a prerequisite/requirement in applying for OCBO clearance, Electric service connection and in order to avail the assistance of various financial institutions such as PAG-IBIG, BANKS, etc.

Office or Division:	Office of the City Building Official (OCBO) located at Plaza Vidal de Arrozal (Atrium), City Hall, City of San Fernando, Pampanga			
Classification:	Highly Technical			
Type of Transaction:		o Citizen / G2B – Government to Business /		
Type of Tranodonom	G2G – Government to			
Who may avail:	Citizen / Business / G			
CHECKLIST OF RI		WHERE TO SECURE		
1. Three (3) copies Unificate of Onotarized	• •	Office of the City Building Official (Receiving Window)		
2. Two (2) copies for each Certificates of Completion by the contractor (if the condentation of the completion o	on duly accomplished construction is and all originally architect or engineer n works: on-Building on-Sanitary/	Office of the City Building Official (Receiving Window)		
3. Construction Logbook originally signed and sea by the architect or engineers construction works	Sheet with Folder, all aled	Licensed Architect or Civil Engineer		
4. Two (2) copies of As-I specifications (if necessary originally signed and searchitect or civil engineer civil engineer in-charge and signed by the contraction is undertaked confirmed by the owner	ary), jointly and aled by the designing rand the architect or of the construction actor (if the	Licensed Architect or Civil Engineer		

5. One (1) Electronic copy of Photograph of the completed structures showing front, sides and rear areas (preferably *jpeg format)	Licensed Architect or Civil Engineer or Owner of the Property
6. One (1) copy of Valid Professional Licenses and Latest PTR with 3 specimen signatures, seal	Respective Professionals
7. Additional document/s required by the inspector/s as written on the Certificate of Occupancy/Use Joint Inspection Report, if necessary – to be submitted after the conduct of inspection	
8. One(1) copy Affidavit (change of in- charge of construction), duly notarized	Notarial Services
9. One (1) copy Corporate Secretary's Certificate, authorizing signatory	Owner of the Property
10. One (1) copy Special Power of Attorney/ Authorization Letter, if necessary	Owner of the Property
11. Any of the following will be required in cases when the applicant is not the registered owner (1 original copy) -Corporate Secretary's Certificate – for corporation -Special Power of Attorney Notarized Authorization Letter	
12. One (1) copy Fire Safety Inspection Certificate (to be facilitated by OCBO)	Bureau of Fire Protection (BFP)
13. Photocopy of Official Receipt of Building Permit Fee of Order of Payment for Building Permit, if applicable – for Building Permit applications in the year 2013 and below	
14. Photocopy of Official Receipt of Zoning/ Locational Clearance Fee or Zoning Certificate/ Locational Clearance, if applicable – for Building Permit applications dated September 2019 and below	
15.One (1) copy of DPWH Clearance for project along national roads	Department of Public Works and Highways (DPWH)

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit all the necessary forms and documents required at OCBO Receiving Window. 1.1 Receive Acknowledgement Receipt (Wait for the results of evaluation within 5 working days)	1. Check the required documents and encode application details in the receiving logbook. 1.1 Print Routing Slip, Acknowledgment Receipt, Evaluation – Nonconformity Compliance Sheet and Certificate of Occupancy/ Use Joint Inspection Report. 1.2 Stamp the completion forms and as-built plans with "RECEIVED" and indicate date of receipt. 1.3 Endorse the Certificate of Occupancy/ Use Joint Inspection Report to the JIT Leader for the conduct of inspection while the application documents will be endorsed to the BFP.	None		Administrative Assistant/ Aide (OCBO)
	1.4 Conduct of Joint Inspection within one (1) working day from the date of application and record the results of the inspection and recommendations on the report. Notes: If the applicant fails to comply with the technical requirements, conduct ocular inspection within five (5) working days	None	Within 1 working day	-Building Inspectors (OCBO) -Fire Safety Enforcer (BFP)

th pe th co -//	om the last day of the 30 days grace the status of the sta			
th jo cc O of or be -F	e regulatory offices, int inspection shall be onducted by the CBO and concerned ifice or the OCBO only as the case may			
co da re Le vic se sh th re	spection shall be onducted three (3) ays after the date of oceipt of the Demand etter. If Notice of colations will be erved, inspection hall be conducted aree (3) days after the oceipt of every orresponding notice.			
ap Co On In: fu of Ro ar ap to	5 Request the oplicant to sign on the pertificate of occupancy/ Use Joint spection Report and rnish him/ her a copy it. Fill out the outing Slip completely and endorse the oplicant's documents the technical valuators.	None		Building Inspector (OCBO)
ar Ro ar ar	6 Indicate the time in and date on the puting Slip. Verify and evaluate the plans and documents as to chnical requirements	None	10 hours (simple) / 32 hours (complex)	-Architect and Engineers (OCBO) and Building Plan Evaluator (BFP)

of their respective		
fields/ disciplines and		
fire safety		
-		
requirements.		
1.7 Accomplish and		
sign Evaluation Sheet		
and as-built plans (if		
any).		
Note:		
-If the application is		
compliant to the		
National Building Code		
(P.D. 1096) and its		
Implementing Rules		
and Regulations, signs		
on the Evaluation –		
Nonconformity		
_		
Compliance Sheet.		
-If the application is not		
compliant, record the		
findings in the		
Evaluation –		
Nonconformity		
Compliance Sheet and		
-		
the nonconformity in		
the Nonconforming		
Outputs Logbook.		
Nonconforming outputs		
shall be monitored		
within a period thirty		
(30) calendar days		
, ,		
after the technical		
deficiencies were		
communicated to the		
client.		
-If the applicant fails to		
comply with the		
technical requirements		
-		
after a period of thirty		
(30) calendar days, the		
inspector/s will conduct		
an ocular inspection.		
-If still noncompliant, a		
Demand Letter will be		
served.		
-Notice of Violations		

will be served if the applicant fails to comply after the issuance of a Demand Letter. Refer to procedures on OCULAR INSPECTION 1.4 -If the applicant fails to comply after the final notice of violation, the application will be endorsed to City Legal Office for appropriate legal actions.		
1.8 Fill out the Routing Slip completely and endorse the documents to the Administrative Aide.	None	Building Inspectors (OCBO) and Fire Safety Enforcer (BFP)
1.9 Fill out the Routing Slip completely and endorse the documents to the Administrative Aide.	None	Building Inspectors (OCBO) and Fire Safety Enforcer (BFP)
1.10 Indicate the time in and date on the Routing Slip and endorse to the Inspection and Enforcement Division Chief and City Building Official	None	Administrative Aide (OCBO)

	1.11 Review and approve the application and applicable permits.			Processing and Evaluation Division Chief and City Building Official (OCBO)
	1.12 Fill out completely the Routing Slip and endorses the applicant's documents to the Assessment Officer	None		Administrative Assistant/ Aide (OCBO)
	1.13 Indicate the time in and date on the Routing Slip, assess and encode all applicable fees. For FSIC fees, copy the assessment based on the BFP's assessment form.	None	1 hour (simple) / 2 hours (complex)	Assessment Officer (OCBO)
	1.14Review and approve of Assessment Slip and Order of Payment	None	2 hours (simple) / 6 hours (complex)	Processing and Evaluation Division Chief and City Building Official
	1.15 Fills out completely the Routing Slip and endorse to the Revenue Collection Clerk (CTO) together with the order of Payment.	None		Administrative Assistant/ Aide (OCBO)
2. Present Acknowledgem ent Receipt to the City Treasurer's Office – Window 31)	Receive Acknowledgement Receipt from the applicant. Retrieve the Order of Payment from file.	Refer to Schedule of Fees and other Charges of the Revised Implementi		

	2.2 Indicate the date and time on the Routing Slip and encode the payment details and collect the correct amount of money from the client. 2.3 Print the Official Receipt and fill out the Routing Slip completely.	ng Rules and Regulation s (IRR) of the National Building Code of the Philippines (P.D. 1096) / Other Regulatory Fees / Ordinance s	10 minutes	Revenue Collection Officer/ Clerk (CTO)
	2.4 Issue the Official Receipt together with the applicable Routing Slip and Order of Payment to the client.			
3. Present Routing Slip, Order of Payment and	3. Receive from the CTO the Routing Slip, Order of Payment	None	2 hours (simple) / 6 hours (complex)	Administrative Assistant/ Aide (OCBO)
Official Receipt to OCBO Releasing Window and accomplish Client's Feedback Form	and the Official Receipt.			
4.Receive approved Certificate of Occupancy/ Use and drop Client's Feedback Form in the Suggestion Box at OCBO	3.1 Prints the Certificate of Occupancy/ Use in two (2) copies.	None		

Dalamata Maria	0.0 D	
Releasing Window	3.2 Receive and attach the Fire Safety Inspection Certificate and other documents from the BFP to the application documents.	None
	3.3 Sign the Certificate of Occupancy/ Use. Note: Thorough review of application was already carried out during the Technical Evaluation procedures. 3.4 Encode details of application and payment on the logbook. 3.5 Stamp the plans and application forms with "ISSUED" and indicate the date of issuance.	None
	issuarice.	None
	3.6 Segregate the approved Certificate of Occupancy/ Use into three (3) sets: Owner's Copy, Office File Copy.	None
	3.7 Issue approved Certificate of Occupancy/ Use and request him/ her to accomplish the previously issued feedback form/ acknowledgement receipt after which will be dropped accordingly by the applicant to the designated suggestion box.	None

3.8 Fill out the Routing Slip completely and request the applicant to sign on it to signify receipt of documents.	None		
TOTAL:	Refer to Schedule of Fees and other Charges of the Revised Implementin g Rules and Regulation s (IRR) of the National Building Code of the Philippines (P.D.1096) / Other Regulatory Fees / Ordinances	3 Working Days (simple application) / 7 Working days (complex applications)	



4. ANNUAL INSPECTION CERTIFICATE & CERTIFICATE OF OPERATION

The Office of the City Building Official is primarily responsible for the issuance of Certificate of Annual Inspection & Certificate of Operation, as mandated by law particularly the National Building Code (P.D. 1096) and other referral codes in order to promote public safety, order and welfare towards a sustainable and sound environment catering to City of San Fernando's development.

Office or	Office of the City Building Official (OCBO) located at Plaza Vidal de Arrozal			
Division:	(Atrium), City Hall, City of San Fernando, F	Pampanga		
Classification:	Simple			
Type of	G2C – Government to Citizen / G2B – Gov	ernment to Business / G2G -		
Transaction:	Government to Government			
Who may avail:	Citizen / Business / Government			
CHECKLIS	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
	One (1) copy of fully accomplished form of Annual Inspection Establishment Data(for Annual Inspection only) OCBO			
One (1) copy of Inspection Report (Annual Inspection/Certificate of Operation)				
Two (2) copies of Certification/s from professional/s as				
indicated in the I	nspection Report	Duly Licensed Professional/s		
-Note other docu	ments may be required by the inspector	hired by the Applicant		
base on the condu	ucted inspection.			

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit all copies of documents at the OCBO Receiving Window.	Check the completeness of the required documents and prepare the Routing Slip, Evaluation Report & Acknowledgement Receipt. Stamp Certifications and other required documents with "RECEIVED" and indicate date received and signed. Sign on the routing slip endorse documents to the I.E.D. Inspector/s.	None	10 minutes	Administrative Assistant/ Aide (OCBO)

Γ.	Т		T	<u></u>
Rece the a	owledgement ipt/Feedback to pplicant.			
Routi	mplish the ng Slip with & Time In.			
	are certificates issued.			
Evalu Form			1 day (8 hours)	I.E.D. Inspector/s (OCBO)
with I Out.	p Routing Slip Date & Time			(3 - 3)
docu Inspe Enfor Divis	rse all ments to the ection and cement ion Chief for			
Routi	w. mplish the ing Slip with & Time In.		15 minutes	Inspection and Enforcement
Revie document and record	ew all ments, findings nmendations	None		Division Chief (OCBO)
Acco	oproval. mplish the	None		
	ng Slip with & Time Out.		15 minutes	Inspection and Enforcement
docu	rse the ments to the ssment Officer.			Division Chief (OCBO)
Routi	mplish the ng Slip with & Time In.			
on th	ss fees based e documents nitted.			
copie	are three (3) es of the Order yment then	None	10 minutes	Assessment Officer (OCBO)

	Accomplish the Routing Slip with Date & Time Out. Endorse the documents to the City Building Official for approval.			
	Accomplish the Routing Slip with Date & Time In.			
	Review all documents, findings and sign on the Certificate/s to be issued.	None	10 minutes	City Building Official
	Fill-up Routing Slip with Date & Time Out.			
	Endorse three (3)copies of Order of Payment and the Routing Slip to the City Treasurer's Office for payment			
2. Present Acknowledgement	Retrieve documents			
Receipt to the City Treasurer's Office – Window 31)	Collect the amount of corresponding fees and accomplish the Routing Slip with Date & Time In. Prepare the Official Receipt and fill out the Routing Slip with Date & Time Out	Refer to the Assessment Slip issued by the DOLE Regional Office	15 minutes	Revenue Collection Officer/ Clerk (CTO)
	Endorse the documents to the OCBO Releasing Clerk			

	Indicate the time in and date on the Routing Slip. Accomplish certificates with payment details and stamp "Issued" with the date of Issuance and sign. Encode payment details on the Issuance Logbook Accomplish the Routing Slip with Date & Time Out.	None	15 minutes	Administrative Assistant/ Aide (OCBO)
3. Receive documents from the Releasing Clerk	Issue one copy each of Certificate/s, Order of Payment, Official Receipt and Certifications. Inform the client to accomplish the Feedback Form and sign on the issuance logbook.	None	5 minutes	Administrative Assistant/ Aide (OCBO)
		Refer to Schedule of Fees and other Charges of the Revised Implementin g Rules and Regulations (IRR)	Maximum of Three (3) Working Days (Simple application)	Note: Inspection will be excluded in processing of certificate/s. (Ocular Inspection / Saturation)
TOTAL		1 day, 1 hou	& 25 minutes	

5. DOLE PERMIT TO OPERATE - PAYMENT

The Office of the City Building Official is primarily responsible for the collection of feedback DOLE – PERMIT TO OPERATE, in compliance with memorandum of agreement between The Ministry of Labor (DOLE) and The Ministry of Public Works (DPWH) effective April 15, 1980.

Office or Division:	Office of the City Building Official (OCBO) located at Plaza Vidal de Arrozal (Atrium), City Hall, City of San Fernando, Pampanga		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizen / G2B – Government to Business		
Who may avail:	Citizen / Business		
CHECKLIST OF REQUIREMENTS WHERE TO SECUR			
DOLE - Permit to Operate Assessment Slip - Two (2) copies of Assessment Slip (1 original & 1 photocopy)		DOLE Regional Office 3	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit all copies of the Assessment Slip at OCBO Receiving Window.	Check the completeness of the required documents and prepare the Routing Slip, Acknowledgement Receipt & three copies of Order of Payment. Accomplish the Routing Slip with Date & Time In.		10 minutes	Administrative Assistant/ Aide (OCBO)
	Issue Acknowledgement Receipt/Feedback to the applicant.			
	Sign on the routing slip and endorse it to the Assessment Officer for review. Review all documents and sign on the Order of	None		
	Payment. Accomplish the Routing Slip with Date & Time Out.		5 minutes	Assessment Officer (OCBO)

	Endorse all documents to the available Division Chief or higher authority for approval of payment. Accomplish the Routing Slip with			
	Date & Time In. Review all documents and sign on the Order of Payment.		4 minutes	Building Official, Division Chief or any with higher authority (OCBO)
	Accomplish the Routing Slip with Date & Time Out.	None	4 minutes	Building Official, Division Chief or any with higher authority (OCBO)
	Endorse three (3)copies of Order of Payment and the Routing Slip to the City Treasurer's Office for payment.		1 minutes	Administrative Assistant/ Aide (OCBO)
2. Present Acknowledgement Receipt to the City Treasurer's Office – Window 31)	Accomplish the Routing Slip with Date & Time In. Collect the amount of corresponding fees then Fill out the Routing Slip completely and issue the acknowledgement receipt / feedback to the applicant. Prepare the Official Receipt and fill out the Routing Slip Endorse the documents to the OCBO Releasing Clerk	Refer to the Assessment Slip issued by the DOLE Regional Office	5 minutes	Revenue Collection Officer/ Clerk (CTO)

Indicate the time in and date on the Routing Slip. Stamp the DOLE Assessment Slip with "RECEIVED" and indicate the date of receipt then sign.	None	3 minutes	Administrative Assistant/ Aide (OCBO)
Encode details on the DOLE-PTO Payment Issuance Logbook Accomplish the Routing Slip with Date & Time Out.	None	3 minutes	Administrative Assistant/ Aide (OCBO)
	Refer to the Assessment Slip issued by the DOLE Regional Office In compliance with memorandu m of agreement between The Ministry of Labor (DOLE) and The Ministry of Public Works (DPWH) effective April 15, 1980	Maximum of Three (3) Working Days (Simple application)	
	TOTAL:	30 minutes	



6. NOTICE OF VIOLATIONS

The Office of the City Building Official is primarily responsible for monitoring all construction activities within the City of San Fernando as mandated by law particularly the National Building Code (P.D. 1096), in order to promote public safety, order and welfare towards a sustainable and sound environment catering to City of San Fernando's development.

Office or	Office of the City Building Official (OCBO) located at Plaza Vidal de		
Division:	Arrozal (Atrium), City Hall,	City of San Fernando, Pampanga	
Classification:	Simple		
Type of	G2C – Government to Citizen / G2B – Government to Business		
Transaction:	G2C = Government to Citizen / G2B = Government to Business		
Who may	Citizen / Business		
avail:	Citizett / Dusitiess		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Two (2) copies of Notice of Violation(s) (1 original & 1 photocopy)		Client	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
Submit all copies of the Notice of Violation(s) at OCBO Receiving Window.	Check the completeness of the required documents and prepare the Routing Slip, Acknowledgement Receipt. Accomplish the Routing Slip with Date & Time In. Issue Acknowledgement Receipt/Feedback to the applicant.		10 minutes	Administrative Assistant/ Aide (OCBO)
	Sign on the routing slip and endorse it to the Assessment Officer for review. Review all documents and sign on the Order of Payment. Accomplish the Routing Slip with Date & Time Out.	None	5 minutes	Assessment Officer (OCBO)

	Endorse all documents to the available Division Chief for review of payment.			
	Accomplish the Routing Slip with Date & Time In. Review all documents and sign on the Order of Payment. Accomplish the Routing Slip with Date & Time Out. Endorse all documents to the City Building Official		5 minutes	Division Chief (OCBO)
	for approval of payment.			
2. Present Acknowledgement Receipt to the City Treasurer's Office – Window 31)	Accomplish the Routing Slip with Date & Time In. Collect the amount of corresponding fees. Prepare the Official Receipt and fill out the Routing Slip Endorse the documents to the OCBO Releasing Clerk	Refer to the Assessme nt Slip issued by the DOLE Regional Office	5 minutes	Revenue Collection Officer/ Clerk (CTO)
	Indicate the time in and date on the Routing Slip. Encode details on the Issuance Logbook Accomplish the Routing Slip with Date & Time Out.	None	3 minutes	Administrative Assistant/ Aide (OCBO)
3. Receive documents from the Releasing Clerk	Issue one copy of Order of Payment, Official Receipt and original copy of Notice of Violation(s).	None	2 minutes	Administrative Assistant/ Aide (OCBO)

Inform the client to accomplish the Feedback Form and sign on the issuance logbook.	Refer to Schedule of Fees and other Charges of the Revised Implementi ng Rules and Regulations (IRR) of the National Building Code of the Philippines (P.D. 1096) / Other Regulatory Fees / Ordinances	Working Days (Simple application	Note: 1) Applicable only for saturated illegal structures/construct ions. 2)Fines under BAA,Occ & CFEIC will be included in respective processes' Order of Payment
TOTAL		30 minutes	

7. DOCUMENT/CERTIFICATION REQUESTS



The Office of the City Building Official is directly responsible for the issuance of Certified True Copy of documents to affirm the authenticity of the construction-related record/information of an individual/structure/building

Office or Division:	Office of the City Building Official (OCBO) located at Plaza Vidal de Arrozal (Atrium), City Hall, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Government to G2G - Government to G	Citizen / G2B – Government to Business / Government			
Who may avail:	Citizen / Business / Gov	vernment			
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE			
One (1) copy of full Document/Certification R	-	OCBO			
Authorization Letter/Secreta applicant is not the docume	ent owner. / duly notarized proof .e. Deed of	Document Owner			
One (1) photocopy of valid government issued ID of the applicant/representative. One (1) copy of issued company ID if document is owned by a group/company/corporation.		Applicant/Representative			
Photocopies of issued documents (permits/plans/forms) if requesting for Certified True Copy only.		Document Owner			
- Note that the office cannot certify a true copy any kind of document that was produced by other government agencies or private group/entities.		Issuing Agency			

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit all	1.1 Check the			
copies of	completeness of the			
documents at the	required documents			
OCBO Receiving	and prepare the			
Window.	Routing Slip &			
	Acknowledgement			
	Receipt.		40 minutes	
	1.2 Stamp the		10 minutes	
	Request Form with			Administrative
	"RECEIVED" and			Assistant/ Aide
	indicate date			(OCBO)

	received and sign.			
	1.3 Sign on the			
	routing slip endorse			
	to the Records			
	Officer for records			
	validation.	NONE		
	1.4 Issue			
	Acknowledgement			
	Receipt/Feedback			
	to the applicant.			
	1.5 Accomplish the			
	Routing Slip with			
	Date & Time In.			
	1.6 Verify given			
	data through			
	records.			
	1.7 Accomplish			Records Officer
	Request Form		1 day (8 hours)	Records Officer
	findings.			
	1.8 Fill-up Routing			
	Slip with Date &			
	Time Out.			
II	1.9 Endorse all			
	documents to the			
	Administrative and			
	Records			
	Management Chief			
	for review.			
	1.10 Accomplish			
	the Routing Slip			
	with Date & Time			
	In.			
_	1.11 Review all			
	documents, findings			
	and recommend			
	type of document to			
	be issued on the	NONE	15 minutes	A alma imi a trua tir caracter
	Request Form.			Administrative and
l	•			Records Management Chief
	1.12 Print/Prepare the requested			Management Chief
	document if			
	available or a denial			
	letter if any			
	deficiency was			
	found. (Stamp			
	"Certified True			
	Copy" for C.T.C.			
	requests)			
	1.13 Accomplish			
	the Routing Slip			

	with Date & Time			
	Out.			
	1.14 Endorse the			
	documents to the			
	Assessment Officer			
	for assessment			
	1.15 Accomplish			
	the Routing Slip			
	with Date & Time	NONE	10 minutes	Assessment Officer
	In.			
	1.16 Assess fees			
	base on the			
	documents			
	submitted.			
	1.17 Prepare three			
	(3) copies Order of			
	Payment then sign.			
	1.18 Accomplish			
	the Routing Slip			
	with Date & Time			
	Out.			
	1.19 Endorse the			
	documents to the			
	City Building Official			
	for approval.			
2. Present				
Acknowledgment	2.1 Retrieve			
Receipt to the City	documents			
Treasurer's Office				_
– Window 31)	2.2 Accomplish the	Refer to the		Revenue Collection
	Routing Slip with	Assessment		Officer/ Clerk (CTO)
	Date & Time In.	Slip issued	_	
	2.3 Collect the	by the DOLE	15 minutes	
	amount of	Regional		
	corresponding fees	Office		
	then Fill out			
	completely the			
	Routing Slip and			
	issue the			
	acknowledgement			
	receipt / feedback			
	to the applicant.			
	2.4 Prepare the			
	Official Receipt and			
	fill out the Routing			
	fill out the Routing Slip with Date &			
	fill out the Routing Slip with Date & Time Out			
	fill out the Routing Slip with Date &			

	OCBO Releasing			
	Clerk			
	2.6 Indicate the			
	time in and date on			
	the Routing Slip.			Administrative
	2.7 Stamp		15 minutes	Assistant/ Aide
	documents with app		13 minutes	(OCBO)
	and indicate the	NONE		
	date of receipt then			
	sign.			
	2.8 Encode	-		
	payment details on			
	the Issuance			
	Logbook			
	2.9 Accomplish the	-		
	Routing Slip with			
	Date & Time Out.			
3. Receive	3.1 Issue one copy			Administrative
documents from	of Order of			Assistant/ Aide
	Payment, Official			(OCBO)5 minutes
the Releasing Clerk				(0000)0
Cierk	Receipt and the			
	document			
	requested. 3.2 Inform the client			
	to accomplish the			
	Feedback Form and			
	sign on the			
	issuance logbook.	Refer to	Maximum of	
		Schedule of		
			Three (3)	
		Fees and	Working Days	
		other Charges	(Simple	
		of the Revised	application)	
		Implementing		
		Rules and		
		Regulations		
		(IRR)		
		of the National		
		Building Code		
		of the		
		Philippine s		
		(P.D.		
		1096) /		
		Other		
		Regulatory		
		Fees /		
	TOTAL	Ordinances	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
	TOTAL		1 day, 1 hour	
			& 25minutes	



City Environment and Natural Resources Office

External Services



1. ISSUANCE OF CERTIFICATE OF NO OBJECTION

Securing certification that interposes no objection to the trimming, pruning, earth balling or cutting of trees as a requirement for the permit to be issued by PENRO-DENR.

Office or Division:	City Environment and	Natural Resources Office (CENRO), Left	
Office of Division.	Wing, Ground floor, Heroes Hall		
Classification:			
	Highly Technical G2C – Government to Citizen		
Type of Transaction:	G2C	Citizen	
	All		
Who may avail:	OF REQUIREMENTS	WHERE TO SECURE	
		WHERE TO SECURE	
A. For trees located w a.1 Copy of receive		From the property owner	
PENRO-DENR for trir		r form the property owner	
balling or cutting of t			
property owner for va			
certification that interp			
the trimming, prunir			
cutting of trees.	.g, cacag c.		
a.2 Barangay Certific	ation that interposes	Barangay Hall	
no objection to the trir	•		
balling or cutting of tre	ees.		
a.3 Homeowners Ass	ociation's certification	Homeowners Association	
that interposes no obje	ection to the trimming,		
pruning, earth balling			
(Note: if property is with			
a.4 Location map/ske		From the applicant as submitted to	
a.5 Certified true of	copy of TCT from	PENRO-DENR	
Registry of Deeds.			
a.6 Pictures of affecte			
a.7 Care and maint	tenance Plan (earth		
balling)	مط النب مممسة مطة مسمطي		
a.8 Location map to w			
transferred (earth balli	ng)		
B. For trees loc	cated within public		
school/public place	bated within public	From the school	
b.1 Copy of receive	d letter request for	1 13.11 1110 0011001	
PENRO-DENR for trir	•		
balling or cutting of t	O' .		
school requesting for			
interposes no object			
pruning, earth balling			
b.2 Barangay Certific		Barangay Hall	
no objection to the trir		_ 3 3 ga j a	
balling or cutting of tre	· ·	DepEd/PTA	
b.3 DepEd and PT/	A's certification that		

interposes no objection to the trimming, pruning, earthballing or cutting of trees. b.4 Pictures of affected trees. b.5 Location map/sketch of the trees.

From the applicant as submitted to PENRO-DENR

b.6 Care and maintenance Plan (earth balling) b.7 Location map to where the trees will be

transferred(earth balling)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Prepare and submit the requirements to the CENR Office to avail the service and wait while application is being processed	1.Check the submitted documents and ensure the completeness of the requirements.	None	10 minutes	Admin. Officer IV/ EMS I (City Environment and Natural Resources Office)
	1.2 Encode pertinent documents to the Documents Monitoring before endorsing it to the responsible unit.	None	5 minutes	Admin. Officer IV/ EMS I (City Environment and Natural Resources Office)
	1.3 Inspect the affected trees and verify the validity of the request.	None	4 working days after the receipt of complete requireme nts in the office.	EMS I (City Environment and Natural Resources Office)
	1.4 Prepare the Certificate of No Objection for trimming, pruning, earth balling or cutting of trees.	None	20 minutes	EMS I (City Environment and Natural Resources Office)

	1.5 Final Review and approval of the Certificate of No Objection	None	5 working days	Admin. Aide VI/ EMS I (City Environment and Natural Resources Office) City Administrator (City Administrator 's Office)
Receive the Certificate of No Objection	2. Release the Certificate of No Objection to the requesting party	None	10 minutes	Admin. Aide VI/ /EMS I (City Environment and Natural Resources Office)
	TOTAL:	None	9 working days and 45 minutes	,

2. PROCESSING OF ENVIRONMENTAL MANAGEMENT PERMIT (WITH VIOLATION)



The City Environment and Natural Resources Office ensures the processing of Environmental Management Permit (EMP).

Office on Divisions	Oit En income the INC	l D	055	DENIDO) I (CAP)
Office or Division:	City Environment and Natural Resources Office(CENRO), Left Wing			
01 '(' ('	Ground floor, Heroes Ha	II		
Classification:	Simple	·	***	
Type of Transaction:	G2B – Government to Bo	usiness Er	ntity	
Who may avail:	All			
	OF REQUIREMENTS		WHERE TO) SECURE
1. Application Fo		Busines		Permit Division
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Prepare the requirements to avail the service and accomplish the application form	1. New: Receive Application Form for business with complete requirements and fill out the routing slip. Renewal: Receive Application Form for business and review the submitted documents For applications that are included in the negative	None	10 minutes	Administrative Aide VI (City Environment and Natural Resources Office)
1.1 Attend the set schedule for the seminar at CENRO Left Wing Ground floor, Heroes Hall	list: verify the violation in the CENRO system. Depending on the violation, the client will be either advised to; 1.1. Proceed at CENRO to a specific schedule to attend a seminar of which the client will then be issued a certificate as well as the clearance slip as proof of compliance to be presented at BLPD. An order of payment will be issued to the client for this purpose. 1.2 Receive payment	None	2 hours	Administrative Aide VI (City Environment and Natural Resources Office)
1.2 Pay the Corresponding	and issue Official Receipt			

penalty at the City Treasurer's office (CTO), window 9.	* Please see attached table for the corresponding violation and its corresponding fees.	None	5 minutes	Local Revenue Collection Officer I (City Treasurer's
1.3 Present the official receipt to CENRO personnel assigned at BLPD office	1.3 The official receipt will then be presented to CENRO for the preparation of Clearance Slip as proof of compliance to be presented at BLPD Once already compliant,	None	5 minutes	Office) Administrative Aide VI (City Environment and Natural Resources Office)
located at Vidal de Arrozal (atrium)	update system to reflect the status of compliance of the client.			
	2. Encode pertinent data and information on the CENRO database system.	None	5 minutes	Administrative Aide VI CENRO
	3.1 For New Application; joint inspection is conducted every 8:00 am and 1:00 pm			
	3.2 For Renewal Application: are subject to year- round inspection	None	New-1 day Renewal- year round	EMS II (City Environment and Natural Resources Office)
	3.3 Verify the inspection conducted and sign the submitted reports.		1 day	Head/Inspection
	3.4 Review and approve the inspection conducted and sign the reports.		1 day	Team leader
	4. Filling Consolidate and file all approved inspection reports separately for new and renewal applications	None	Daily	CENR Officer EMS II (CENRO)
	TOTAL:	Refer to the table below	2 hours and 25 minutes	

	Violation/s	Fines
Plastic	Providing Plastic Sando Bag	First offense :
Free	Providing Plastic Labo for Dry	Warning with compulsory attendance
Ordinanc	Goods	to a Values Formation Seminar
e 2014-		Second Offense:
008	Using Styro Packaging for Food Products	
000	Food Floducis	A fine of Php 1,000.00
		Third Offense:
		A fine of Php 3,000.00
		Fourth and Succeeding Offense:
		Cancellation of Business Permit
City Ordinance	Non- segregated waste or	First offense :
No. 2002-002:	mixed waste	A fine of Php 500.00
CSF	Dirty frontage and immediate	Second Offense:
Solid	surroundings	A fine of Php 700.00
Waste	Improper and untimely storing	Third Offense:
Managem	of garbage outside residence	A fine of Php 1,000.00
ent	or garbage careful recisiones	Fourth Offense:
Ordinance		A fine of Php 1,500.00
		Fifth Offense:
O'to o Onell'or a cons	On an house's material description	A fine of Php 2,500.00
City Ordinance	Open burning of solid waste	First offense :
No. 2008-021:		A fine of Php 300.00 or imprisonment(1-
Environmental		15 days)
Code of the		Second Offense:
CSFP		A fine of Php 600.00 or imprisonment(1-
		15 days)
		Third Offense:
		A fine of Php 1,000.00 or
		imprisonment(1-15 days)
	Causing or permitting the	First offense :
	collection of non-	A fine of Php 1,000.00 or
	segregated waste	imprisonment(15 days-6 mos)
	Jogarda Wadio	Second Offense:
		A fine of Php 2,000.00 or
		imprisonment(15 days-6 mos)
		Third Offense:
		A fine of Php 3,000.00 or
		imprisonment(15 days-6 mos)
	Littering, throwing, dumping of	First offense :
	waste in public place such as	A fine of Php 300.00 or
	roads, side walks, canals,	community service(1-15 days)
	esteros and establishments	Second Offense:
	Coleido and establistificilis	
		A fine of Php 600.00
		community service(1-15
		days)
		Third Offense:
		A fine of Php 1,000.00
		community service(1-15 days)

City Ordinance No. 2008-021: Environmental Code of the CSFP	Discharging, wholly of partially, untreated or inadequately treated industrial effluents into city waters, waterways - causing aquatic pollution	First offense: A fine of Php 5000.00 Second Offense: Imprisonment
City Ordinance No. 2004-010: Ecological Solid Waste Management Inspection Clearance for Commercial, Industrial, Institutional and Agricultural Establishments	Unclean and unsanitary conditions of the establishments facilities and premises Mixed waste: biodegradable, recyclable and residual waste /hazardous waste (if any) Without/unmarked waste bins for biodegradable ,recyclable and residual waste Improper and untimely storing of garbage outside establishments prior to the arrival of garbage truck Without septic tanks, sewerage system and liquid wastes treatment facilities Without protective equipment for workers ,especially those that are handling solid/hazardous waste	First offense: A fine of Php 2000.00 Second Offense: A fine of Php 3500.00 Third Offense: A fine of Php 5,000.00 & Cancellation of Business Permit



3. PROCESSING OF ENVIRONMENTAL MANAGEMENT PERMIT (WITHOUT VIOLATION)

The City Environment and Natural Resources Office ensures the processing of Environmental Management Permit (EMP).

Office or Division:	City Environment and Natural Resources Office(CENRO),Left Wing Ground floor, Heroes Hall					
Classification:	Simple					
Type of Transaction:	G2B – Government t	o Busine	ess Entity			
Who may avail:	All					
	REQUIREMENTS		WHERE TO			
Application Forr	n for Business		ss License and F	Permit Division		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Prepare the requirements to avail the service and accomplish the application form at the Business One Stop Shop	New: Receive Application Form for business with complete requirements and fill out the routing slip. Renewal: Received	None	10 minutes	Admin Aide VI (City Environment and Natural Resources Office)		
	Application Form for business Review the submitted documents.					
2. Wait while the application is being processed at the BOSS	2.					
	Encode pertinent data and information on the CENRO database system.	None	5 minutes	Admin Aide VI (City Environment and Natural Resources Office)		

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	3. For New Application; joint inspection is conducted every 8:00 am and 1:00 pm. For Renewal Application: are subject to year- round inspection	None	New-1 day Renewal- year round 1 day	EMS II (City Environment and Natural Resources Office)
	3.1 Verify the inspection conducted and sign the submitted reports.		1 day	Head/Inspectio n Team leader CENR Officer
	3.2 Review and approve the inspection conducted and sign the reports.			
	4. Filling Consolidate and file all approved inspection reports separately for new and renewal applications	None	Daily	EMS II (City Environment and Natural Resources Office)
	TOTAL:	No ne	15 minutes	



4. SALE OF COMPOST FERTILIZER

The City Environment and Natural Resources Office offer/sell compost fertilizer made from collected biodegradable wastes from the 2 public markets.

Office or Division:	City Composting Center, City Environment and Natural Resources Office (CENRO), CGSO Compound, NPM, Del Pilar, CSFP				
Classification:	Simple				
Type of Transaction:	G2C – Governm	ent to Citizer	1		
Who may avail:	All	_			
CHECKLIST OF REC			WHERE TO	SECURE	
1.Official Receipt (1 origina 2. Purchase order form duplicate)	,	City Treasurer's Office Window 1		/indow 1	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE	
Accomplish the order of payment form at City Treasurer's Office, Window 5, City Hall main lobby.	1. Receive the order of payment form and verify the order	None	5 minutes	Local Revenue Collection Officer I (City Treasurer's Office)	
2. Pay corresponding amount to City Treasurer's Office, Window 5, City Hall main lobby.	2. Receive payment and prepare Official receipt.	350.00/ sack	5 minutes	Local Revenue Collection Officer I (City Treasurer's Office)	
3. Present the order of payment form and official receipt to City Composting Center personnel at CGSO Compound, NPM, Del Pilar, CSFP	3. Verify the receipt and will issue the ordered organic compost	None	5 minutes	Foreman II (City Environment and Natural Resources Office)	
	TOTAL	350.00/ sack	15 minutes		



City Assessor's Office

External Services



1. SECURING ASSESSMENT FOR DECLARATION OF NEW / RENOVATED / DEPRECIATED BUILDINGS AND MACHINERIES

New tax declarations have to be prepared for newly constructed houses or buildings and newly installed machinery. Physical change on the existing structure of a house or building should be declared.

Office/Division	City Assessor's Office (1st floor Bulwagang Mariano Leon Santos Hall, beside Plaza Vidal De Arrozal – Atrium)				
Classification	Simple				
Type of Transaction	G2C, G2B and G2G				
Who may Avail	Real Property Owners and their Authorized Representatives (whose real property is within the jurisdiction of the city)				
CHECKLIST OF REQU	IREMENT	WHERE TO SECURE			
General Requirements					
Accomplished Application	Form	Real Property Owner / City Assessor's Office			
Request Letter		Real Property Owner			
For Real Property Owner *Photocopy of Valid ID		Real Property Owner			
*Authorized Represent *Authorization Letter *Photocopy of Owner's and Representative's ID		Real Property Owner			
For Buildings					
Photocopy of RP Tax Receipt or RP Tax Clearance for the current year 1 copy		Windows 39 to 42 of Land Tax Division – City Treasurer's Office Windows 31 and 30 of Land Tax Division – City Treasurer's Office			
Copy of Building Plans (if a	any) 1 copy	Office of the City Building Official / Civil Engineer / Contractor			
Copy of Title (if any) 1 cop	У	Real Property Owner / Registry of Deeds			
Copy of Vicinity Map 1 cop	y (if any)	Geodetic Engineer			
Copy of Building Permit (if 1 copy	necessary)	Office of the City Building Official			
Copy of Occupancy Permit necessary) 1 copy	t (if	Office of the City Building Official			
For Machinery					
Notarized Sworn Statemen Current and Fair Market Va Properties 1 copy		Form – City Assessor's Office (Window 24) / Real Property Owner			

Official Receipt of the machineries upon purchase 1 copy (if necessary)	Real Property Owner
Itemized List of Machineries 1 copy (if Applicable) (notarized if necessary)	Real Property Owner

CLIENT STEP	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1.Get a queuing number in the monitor and Fill out application form provided at the City Assessor's Clients Lounge and wait for the number to be called	1. Call the queuing number	None	None	Local Assmt Operations Off III or Local Assmt Operations off II or Assessment Clerk II (Assessment Evaluation Division) CASSO
2. Submit the Documentary Requirements and the Queuing Slip to Window 19 or 20	2. Verify and evaluate requirements	None	20	Local Assmt Operations Off III or Local Asst Operations off II or Assessment Clerk II (Assessment Evaluation Division) CASSO
3.Wait while the personnel receive the documents and accept the queuing slip that will be issued	3. Receive and input necessary information in the system and issue 2 nd part of the queuing slip	None	minutes	Local Assmt Operations Off III or Local Asst Operations off II or Assessment Clerk II (Assessment Evaluation Division) CASSO

4.Go to Land Tax Division (window 30 & 31) to pay the necessary fees and get the Official Receipt that will be issued and Return to City Assessor's Office Window 19 or 20 for the next step	4. Receive payment; Print and issue official Receipt	Inspection fee PhP200.00 per visit (within reglementary period) or PhP300.00 per visit (beyond the reglementary period) Declaration Fee PhP50.00 Certified True Copy Tax Declaration PhP50.00	5 minutes	Local Revenue Collection Officer III (Treasurer's Office)
5. Submit the Official Receipt at Window 19 or 20 and Receive the acknowledgement receipt	5. Receive the Official Receipt; Schedule the date of Inspection and issue acknowledgemen t receipt	None	16	Local Assmt Operations Off III or Local Asst Operations off II or Assessment Clerk II (Assessment Evaluation Division) CASSO
6. Assist the inspectors on site	6. Conduct ocular inspection and prepare Field Appraisal & Assessment Sheet (FAAS) report	None	working hours	Local Assessment Operations Officer III or Local Assessment Operations Officer II or Assessment Clerk II (Appraisal And Assessment Division) CASSO
7. Wait and Return to Window 19 or 20 of the City Assessor's Office on the specified Due Date for Releasing	7.1 Appraise and Assess and approve the FAAS Report	None	6 working hours	Local Assessment Operations Officer III (Appraisal And Assessment Division and Assessment Evaluation Division) and Asst. City Assessor And/or City Assessor (CAssO)

	7.2 Encode the data and print the assessment documents	None	1 hour and 30 minutes	Local Assessment Operations Officer III, or Local Assessment Operations Officer II or Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
	7.3 Approve the Assessment documents	None		City Assessor or Asst. City Assessor or Local Assessment Operations Officer III CAssO
8. Receive the Tax Declaration and Notice of Assessment	8. Release the Assessment documents	None	5 minutes each document	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) CASSO
	Total	PhP300.00 if within reglementar y period or PhP400.00 if beyond reglementar y period	3 working Days	Per Real property Unit

- *Reglementary period within 60 days upon completion or occupancy of the improvement (building) whichever comes first
- * In cases when RPUs are more than three (3) in a transaction, the processing time of additional one (1) day per three (3) RPUs shall be applied.
- * Waiting time accountable to clients such as preparation of payment for fees, completion of additional requirements among others are not included in the measurement of processing time.
- * The scheduled date of inspection is on the following day of the application, In cases the property owner/authorized representative is not available, an agreed date of inspection will be set. The Idle time after the payment of fees up to the date of scheduled inspection is not included in the measurement of the processing time

2. SECURING ASSESSMENT FOR DECLARATION OF SUBDIVISION / CONSOLIDATION OF LAND

The City Assessor's Office maintains Assessment Records of all property, whether taxable or exempt, located within the City. Every property owner must declare his/her property subdivided or consolidated with other lots for the updating of the assessment records.

Office/Division	•	Office (1st Floor Bulwagang Mariano Leon Santos Hall,			
	beside Plaza Vid	al De	e Arrozal – Atriu	um)	
Classification	Simple				
Type of Transaction	G2C, G2B and G	2G			
Who may Avail	Real Property Over property is within			•	ntatives (whose real
CHECKLIST OF RI				HERE TO SEC	JRE
	Gei	nera	I Requirement	S	
Accomplished Applica	ation Form	Rea	al Property Owr	ner / City Assess	or's Office
Photocopy of the New Certificate of Title/s of Copy (Original Copy for 1 copy	Certified True			ner / Registry of	
Donation/Extra Judicia Estate / Subdivision a	Photocopy of Deed of Sale/Deed of Donation/Extra Judicial Settlement of Estate / Subdivision agreement or Any legal document to prove		Real Property Owner / Registry of Deeds		
Photocopy of RP Tax RP Tax Clearance for 1 copy			ndows 39 to 42, y Treasurer's O		and Tax Division –
Blue Print of Approve Plan (2 copies)	d Subdivision	Real Property Owner / Registry of Deeds / Bureau of Lands			
Certificate Authorizing copy (if necessary)	Registration 1	Real Property Owner / Registry of Deeds / Bureau of Internal Revenue			
	Copy of Zoning Certificate or SP Resolution for Reclassification 1 copy		City Planning and Development Coordinator's Office or Sangguniang Panlungsod Office		
Copy of Development (if necessary)			Sangguniang Panlungsod Office		
Master list of Lots -pe Number (for subdivision more parcels) 1 copy		Real Property Owner			
CLIENT STEP	AGENCY ACTION	ON	FEES TO BE PAID	PROCESSING TIME	Person Responsible

1. Get a queuing number in the monitor and Fill out the application form provided at the City Assessor's Clients Lounge and wait for the number to be called	1. Call the queuing number	(None		Taxmapper III or Tax mapper II or Draftsman II (Tax Mapping Division) CAssO
2. Submit the Documentary Requirements to Window 18	Verify and evaluate requirements	None	40 minutes	Taxmapper III or Tax mapper II or Draftsman II (Tax Mapping Division) CAssO
3.Wait while the personnel receive the documents and accept the queuing slip that will be issued	3. Receive and Input necessary information in the system and issue the 2 nd part of the queuing slip	None	40 minutes	Taxmapper III or Tax mapper II or Draftsman II (Tax Mapping Division) CAssO
4Go to Land Tax Division (window 30 & 31) to pay the necessary fees and get the Official Receipt that will be issued and Return to City Assessor's Office Window 18 for the next step	4. Receive payment; Print and issue official Receipt	Declaration Fee – PhP50.00 Certified True Copy Tax Declaration – PhP50.00 (with existing bldg) Inspection fee per visit- PhP200.00	5 minutes	Local Revenue Collection Officer III Treasurer's Office
5. Submit the official receipt and Receive the acknowledgement receipt,	5.1 Receive the Official Receipt; Schedule the date of Inspection and acknowledgement receipt	None	8 working hours	Taxmapper III (Tax Mapping Division) and Local Assessment Operations Officer III (Assessment Evaluation Division) CAssO
if there is an existing building, assist the inspectors on site on the scheduled date of inspection	5.2 Assign Property Index Number	None		Taxmapper III or Tax mapper II or Draftsman II (Tax Mapping Division) CAssO

	5.3 Appraise and Assess and approve of FAAS Report	None		Taxmapper III (Tax Mapping Division) and Local Assessment Operations Officer III (Assessment Evaluation Division) and City Assessor And/or Asst. City Assessor CAssO
	5.4 Encode the data and print the assessment documents	None	7 working	Local Assessment Operations Officer III, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CAssO
	5.5 Approve the assessment Documents	None	hours	City Assessor or Asst. City Assessor or Local Assessment Operations Officer III CAssO
6. Return to City Assessor's Office Window 22 on the specified Due Date and present the acknowledgement receipt to claim and receive the Tax Declaration and Notice of Assessment	6. Release the Assessment documents	None	15 minutes each document	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) CAssO
	Total	PhP100.00 per RPU (Land) additional *PhP300.00 per Bldg	2 working days	For simple subdivision of 10 Real Property Units

^{*}Additional of 1 day per 10 Real Property Units more

^{*}Additional 3 working days for inspection if there is an existing building (see agency Action step 6 to 8 of Securing Assessment for declaration of new/renovated buildings and machineries)



3. AVAILING OF TRANSFER OF OWNERSHIP

The City Assessor's Office (CAssO) determines the transfer of property from one owner to another on the basis of required documents. Any person/individual, firm/corporation who is a property owner and intends to transfer real property ownership shall notify the CAssO within 60 days from the date of such transfer.

Office/Division	City Assessor's Office (1st Floor Bulwagang Mariano Leon Santos Hall, beside Plaza Vidal De Arrozal – Atrium)			
Classification	Simple			
Type of Transaction	G2C, G2B and G2	G		
Who may Avail	. ,	ners and their Authorized Representatives (whose thin the jurisdiction of the city)		
CHECKLIST OF F	REQUIREMENT		WHERE TO SE	CURE
Accomplished Applica	tion Form	Real Property (Owner / City Ass	sessor's Office
Photocopy of Owner's Representative's ID 1		Real Property (Owner / Authoriz	zed Representative
Photocopy of the New Certificate of Title/s or of the title (Original Copresentation) 1 copy	certified true copy	Real Property (Owner / Registry	of Deeds
Photocopy of Deed of Sale/Deed of Donation/Extra Judicial Settlement of Estate / Affidavit of Consolidation of Ownership with Certificate of Sale or Any legal document to prove ownership 2 copies		Real Property Owner / Registry of Deeds		
RP Tax Receipt or RF for the current year (1		Treasurer's Off	31 of Land Tax	•
Certificate Authorizing presentation (if neces	_	Real Property (Internal Reven	• •	of Deeds/ Bureau of
CLIENT STEP	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	Person Responsible
1. Get a queuing number in the monitor and Fill out the application form provided on the City Assessor's Clients Lounge and wait for the number to be called	Call the queuing number	None		Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO

2. Submit the Documentary Requirements to Window 24	2. Verify and evaluate requirements	None	20 minutes	Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
3. Wait while the personnel receive the documents and accept the queuing slip that will be issued	3 Receive and Input necessary information in the system and issue the 2 nd part of the queuing slip	None		Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
4. Go to Land Tax Division (window 30 & 31) present the queuing slip to pay the necessary fees and get the Official Receipt that will be issued	4.Receive payment; Print and issue official Receipt	Declaration Fee - PhP50.00 Certified True Copy Tax Declaration - PhP50.00	5 minutes	Local Revenue Collection Officer III (Treasurer's Office)
5. Return to Window 24. Submit the Official Receipt and wait while the personnel process the documents	5.1 Encode the data and print the assessment documents	None	30 minutes	Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO

	5.2 Approve the assessment documents	None		City Assessor or Asst. City Assessor or Local Assessment Operations Officer III (CAssO)
6. Receive the Tax Declaration and Notice of Assessment	6. Release the Assessment documents	None	5 minutes	Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
	Total		1 hour	Per Real Property Unit



4. SECURING OF VARIOUS CERTIFICATIONS

The Tax Declaration serves as the city's permanent record for every property owner (land, building & machinery). A certified true copy or certifications of various property holdings or non-improvements thereon may be requested from the City Assessor's Office. The City Assessor's Office issues certification/s to any property owner or his/her duly authorized representative such as certification of no property.

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Office/Division		fice (1 st Floor Bulwagang Mariano Leon Santos Vidal De Arrozal – Atrium)
Classification	Simple	,
Type of Transaction	G2C, G2B and G2	G
Who may Avail	·	ners and their Authorized Representatives
CHECKLIST OF RE		WHERE TO SECURE
General Requirements		
Accomplished Application	Form	Real Property Owner / City Assessor's Office
For Real Property Owner *Photocopy of Valid ID	:	Real Property Owner
For Authorized Representative: *Authorization Letter from Owner/Bank/Agency *Photocopy of Owner's and Representative's ID		Real Property Owner/ Bank/ Agency Office
•	Owner's Copy of Ta	ax Declaration, Certificate of No Property and
Present any of the follow	ring	
Copy of RP Tax Receipt / Tax Clearance		Windows 39 to 42, 30 and 31 of Land Tax Division – City Treasurer's Office
Copy of Transfer Certificat	e of Title/s	Real Property Owner / Registry of Deeds
Location Plan 1copy (if any		Real Property Owner / Bureau of lands
For Certificate of No Pro		
Please provide complete n person including maiden n women in the application for	ame for married	City Assessor's Office
For Certificate as per Tax	Mapping	
Photocopy of the Transfer Title/s 1copy	Certificate of	Real Property Owner / Registry of Deeds
Approved plan 1 copy (if no	ecessary)	Real Property Owner / Bureau of lands
For Property verification		
Application Letter/Form of Owner to the bank/agency	the Property	Bank or Agency Office
For Certified Tax Map		

Photocopy of Client's ID		Client		
CLIENT STEP	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Get a queuing number in the monitor and Fill out the application form provided on the City Assessor's Clients Lounge and wait for the number to be called	1.Call the queuing number	None		Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) or Taxmapper III or Taxmapper II or Draftsman II (Taxmapping Division) CAssO
2.*For Certified True Copy/Owner's Copy of Tax Declaration, Certificate of No Property, Property Holdings, and Cancelled Assessment Submit the Documentary Requirements to Window 22 for verification For Certified Tax Map and Certificate as per Taxmapping Submit the Documentary Requirements to Window 18 for verification	2.1 Verify and evaluate requirements	None	12 minutes	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) or Taxmapper III or Taxmapper II or Draftsman II (Taxmapping Division) CAssO
3. Wait while the personnel receive the documents and accept the queuing slip that will be issued	3. Receive and Input necessary information in the system and issue the 2 nd part of the queuing slip	None		Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) or Taxmapper III or Taxmapper II or Draftsman II (Taxmapping Division) CAssO

4.Go to Land Tax Division (window 30 & 31) to pay the necessary fees and get the Official Receipt that will be issued	4. Receive payment; Print and issue official Receipt	Certification fee -PhP50.00 per Page Certified Tax Map – PhP200.00 per Section map	3 minutes	Local Revenue Collection Officer III (Treasurer's Office)
.5. Submit the Official Receipt to City Assessor's Office	6.1 Print the Certificate	None	10 minutes	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) or Taxmapper III or Taxmapper II or Draftsman II (Taxmapping Division) CAssO
Or	6.2 Approve the Certificate	None		City Assessor or Asst. City Assessor or Local Assessment Operations Officer III or Tax Mapper III (CAssO)
7. Receive the Certifications	7. Release the Certificate	None	5 minutes	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrative Division) (CAssO)
	PhP50.00 per certification/Page PhP200.00 per tax map (Computer generated)	30 Minutes	Per Real Property Unit	



5. CANCELLATION OF ASSESSMENT OF BUILDINGS AND MACHINERIES

The Cancellation of Assessment is eliminating a property from the assessment roll which have been demolished, destroyed or have suffered permanent loss of value by reason of storm, flood, fire, or other calamity.

Office/Division City Assessor's		s Office (1st Floor Bulwagang Mariano Leon		
Office/Division	Santos Hall, be	eside Plaza Vidal De Arrozal – Atrium)		
Classification	Simple			
Type of Transaction	G2C, G2B and	G2G		
Who may Avail	Real Property	Owners and their Authorized Representatives		
Who may Avail	(whose real pro	operty is within the jurisdiction of the city)		
CHECKLIST OF REQ	UIREMENT	WHERE TO SECURE		
General Requirements				
Accomplished Application	form	Real Property Owner / City Assessor's Office		
Request Letter		Real Property Owner		
For Real Property Owner		Roal Proporty Owner		
* Photocopy of Valid ID		Real Property Owner		
For Authorized Representative				
*Authorization Letter		Pool Proporty Owner		
*Photocopy of Owner's	and	Real Property Owner		
Representative's ID				
Copy of Demolition Permi	t or Fire	Office of the Building Official / Bureau of Fire		
Incident Clearance (if any)		Office of the Building Official / Bureau of Fire		
Copy of Real Property Tax Receipt or		Windows 39 to 42, 30 and 31 of Land Tax		
Tax Clearance		Division – City Treasurer's Office		
Copy of Title (if any) 1 copy		Real Property Owner		
Affidavit of cancellation or certificate of		Law Office / Business License and Permit		
closure of business (for m	achinery only)	Division		
1 copy	, ,,	DIVIDIOLI		

CLIENT STEP	AGENCY ACTION	FEES TO BE PAID	PROCESS ING TIME	Person Responsibl e
1.Get a queuing number in the monitor and Fill out the application form provided on the City Assessor's Clients Lounge and wait for the number to be called	1. Call the queuing number	None	None	Local Assmt Operations Off III or Local Assmt Operations off II or Assessment Clerk II (Assessment

Г	<u></u>	Т	Г	
				Evaluation Division) CAssO
2. Submit the Documentary Requirements to Window 19 or 20	2. Verify and evaluate requirements	None	20 minutes	Local Assmt Opeartions Off III or Local Assmt Oprations off II or Assessment Clerk II (Assessment Evaluation Division) CASSO
3. Wait while the personnel receive the documents and accepts the queuing slip that will be issued	3. Receive and Input necessary information in the system and issue the 2 nd part of the queuing slip	None		Local Assmt Opeartions Off III or Local Assmt Oprations off II or Assessment Clerk II (Assessment Evaluation Division) CAssO
4.Go to Land Tax Division (window 30 & 31) to pay the necessary fees and get the Official Receipt that will be issued and Return to City Assessor's Office Window 19 or 20 for the next step	4. Receive payment; Print and issue official Receipt	Inspection fee PhP200.00 per visit Cancellation Fee PhP300.00 Certificate of Cancelled Assessment PhP50.00	5 minutes	Local Revenue Collection Officer III (Treasurer's Office)
5. Submit the Official Receipt at Window 19 or 20 and Receive the acknowledgement receipt	5. Receive the Official Receipt; Schedule the date of Inspection and Issue acknowledgement	None	16 working hours	Local Assmt Operations Off III or Local Assmt Operations

	receipt			off II
	тесеїрі			or Assessment Clerk II (Assessment Evaluation Division) CAssO
6. Assist the inspectors on site	6.Conduct ocular inspection	None		Local Assessment Operations Officer III or Local Assessment Operations Officer II or Assessment Clerk II (Appraisal And Assessment Division) CASSO
7. Wait and Return to Window 19 or 20 of the City Assessor's Office on the specified Due Date for Releasing	7.1 Prepare Field Appraisal & Assessment Sheet (FAAS) report	None	6 working hours	Local Assessment Operations Officer III (Appraisal and Assessment division and Assessment Evaluation Division) CAssO
	7.2 Approve Documents	None		City Assessor and/or Asst. City Assessor or Local Assessment Operations Officer III (CAssO)
	7.3 Cancel the Assessment in the Real Property Assessment System and Print the Certificate	None	1 hour and 30 minutes	Local Assessment Operations Officer III (Assessment Evaluation Division)

				or Asst. City Assessor (CAssO)
	7.4 Approve Certificate	None		City Assessor or Asst. City Assessor or Local Assessment Operations Officer III (CAssO)
8. Receive the Certificate of Cancelled Assessment	8.Release the certificate	None	5 minutes each document	Local Assessment Operations Officer III or Assessment Clerk II or BookBinder II (Records Management and Administrativ e Division) (CAssO)
	PhP550.00	3 Days	Per Real Property Unit	



6. RECLASSIFICATION OF REAL PROPERTY

In this transaction, the Real Property Classification will be reclassified based on the actual use and development on the Property. Another basis is the approved Land Use Plan or a Resolution from the Sangguniang Panlungsod.

Office/Division	City Assessor's Office (Bulwagang Mariano Leon Santos Hall, beside Plaza Vidal De Arrozal – Atrium)			n Santos Hall,	
Classification	Simple	ai L	De Allozai – Alli	uiii)	
Type of Transaction	G2C, G2B and G	2G			
	Real Property Ov			horized Rep	resentatives
Who may Avail	(whose real prop			•	
CHECKLIST OF REQUIREMENT				ERE TO SEC	
General Requirement					
Accomplished Application f	orm	Re	eal Property Ow	ner/City Ass	essor's Office
Request Letter		Re	eal Property Ow	ner	
For Real Property Owner: * Valid ID		Re	eal Property Ow	ner	
*Authorization Letter	For Authorized Representative *Authorization Letter *Photocopy of Owner's and		eal Property Ow	ner	
Copy of RP Tax Receipt or		Windows 39 to 42, 30 and 31 of Land Tax			
Clearance for the current ye		Division – City Treasurer's Office			
Copy of Location Plan (if ne	ecessary)	Real Property Owner / Geodetic Engineer			
Copy of Title 1 copy		Real Property Owner / Registry of Deeds			
Copy of Zoning Certificate		City Planning and Development Coordinator's			
SP Resolution for Reclassif	rication or	Office or Sangguniang Panlungsod Office or			
DAR Conversion 1 copy		Department of Agrarian Reform			
CLIENT STEP	AGENCY ACTION		FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE
1. Get a queuing number in the monitor and Fill out the application form provided at the City Assessor's Clients Lounge and wait for the number to be called	1. Call the queuing number		None		Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CAssO
2. Submit the Documentary Requirements to Window	2. Verify and evaluate requirements		None	20 minutes	Local Assessment Operations Officer III, Local

40 00	1	<u> </u>	I	4
19 or 20				Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
3. Wait while the personnel receive the documents and accept the queuing slip that will be issued	3. Receive and Input necessary information in the system and issue the 2 nd part of the queuing slip	None		Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
4. Go to Land Tax Division (window 30 & 31) and present the queuing slip to pay the necessary fees and get the Official Receipt that will be issued	4.Receive payment; Print and issue official Receipt	Declaration Fee PHP50.00 Certified True Copy Tax Declaration PHP50.00 Inspection Fee PHP200.00 per visit Reclassificati on Fee PhP500.00 per hectare	5 minutes	Local Revenue Collection Officer III (Treasurer's Office)
5. Return to Window19 or 20 Submit the Official Receipt and receive the acknowledgement receipt	5.Receive the Official Receipt; Schedule the date of Inspection and Issue acknowledgemen t receipt	None	16 working hours	Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation

				Division) CAssO
6. Assist the inspectors on site	6.Conduct ocular inspection	None		Local Assessment Operations Officer III or Local Assessment Operations Officer II or Assessment Clerk II (Appraisal And Assessment Division) CASSO
7. Wait and Return to Window 19 or 20 of the City Assessor's Office on the specified Due Date for Releasing	7.1 Prepare Field Appraisal & Assessment Sheet (FAAS) report	None	6 working hours	Local Assessment Operations Officer III Appraisal And Assessment Division and Assessment Evaluation Division) CASSO
	7.2 Appraise, Assess and approve the FAAS Report	None		Local Assessment Operations Officer III and Asst. City Assessor And City Assessor CAssO
	7.3 Encode the data and print the assessment documents	None	1 hour and 30 minutes	Local Assessment Operations Officer III, Local Assessment Operations Officer II, Assessment Clerk II or Assessment Clerk III (Assessment Evaluation Division) CASSO
	7.4 Approve the assessment Documents	None		City Assessor Or Asst. City Assessor or Local Assessment Operations Officer III CAssO

8. Receive the Tax Declaration and Notice of Assessment	8.Release the assessment documents	None	5 minutes each document	Local Assessment Operations Officer III or Administrative Officer II or BookBinder II (Records Management and Administrative Division) CAssO
Total		PhP300.00 per RPU And PhP500.00 per hectare	3 Days	Per Real Property Unit



City Health Office

External Services



1. AVAILMENT OF POST EXPOSURE PROPHYLAXIS/ANTI-RABIES VACCINE

The Animal Bite Treatment Center (ABTC) under the City Health Office ensures to provide free Post Exposure Prophylaxis/Anti-Rabies vaccine to all Fernandinos.

Office or Division:	City Health Office- Animal Bite Treatment Center					
Classification:	Simple					
Type of Transaction:	G2C - Governmen	t to Citizen				
Who may avail:	Animal Bite Patien	Animal Bite Patients (Fernandinos)				
CHECKLIST OF R		WI	HERE TO SE	CURE		
1. Voter's ID or Certif Verification form (orig photocopy); Senior C ID; Kayabe Card; Va	ginal or Citizen ID; PWD	COMELEC; OSC Division	COMELEC; OSCA; CSWD; Community Affairs Division			
•	Record of previous history of Post sposure Prophylaxis (if applicable) Animal Bite Treatment Center (of previous history prophylaxis (if applicable)					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE		
Present the requirements to avail the service and log in the	1.1 Receive and review the certificate or Voter's ID or Verification form	None	2 minutes	ABTC Nurse (City Health Office)		
Patient's logbook provided	1.2 Examine and assess animal bite patient	None	2 minutes	ABTC Medical Coordinator/Nurse (City Health Office)		
Provide all necessary information needed	2.1 Register patient on NRPCP Rabies Exposure Registry	None	2 minutes	ABTC Nurse (City Health Office)		
by the ABTC Nurse	2.2 Prepare Post Exposure Prophylaxis Card	None	2 minutes	ABTC Nurse (City Health Office)		
3. Wait while the Nurse prepares the vaccine	3. Prepare and administer the vaccine	None	3 minutes	ABTC Nurse (City Health Office)		

4. Wait for further instructions and schedule of next visit	4. Give medical advice and referral to other ABTCs (if necessary) and provide schedule of next visit	None	2 minutes	ABTC Nurse (City Health Office)
TOTAL:		None (2 doses free for Fernandinos; booster doses are not given free)	13 minutes	

2. AVAILMENT OF MEDICINES

The Central Pharmacy under the City Health Office caters the 35 barangays of City of San Fernando, Pampanga and provides free basic essential medicines to all Fernandinos.

Office or Division:	City Health Office- Central Pharmacy, 1st floor City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP (beside City Hall)			
Classification:	Simple			
Type of Transaction:	G2C- Government to	Citizen		
Who may avail:	All Fernandinos			
CHECKLIST OF	REQUIREMENTS	\	WHERE TO SECU	IRE
1.1 Kayabe Card (1	original)	Office of the Co Hall	mmunity Affairs lo	cated at the City
1.2. Senior Citizen's patients 60 years o	s Card (1 original) for ld and above	Office for Senio the City Hall	r Citizens Affairs (OSCA) located at
2.1 Prescription (1	original)		e Barangay Health permanent area of	
2.2. Referral form (1 original)	At the respective Barangay Health Station of the patients permanent area of residence		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Kayabe Card or Senior Citizen's Card	Check identification or proof of residency	None	1 minute	Pharmacy Aide/ Pharmacist IV (City Health Office)
2. Present latest prescription duly signed by the attending physician	2. Check the authenticity of the prescription	None	1 minute	Pharmacy Aide/ Pharmacist IV (City Health Office)
3. Wait while the staff check the availability of medicine(s)	3. Check availability of medicine(s)	None 2 minutes Pharmacy Aid Pharmacist IV (City Health Office)		
4. If the medicine(s) is/are available, wait while the staff records the details of the patient	4. Write the time of entry, name, age, address, name and quantity of the medicine(s) to be given to the patient	None	5 minutes	Pharmacy Aide/ Pharmacist IV (City Health Office)

5. If the medicine(s) is/are not available, retrieve the prescription or referral form	5. Return the prescription or referral form to the patient or representative	None	1 minute	Pharmacy Aide/ Pharmacist IV (City Health Office)
6. Wait while the pharmacy personnel prepare the medicines	6. Double check the medicine(s) to be given to the patient	None	2 minutes	Pharmacy Aide/ Pharmacist IV (City Health Office)
7. Receive, check the medicine(s), and sign at the End-user form	7. Hand over the medicines and advise the patient or representative on how to take the medicine(s) and record the time of end of transaction	None	2 minutes	Pharmacy Aide/ Pharmacist IV (City Health Office)
	TOTAL:	None	14 minutes	





The City Population Office under the City Health Office ensures the conduct and issuance of Pre-marriage Orientation and Counseling certificates as part of the process and requirement in obtaining a Marriage License.

Office or Division:	City Health Office- City Population Office 2nd floor City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP (beside City Hall)				
Classification :	Simple				
Type of Transaction:	G2C- Government	G2C- Government to Citizen			
Who may avail:	Residents who are 18 y/o and above – Pre-marriage Orientation Certificate Residents who are 18 y/o to 25 y/o – Pre-marriage Counselling Certificate				
	KLIST OF REMENTS		WHERE TO SEC	JRE	
Receipt of applications 1. Receipt of applications		City Treasure 37)	er's Office located at the	e City Hall (Window	
Pre-Marriage Orientation Application Form (1 original)		City Population Office 2nd floor City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP (beside City Hall)			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present receipt together with the schedule of Pre-Marriage Orientation and Counseling form	1. Check receipt together with the schedule of Pre- Marriage Orientation and Counseling form	None	1 minute	City Population Office Staff (City Health Office)	
2. Client sign the attendance	2. Assist the client	None 1 minute City Population Office City Population Office Staff (City Health Office)			
3. Lecture proper * to be conducted at the 3rd floor CHO Main	3. Conduct Pre- marriage Orientation	None	3 hours and 55 minutes	City Population Office Staff (City Health Office/ CSWDO)	

Building				
4. Wait while the staff prepare the Pre- marriage Orientation certificate	4. Issue the Premarriage Orientation certificate	None	3 minutes	City Population Office Staff (City Health Office)
	TOTAL:	None	4 hours	
* Clients 25 y/o be	elow are required to at	tend additional	Pre-marriage Counseling	Session
5. Lecture proper * to be conducted at the 3rd floor CHO Main Building	5. Conduct Pre- marriage Counseling	None	3 hours and 55 minutes	City Population Office Staff (City Health Office/CSWDO)
6. Wait while the staff prepare the Pre- marriage Orientation certificate	6. Issue the Premarriage Counseling certificate	None	5 minutes	City Population Office Staff (City Health Office)
	TOTAL:	None	8 hours	



4. ADMISSION PROCEDURE

COVID Kalingang Fernandino Isolation Facility (CKFIF) is the LGU-owned and operated 250-bed capacity Temporary Treatment and Monitoring Facility (TTMF) for COVID 19 response. It accommodates asymptomatic to mild COVID-19 suspect, probable, and confirmed cases in the locality.

Office or Division:	City Health Office- CKFIF, Civic Center, Barangay San Isidro, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen			
Who may avail:	Asymptomatic to mild C	OVID-19 sus	spect, probable a	nd confirmed cases
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
Any valid government Philhealth ID	nent-issued ID or	Governmen Insurance C	t agency or Philip Corporation	ppine Health
2. Official RT-PCR F	Result (if available)			ılar Laboratory, y Health Stations
3. Copy of birth certi ID of parents for min	ficate and PhilHealth ors	Philippine Statistics Authority		′
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Secure referral from RHU/BHS and CESU through text template	Conduct pre- admission interview, orientation, and triage	None	15 minutes	Triage Team on duty (City Health Office)
2. Send copy of identification card(s), RT-PCR Result, and other documents required via e-mail	2.1. Prepare patient's chart and other pertinent documents prior to arrival of the patient at the CKFIF	None	5 minutes	Triage Team on duty (City Health Office)
2. Send copy of identification card(s), RT-PCR Result, and other documents required via e-mail	2.2. Coordinate room assignment based on gathered information (e.g. gender, comorbidities, symptoms and special needs)	None	5 minutes	Facility Management Section (City Health Office)

2. Send copy of identification card(s), RT-PCR Result, and other documents required via e-mail	2.3. Prepare designated room/accommodation for the patient	None	30 minutes	Facility Management Section (City Health Office)
3. Proceed to the CKFIF (admission time: 1PM to 5PM)	3.1. Admits patient to the facility, secure informed consent, take and record initial assessment and vital signs	None	5 minutes	Triage Team on duty (City Health Office)
3. Proceed to the CKFIF (admission time: 1PM to 5PM)	3.2. Assist patient to assigned room/facility	None	10 minutes	Facility Management Section (City Health Office)
	TOTAL:	None	1 hour and 10 minutes	



5. DISCHARGE PROCEDURE

All admitted patients at the COVID Kalingang Fernandino Isolation Facility (CKFIF) are considered recovered from COVID-19 after 10-14 days of isolation and are asymptomatic for at least 3 days prior to date of discharge. Patients who were previously admitted from a hospital will complete 21 days of isolation if recovering from moderate COVID 19 infection.

Office or Division:	City Health Office- CKFIF, Civic Center, Barangay San Isidro, City of San Fernando, Pampanga				
Classification:	Simple	Simple			
Type of Transaction:	G2C- Government to C	itizen			
Who may avail:	All admitted patients				
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
	N/A		N/A		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
Wait and listen to the instructions of nurses on duty	1.1. Obtain May Go Home order from attending physician	None	2 minutes	Nurses on duty (City Health Office)	
Wait and listen to the instructions of nurses on duty	1.2. Prepare discharge documents (Medical Certificate, Discharge Summary, and Home Instructions)	None	10 minutes	Nurses on duty (City Health Office)	
1. Wait and listen to the instructions of nurses on duty	1.3. Inform patient of may go home status	None	2 minutes	Nurses on duty (City Health Office)	
Wait and listen to the instructions of nurses on duty	1.4. Endorse patient(s) to be discharged to their respective RHUs and CESU	None	2 minutes	Nurses on duty (City Health Office)	
Wait and listen to the instructions of nurses on duty	1.5. Coordinate with housekeeping for checking of rooms prior to discharge	None	2 minutes	Nurses on duty (City Health Office)	

2. Allow CKFIF personnel to conduct room check prior to discharge	2. Conduct final room inspection and collect all issued items from patient(s) through the accomplishment of the room checklist form	None	2 minutes	Facility Management Section (City Health Office)
3. Proceed to the Nurse's Station as instructed (discharge time: 9AM to 11AM)	3. Discuss home instructions and issue all discharge documents to the patient(s). Secure receiving copy	None	5 minutes	Nurses on duty (City Health Office)
4. Present medical certificate to guard on duty for clearance	4. Clears patient for discharge from the Isolation Facility	None	2 minutes	Security Personnel on duty
	TOTAL:	None	27 minutes	





All currently admitted patients at the COVID Kalingang Fernandino Isolation Facility (CKFIF) are entitled to request for and receive documents needed to be complied in order to qualify for sickness benefit claims (e.g. SSS, GSIS)

Office or Division:	City Health Office- CKFIF, Civic Center, Barangay San Isidro, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen			
Who may avail:	All currently admi	tted patients a		
CHECKLIST OF R	REQUIREMENTS WHERE TO SECURE			
1. SSS and/or GSIS Form	S Benefit Claim	Downloadab website	le through the SSS a	and GSIS official
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for needed documents	1.1. Prepare requested documents based on patient's medical records	None	15 minutes	Nurses Team on Duty (City Health Office)
Request for needed documents	1.2. Facilitate signing of form(s)	None	5 minutes (may vary depending on the availability of signatory)	Attending Physician (City Health Office)
2. Receive requested documents on date of discharge	2.1. Inform patient on date of discharge	None	2 minutes	Nurses Team on Duty (City Health Office)
2. Receive requested documents on date of discharge and sign at the receiving logbook	2.2. Issue requested documents and secure proof of receipt	None	5 minutes	Nurses Team on Duty (City Health Office)
	TOTAL:	None	27 minutes	



7. DOCUMENT REQUEST FOR BENEFIT CLAIMS (OUT-PATIENT)

All previously admitted patients at the COVID Kalingang Fernandino Isolation Facility (CKFIF) are entitled to request for and receive documents needed to be complied in order to qualify for sickness benefit claims (e.g. SSS, GSIS)

Office or Division:	City Health Office- CKFIF, Civic Center, Barangay San Isidro, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen			
Who may avail:	All previously admitted	patients at th		
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE
1. SSS and/or GSIS	Benefit Claim Form	Downloadal official webs	ole through the SS site	S and GSIS
2. Copy of Medical C	Certificate from the	CKFIF (issu	ied upon discharge	e)
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for documents needed	1.1. Prepare requested documents based on patient's medical records	None	15 minutes	Nurses Team on Duty (City Health Office)
Request for documents needed	1.2. Facilitate signing of form(s) to the physician who issued patient's medical certificate	None	3 days	Attending Physician (City Health Office)
2. Wait for a confirmation from the CKFIF personnel	2. Inform patient once documents are available for claiming	None	2 minutes	Nurses Team on Duty (City Health Office)
3. Claim/receive the requested documents at the CKFIF and sign at the receiving logbook	3. Issue requested document and secure proof receipt through logbook	None	5 minutes	Nurses Team on Duty (City Health Office)
	TOTAL:	None	3 days and 22 minutes	

8. REQUEST FOR RT PCR TESTING

The CSFP Testing Facility caters to all in-patient and out-patient that are at risk of contracting COVID 19 infection. This includes testing of the following groups: (1) suspect cases, (2) individuals with relevant history of travel and exposure (or contact), whether symptomatic or asymptomatic, and (3) health workers with possible exposure, whether symptomatic or asymptomatic.

Office or Division:	City Health Office- COVID Kalingang Fernandino Isolation Facility- Testing Facility, Civic Center, Barangay San Isidro, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C- Government to C	itizen		
Who may avail:	COVID 19 suspect, pro	bable, and cl		
	REQUIREMENTS		WHERE TO SE	CURE
1. Philhealth ID		• • •	lealth Insurance (Corporation
2. Valid government	issued ID	Governmen	t agencies	
3. Endorsement or re	ferral letter		h Units/Barangay cility/City Medica	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Proceed to the registration area	Register the patient and give queue card	None	5 minutes	Administrative Aide (City Health Office)
2. Fill-out information sheet, undertaking, and acknowledgement form	2. Validate the information sheet, undertaking, and acknowledgement form	None	15 minutes	Administrative Aide (City Health Office)
3. Patient proceeds to the assessment area	3. Assess the patient and fill-out the Case Investigation Form (CIF)	None	15 minutes	Administrative Aide (City Health Office)
4. For paying patients: pay Swabbing/RT PCR testing fee	4. Receive the payment and issue Order of Payment	Php 2,500.00	5 minutes	Administrative Aide (City Health Office)
5. Patient proceeds to the swabbing area	5. VTM tagging, register the patient on the line list and conduct NPS/OPS swabbing	None	15 minutes	Administrative Aide/Swabber (City Health Office)

6. Patient listens to home instructions and wait for the result via e-mail, SMS, or phone call	6. Explain and issue home quarantine instructions	None	5 minutes	Administrative Aide (City Health Office)
	TOTAL:	Php 2,500.00	1 hour	

9. AVAILMENT OF POST-PARTUM SERVICES IN BIRTHING STATIONS

Office or Division:	City Health Office- Birthing Stations (BS) San Jose BS- Purok 5, Brgy. San Jose, CSFP Sindalan BS- Gloria 1, Brgy. Sindalan, CSFP San Nicolas BS- Bulusan St., Brgy. San Nicolas, CSFP San Agustin BS- Diretso St. Brgy. San Agustin, CSFP Northville BS- Northville 14, Phase 1, Brgy. Calulut, CSFP			
Classification:	Simple			
Type of Transaction:	G2C- Government to	Citizen		
Who may avail:	Women of Reproduc	tive Age (15-4	9 years old) and N	Newborn babies
CHECKLIST OF REQU	JIREMENTS	WHERE TO	SECURE	
1. Postpartum delivery	checklist (1 original)	Birthing Stati	on	
2. Family planning com	modities (1 original)	Birthing Stati	on/Rural Health U	nit
3. Referral form (1 origi	nal)	Birthing Stati	on	
4. Doctor's prescription			on (Physician)	
5. Newborn Hearing registration form (1 original)		Birthing Station/Hearing test provider		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Register and get number queuing	Instruct patient to get number queue at the receiving area	None	1 minute	Nurse/Midwife/ Nursing Assistant on duty (City Health Office BS I-V)
2. Allow the Health Care Provider to take her vital signs	2. Takes and records patient's vital signs	None	7 minutes	Nurse/Midwife/ Nursing Assistant on duty (City Health Office BS I-V)
3. Patients proceeds to the midwife area and answer the questions of the Health Care Provider	3. Interview patient for any clinical signs of abnormality	None	5 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
4. Patient lies at the examination table	4.1. Conduct routine internal cervical examination to assess for any vaginal bleeding	None	2 minutes	Midwife (City Health Office BS I-V)

4. Patient lies at the examination table	4.2. Properly refer to the Birthing Station Manager for any abnormality seen	None	3 minutes	Midwife (City Health Office BS I-V)
5. Patient listens to instructions/advise	5. Provide information and education on Family Planning and Breastfeeding and post-natal care	None	10 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
6. Mother to place the baby in the examination table	6. Give infant care such as immunization, etc.	None	7 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
7. Mother gives information for hearing test	7.1. Instruct mother for schedule of the Newborn for hearing test	None	15 minutes	Hearing Screening Center Staff (accredited hearing center)
7. Mother gives information for hearing test	7.2. Assist mother in accomplishing the information sheet for hearing test	None	5 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
7. Mother listens to Health Care Provider's instruction/advise	7.3. If the result is not normal, instruct the mother that the baby will be scheduled to return after 1 week for repeat hearing test	None	1 minute	Hearing Screening Center Staff (accredited hearing center)
	TOTAL:	None	56 minutes	



10. AVAILMENT OF PRE-NATAL SERVICES IN BIRTHING STATIONS

Office or Division: Classification: Type of Transaction: Who may avail:	City Health Office- Birthing Stations (BS) San Jose BS- Purok 5, Brgy. San Jose, CSFP Sindalan BS- Gloria 1, Brgy. Sindalan, CSFP San Nicolas BS- Bulusan St., Brgy. San Nicolas, CSFP San Agustin BS- Diretso St. Brgy. San Agustin, CSFP Northville BS- Northville 14, Phase 1, Brgy. Calulut, CSFP Simple G2C- Government to Citizen Women of Reproductive Age (15-49 years old)			
CHECKLIST OF R	I .		O SECURE	
1. Registration form	n (1 original)	Birthing St	ation	
	est form (1 original)	Birthing St	ation/RHU Labora	atory Section
3. Birth Plan (1 orig	ginal)	Birthing St	ation	
4. Treatment Reco	rd (1 original)	Birthing St	ation	
5. Doctor's prescrip	otion (1 original)	Birthing St	ation	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient seeks pre- natal consultation at the Birthing Station and present maternal booklet	Register the client and give number queue	None	1 minute	Midwife/Nurse on duty (City Health Office BS I-V)
2. Allow the Health Care Provider to take her vital signs	2. Take and record the patient's weight and height	None	5 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
3. Patient proceeds to the pre-natal room and answer all the questions of the Health Worker	3.1. For new patient, accomplish the birth plan	None	10 minutes	Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)

3. Patient proceeds to the pre-natal room and answer all the questions of the Health Worker	3.2. For return check- up patients, review and update the birth plan. Assess patient as to Last Menstrual Period, clinical danger signs of pregnancy, etc.; issue ultrasound request as needed			Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)
4. Patient lies on the examination table and follow Health Care Provider's further instructions	4.1. Performs Leopold's maneuver, fundic height, fetal heart tone, and movement, etc.	None	15 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
5. Patient lies on the examination table and follow Health Care Provider's further instructions	5.1. For term patient, internal cervical examination will be done	None	1 minute	Midwife on duty (City Health Office BS I-V)
5. Patient lies on the examination table and follow Health Care Provider's further instructions	5.2. Proper referral to the birthing physician for any abnormality	None	3 minutes	Midwife/Nurse on duty (City Health Office BS I-V)
6. Patient listens to the instructions and rationale of the procedures	6.1 Issue laboratory request such as Urinalysis, Hemoglobin & Hematocrit, and other tests as necessary	None	1 minute	Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)
6. Patient listens to the instructions and rationale of the procedures	6.2. For 1st trimester patient: urinalysis, blood typing, hemoglobin & hematocrit, syphilis, HIV	None	1 minute	Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)

6. Patient listens to the instructions and rationale of the procedures	6.3. For 2nd trimester : depends on the baseline result of the 1st trimester	None	2 minutes	Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)
6. Patient listens to the instructions and rationale of the procedures	6.4. For 3rd trimester: urinalysis, hemoglobin & hematocrit, HIV, Fasting Blood Sugar, Hepa Screening; For follow-up patient, issue laboratory request and bring specimen or results for the next check- up	None	3 minutes	Birthing Station Manager/ Nurse/Midwife (City Health Office BS I- V)
7. Patient gives the laboratory request to the Medical Technologist	7. Medical Technologist completes patient information and give schedule and further instructions	None	2 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)
8. Patient return for Fasting Blood Sugar	8. Verify patient's preparation	None	2 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)
9. For urinalysis: patient collects midstream urine on a sterile container	9. Examine the urine	None	4 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)
10. For hemoglobin & hematocrit, HIV, Hepa Screening syphilis: patient is ready for extraction	10. Prepare patient for extraction then label specimen	None	2 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)

	TOTAL:	None	1 hour and 14 minutes	
13. Patient listens for further instruction	13.2. If baseline results are above or below normal, advise patient to take medication with prescription ordered by birthing physician and come back after 1 week for repeat tests	None	2 minutes	Birthing Station Manager/Midwife (City Health Office BS I-V)
13. Patient proceed again to the midwife area	13.1. Assess the laboratory result	None	1 minute	Midwife (City Health Office BS I-V)
12. Receive the result and sign at the the end- user	12. Release the laboratory result and instruct patient to sign the end-user	None	2 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)
11. Wait while the medical technologist performs laboratory test	11.2 Record the result at the laboratory logbook	None	2 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)
11. Wait while the medical technologist performs laboratory test	11.1. Perform laboratory tests	None	15 minutes	Medical Technologist (City Health Office RHU I-V Laboratory Units)

11. PATIENT IN-LABOR



Office or Division:	City Health Office- Birthing Stations (BS) San Jose BS- Purok 5, Brgy. San Jose, CSFP Sindalan BS- Gloria 1, Brgy. Sindalan, CSFP San Nicolas BS- Bulusan St., Brgy. San Nicolas, CSFP San Agustin BS- Diretso St. Brgy. San Agustin, CSFP Northville BS- Northville 14, Phase 1, Brgy. Calulut, CSFP				
Classification:	Simple				
Type of Transaction:	G2C- Government to C	itizen			
Who may avail:	Women of Reproductive	e Age (15-49	9 years old)		
CHECKLIST OF RE			O SECURÉ		
1. Birth Plan (origina)	Birthing Sta	ation		
2. Treatment Record	•	Birthing Sta	ation		
3. Doctor's prescripti	on (original)	Birthing Sta	ation		
4. Patient's chart (ori	ginal)	Birthing Sta	ation		
5. Partograph (origin	al)	Birthing Sta	ation		
6. Delivery checklist		Birthing Sta	ation		
CLIENT STEPS	AGENCY ACTIONS	FEES TO		PERSON	
		BE PAID	TIME	RESPONSIBLE	
	1.1 Assess patient, take and record vital signs.	None	5 minutes	Nurse/Midwife/ Birthing Station Manager (City Health Office BS I-V)	
1. Patient is in- labor	1.2. If cervical dilatation is less than 4 cm, advise the patient to come back and give instructions	None	5 minutes	Nurse/Midwife (City Health Office BS I-V)	
	1.3. If cervical dilatation is more than 5 cm, inform birthing physician for admission and secure consent for admission	None	15 minutes	Nurse/Midwife (City Health Office BS I-V)	

2. When in pain, patient do breathing techniques	2. Advise to do breathing techniques and monitor progress of labor; insert intravenous line as needed; administer medicines as ordered	None	6 minutes * depends on the progress of labor	Nurse/Midwife/ Birthing Station Manager (City Health Office BS I-V)
3. Patient lies on the delivery table and follow Health Care Provider's instruction	3.1. Perineal preparation	None	2 minutes	Nurse/Midwife (City Health Office BS I-V)
3. Patient lies on the delivery table and follow Health Care Provider's instruction	3.2. Prepare instruments and medicines to be given during and after delivery	None	3 minutes	Nurse/Midwife (City Health Office BS I-V)
4. Patient lies in lithotomy position	4. Delivery of the baby and the placenta through NSD, assess for any retained placenta/ fragments, suture/repair of any perineal laceration	None	90 minutes	Nurse/Midwife (City Health Office BS I-V)
5. Patient lies in lithotomy position	5. Provision of Essential Intrapartum Newborn Care immediate and thorough drying -early skin to skin contact or "unang yakap" - properly timed ciord clumping - non-separation of newborn from the mother Do suctioning if needed. Anthropometric measurements Application of Ophtalmic Ointment on both eyes Vitamin K, Hepa B and BCG Vaccination	None	90 minutes	Nurse/Midwife (City Health Office BS I-V)

6. Patient will take a rest	6. Monitoring of vital signs, bleeding, uterine contractions of mother and monitoring of newborn's vital signs	None	every 15 minutes	Nurse/Midwife (City Health Office BS I-V)
7. Patient transfers to the ward	7.1. Advise patient: diet as tolerated; encourage breastfeeding	None	2 minutes	Nurse/Midwife (City Health Office BS I-V)
7. Patient transfers to the ward	7.2. Give post- partum medication	None	2 minutes	Nurse/Midwife (City Health Office BS I-V)
7. Patient transfers to the ward	7.3. Continue monitoring of vital signs every 15 minutes for 2 hours then every 4 hours for both mother & baby	None	10 minutes	Nurse/Midwife (City Health Office BS I-V)
8. Patient fill-up the Birth Certificate form	8. Assist the patient in accomplishing the draft Birth Certificate form	None	5 minutes	Midwife (City Health Office BS I-V)
9. After 24 hours instruct mother of blood screening for the baby	9. Prepare and fill p new born screening filter card and perform newborn screening test	None	15 minutes	Nurse/Midwife (City Health Office BS I-V)
10. Instruct patient for discharge	10. Provide post-natal care; perform discharge internal examination	None	8 minutes	Midwife (City Health Office BS I-V)
11. Patient listens to the instructions prior to discharge	11. Provide home medications and give home instructions; discuss discharge internal examination results and give date of follow-up, patient signs discharge slip after agreeing with all the findings	None	10 minutes	Nurse/Midwife/ Birthing Station Manager (City Health Office BS I-V)
	TOTAL:	None	4 hours and 43 minutes	* depends on the progress of labor





Office or Division:	City Health Office- Birthing Stations (BS) San Jose BS- Purok 5, Brgy. San Jose, CSFP Sindalan BS- Gloria 1, Brgy. Sindalan, CSFP San Nicolas BS- Bulusan St., Brgy. San Nicolas, CSFP San Agustin BS- Diretso St. Brgy. San Agustin, CSFP Northville BS- Northville 14, Phase 1, Brgy. Calulut, CSFP					
Classification:	Simple					
Type of Transaction:	G2C- Government to Cit	izen				
Who may avail:	Women of Reproductive	Age (15-4	9 years old)			
	REQUIREMENTS		TO SECURE			
1. Referral form (1 original)	Birthing S	tation			
2. Referral feedba	ack form (1 original)	Referring	Hospital			
CLIENT STEPS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Answer the health care provider questions	1. Get the patient's data	None	8 minutes	Nurse/Midwife (City Health Office BS I-V)		
2. Allow the Health Care Provider to take her vital signs	2. Takes and records patient's vital signs	None	10 minutes	Nurse/Midwife (City Health Office BS I-V)		
	3.1. For patient not inlabor, examine the patient and assess for the following: a. Breech presentation b. Premature rupture of membrane c. Multiple pregnancies					
3. Patient proceed to the examination table	d. Pre-eclampsia e. Eclampsia f. Pre-term labor	None	10 minutes	Nurse/Midwife (City Health Office BS I-V)		

3. Patient proceed to the examination table	3.2. For patient inlabor, examine and assess for the following: a. Avert on cervical dilatation b. Failure of descent			
4. Wait while nurse/midwife coordinates with referring hospital	4.1. Refer findings to the Birthing Station Manager prior to transfer/referral. The Birthing Station Staff calls the referral hospital for proper notification	None	10 minutes	Nurse/Midwife (City Health Office BS I-V/)
4. Wait while nurse/midwife coordinates with referring hospital	4.2. Prepare and accomplish the referral and feedback form	None	5 minutes	Nurse/Midwife (City Health Office BS I-V)
4. Wait while nurse/midwife coordinates with referring hospital	4.3. Transfer patient in an ambulance assisted by a nurse or midwife	None	30 minutes to 1 hour * depending on the location of the referral facility	Nurse/Midwife (City Health Office BS I-V)
4. Wait while nurse/midwife coordinates with referring hospital	4.4. Endorse to ROD (Resident on Duty) and wait for feedback form to be signed by the Resident on Duty (ROD)	None	11 minutes	Nurse/Midwife (City Health Office BS I-V)
	TOTAL:	None	1 hour and 54 minutes	



13. AMBULANCE REQUEST

The Health Emergency Management Staff (HEMS) Unit of the City Health Office provides assistance on the assessment, transfer and referral of patients to higher levels of health care.

Office or Division:	City Health Office- HEMS Unit, HEMS Operation Center, Heroes Hall, Brgy. San Juan, CSFP					
Classification:	Simple					
Type of Transaction:		tizen				
Who may avail:	All Fernandinos					
CHECKLIST O	FREQUIREMENTS		WHERE TO SE	ECURE		
1. Ambulance Reques	t (Patient transfer)	City Adm	inistrator's Office			
2. Current hospital rec	ords for admitted patients	Hospital/0	Clinic			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Client fills out the ambulance request form	Assist the client in filling out the request form	None	5 minutes	CMU Nurse (City Health Office)		
2. Wait while the staff verify the requirements and answer the questions of the HEMS personnel	2. Review the submitted documents and interview the requesting client on the current condition of the patient	None	8 minutes	HEMS Medical Director/ HEMS Nurse (City Health Office)		
3. Wait for a text message or call from the HEMS	3.1 HEMS nurse on duty will assess the condition of the patient and shall determine if the patient is safe to travel and coordinate to the receiving facility prior to transfer	None	10 minutes to 1 hour or more * depending on the location of the patient and traffic situation	HEMS Nurse (City Health Office)		
personnel regarding the request	3.2 Inform the HEMS Medical Director/ Coordinator about the assessment done to the patient and carry out doctor's order as necessary	None	5 minutes	HEMS Medical Director/ HEMS Nurse (City Health Office)		

3.3 Inform the requesting client about the status of the request (approved or disapproved) and coordinate the details of the request	None	3 minutes	HEMS Nurse (City Health Office)
TOTAL:	None	1 hour and 21 minutes or more * depending on the location of the patient and traffic situation	

14. RESPOND TO EMERGENCY CASES

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The Health Emergency Management Staff (HEMS) Unit under the City Health Office ensures the health and safety of the general population within the city's jurisdiction by providing 24/7 Emergency Medical Services.

	City Hoolth Office UE	MC Unit UE	MS Operation Co	ntor Horoco Holl		
Office or Division:	City Health Office- HEMS Unit, HEMS Operation Center, Heroes Hall, Brgy. San Juan, CSFP					
Classification:	Simple	Simple				
Type of Transaction:	G2C- Government to Citizen					
Who may avail:	All Fernandinos	T				
	REQUIREMENTS		WHERE TO S	ECURE		
N	J/A		N/A			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Client/relative, Fernando Base and C3 command center informs the HEMS Unit dispatcher of the emergency case (radio/phone call)	Receive request for emergency medical assistance	None	1 minute	<i>HEMS Nurse</i> (City Health Office)		
2. Client/relative waits for the	2.1 HEMS Team Leader on duty calls back the caller to confirm the request and secure more details	None	1 minute	HEMS Nurse (City Health Office)		
Emergency Medical Team to arrive at the scene	2.2 Dispatch HEMS Team to the patient's location in full PPE if needed	None	5 minutes to 45 minutes * depending on the location of the patient and traffic situation	HEMS Nurse (City Health Office)		
3. Upon arrival, patient/relative provides information regarding the patient	3. Perform initial assessment/provide first aid and take the patient's history and physical findings, then refer to the HEMS Medical Director	None	5 minutes	HEMS Nurse (City Health Office)		

4. Follow instruction and or answer the query of the HEMS personnel	4.1 Carry out treatment according to HEMS Medical Director's order	None	5-10 minutes (may take longer depending on the management that will be performed and the severity of the patient's condition)	<i>HEMS Nurse</i> (City Health Office)
4. Follow instruction and or answer the query of the HEMS personnel	4.2 If patient needs further management, patient will be transferred to hospital of choice after proper coordination with the receiving hospital	None	10 minutes to 30 minutes (or more if outside CSFP)	HEMS Team (City Health Office)
	TOTAL:	None	1 hour and 37 minutes * depending on the distance of scene to the hospital of choice and traffic situation	

15. TRANSFER OF COVID 19 RELATED CASES



The Health Emergency Management Staff (HEMS) Unit of the City Health Office ensures the safe transfer/referral of the city's constituents with COVID-19 related illnesses to various isolation facilities and COVID referral hospitals.

Office or Division:	City Health Office- HEMS Unit, HEMS Operation Center, Heroes Hall, Brgy. San Juan, CSFP						
Classification:	Simple	Simple					
Type of Transaction:	G2C- Government to 0	G2C- Government to Citizen					
Who may avail:	All Fernandinos	All Fernandinos					
CHECKLIST OF	REQUIREMENTS WHERE TO SECURE						
Reporting templat message/telephone	•		logy and Surveilla f the City Health C				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1. The CESU/RHU informs the HEMS Unit of the patient for transfer	1. Check the reporting template sent through text by the CESU/RHU and coordinates regarding the details of the patient to be transferred	None	3 minutes	HEMS Nurse (City Health Office)			
2. Client waits for phone call regarding the status of transfer	2. The HEMS personnel on duty coordinates with the receiving hospital/ isolation facility regarding the transfer and refer to HEMS Medical Director as necessary	None	10 minutes	HEMS Nurse/ HEMS Medical Director (City Health Office)			
3. Listen to the instruction of the HEMS personnel through phone call	3. The HEMS personnel give instruction to the patient/relative prior to transfer	None	5 minutes	HEMS Nurse (City Health Office)			
4. Client prepares as instructed while waiting for the HEMS Team	4. The HEMS personnel on duty prepare for the transfer (wearing of PPEs, preparation of the ambulance and equipment)	None	10 minutes	HEMS Nurse (City Health Office)			

5. Wait for the HEMS personnel	5. Immediate dispatch of the HEMS team upon confirmation from the receiving hospital	None	30 minutes to 45 minutes *depending on the distance of the patient to the receiving hospital/ facility	HEMS Team (City Health Office)
TOTAL:		None	1 hour and 13 minutes *depending on the distance of the patient to the receiving hospital/ facility and traffic situation	

16. MEDICAL ASSISTANCE REQUEST

The Health Emergency Management Staff (HEMS) Unit of the City Health Office ensures the delivery of basic health services to our constituents. This includes the provision of medical assistance on planned events as requested by our constituents.

Office or Division:	Office or Division: City Health Office- HEMS Unit, HEMS Operation Center, Heroes Hall,				
	Brgy. San Juan, CSFP				
Classification:	Simple				
Type of Transaction:		itizen			
Who may avail:	All Fernandinos			• • • •	
	REQUIREMENTS		WHERE TO SE	CURE	
Request letter duly	approved by the City	City Adm	ninistrator's Office		
Administrator		FEES			
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. The client will send and leave the request letter at the City Administrator's Office for approval	The City Administrator's Office receives the letter for review and approval	None	1 to 2 days	Administrative Officer - (City Administrator's Office)	
2. The client will weit	2.1 Approval or disapproval of the request by the City Administrator	None	5 minutes	City Administrator (City Administrator's Office)	
2. The client will wait for a call confirming the status of the request	2.2 The approved request letter will be sent to the CHO Administrative Health Care Division for processing and coordination	None	3 minutes	Administrative Officer V/ City Health Officer (City Health Office)	
3. The client will coordinate with the HEMS Unit and give details regarding the medical assistance request	3. Upon receipt of the letter, the HEMS nurse will coordinate with the client regarding the planned event	None	10 minutes	HEMS Nurse (City Health Office)	
4. The client will wait for the arrival of the Medical Team on the date, place and, time of event as agreed upon	4. Deployment of the medical team	None	30 minutes to 45 minutes *depending on the location of the event	HEMS Team (City Health Office)	
	TOTAL:	None	1-2 days and 45 minutes *depending on the location of the event		

17. ANNUAL PHYSICAL EXAMINATION (APE)



The City Medical Unit (CMU) of the City Health Office ensures the health and wellness of the Casual and Job Order Employees of the City Government of San Fernando, Pampanga.

Office or Division:	City Health Office- City Medical Unit, 2nd gate of the City Hall, City Health Office Annex, A. Consunji St. Brgy. Sto. Rosario, CSFP						
Classification:	Simple	Simple					
Type of Transaction:	G2C- Government to Cit	y Employ	ees				
Who may avail:	All Casual and Job Orde Fernando, Pampanga	r Employe	ees of the city gov	vernment of San			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE			
1. Specimen cups (for	Urine & Stool Exam)	City Hun	nan Resource Ma	nagement Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E			
1. Registration	1. Assist the employee in signing the registration form and in accomplishing the APE form	None	3 minutes	CMU Nurse (City Health Office)			
2. Employee will proceed to the laboratory for blood extraction and submit collected urine and stool sample	2. Extract blood sample and collect the specimen cups (stool and urine sample)	None	5 minutes	CMU Medical Technologist/ Laboratory Aide (City Health Office)			
3. Employee will proceed to the Dental Unit for dental examination	3. Perform examination of the oral cavity	None	8 minutes	CMU Dentist/ Dental Aide (City Health Office)			
4. Employee will follow instruction and answer questions of the health care provider during physical assessment/history taking	4. Interview and assess the employee	None	5 minutes	CMU Nurse (City Health Office)			
5. Employee will let the health care provider take his/her height and weight	5. Measure the height and weight of the employee	None	2 minutes	CMU Nurse (City Health Office)			

6. Employee will follow instruction and answer questions of the health care provider during eye test	6. Check the visual acuity of the employee	None	2 minutes	CMU Nurse (City Health Office)
7. Employee will proceed to the ECG room (for employees 35 years old and above, with high BP or with history of heart disease)	7. Perform ECG	None	5 minutes	CMU Nurse (City Health Office)
8. Employee will follow instruction and answer questions of the doctor during consultation	8. Assess the employee and accomplish the APE form	None	5 minutes	CMU Doctor (City Health Office)
	TOTAL:	None	35 minutes	

18. ISSUANCE OF MEDICAL CERTIFICATE

The City Medical Unit (CMU) of the City Health Office ensures the health and wellness of the constituents of the City of San Fernando, Pampanga especially the ones needing a Medical Certificate.

Office or Division:	City Health Office- City Medical Unit, 2nd gate of the City Hall, City Health Office Annex, A. Consunji St. Brgy. Sto. Rosario, CSFP					
Classification:	Simple					
Type of Transaction:	G2C- Government to C	G2C- Government to Citizen				
Who may avail:	All constituents of the C	City of San I				
	REQUIREMENTS		WHERE TO S	ECURE		
Laboratory results chest x-ray)	s (CBC, Urine, Stool,	Laboratory	y centers			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Client present the requirements to the CMU Nurse (laboratory results and other pertinent documents)	1. Validate the requirements and interview the client (history taking, physical assessment, etc.)	None	5 minutes	<i>CMU Nurse</i> (City Health Office)		
2. Client will proceed to the CMU Doctor	2. Assess the client prior to the issuance of a medical certificate	None	5 minutes	CMU Doctor (City Health Office)		
3. Client proceeds to the City Treasurer's Office for payment and return to the CMU for the claiming of Medical Certificate	3. CMU Nurse prepares and hand over the medical certificate to the client	Php 100.00	5 minutes	CMU Nurse (City Health Office/) Administrative Aide (City Treasurer's Office)		
	TOTAL:	Php 100.00	15 minutes			

19. BURIAL, CREMATION, TRANSFER AND EXHUMATION PERMIT

The City Health Office is responsible for the issuance of burial, cremation, transfer and exhumation permits. It is a requirement for every entombment within the city that the permit will be issued as required by law under P.D. 856 specifically the disposal of dead persons.

disposal of dead persons.				
Office or Division:	City Health Office- 1st St., Brgy. Sto. Rosario,		h Office Main Bu	uilding, A. Consunji
Classification:	Simple			
Type of Transaction:	G2C - Government to 0	Citizen		
Who may avail:	Spouse, Nearest Relat deceased only	ive and/or Auth	norized Represer	ntative of the
CHECKLIST C	F REQUIREMENTS		WHERE TO S	ECURE
Certificate form d	red/registered Death uly accomplished tely and signed by photocopy)	City Health O (Window 47)	ffice, City Civil R	egistry Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Give a copy of reviewed/regist ered Death Certificate	1. Receive, log, and verify the information data of the deceased and instruct the client to pay at the City Treasurer's Office	None	2 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
2. Go to the City Treasurer's (Window 37) Office for the payment	2. Wait until the client return for the copy of official receipt from the City Treasurer's Office	Php 200.00	3 minutes	Administrative Aide (City Treasurer's Office)
3. Wait for the processing of the permit	3. Prepare and issue the permit	None	2 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV/Medical Specialist III/City Health Officer (CHO- Issuance of Death Certificate)
	TOTAL:	P200.00	7 minutes	

20. ISSUANCE OF DEATH CERTIFICATE (OUT OF FACILITY DEATH MEDICALLY ATTENDED)



The City Health Office is responsible for the review of a Death Certificate. It examines the cause of death, issues the certificate, and directs the registration of the death at the City Civil Registry within the reglementary period of 30 days. The spouse or nearest relative of a person who died without medical attendance must report the deceased within 48 hours.

Office or Division:	Consunji St., Brgy. Sto. Rosario, CSFP				Office Main Building, A.	
Classification:		Simple	Bigy: Oto. Rosano, Oci i			
Type of Transactio	n:	G2C- Governr	ment to Citiz	zen		
Who may avail: Spouse, Near the deceased				e and/or Authori	zed Representative of	
CHECKLIST OF RE	QUIREM	ENTS	WHERE 1	TO SECURE		
1. Four (4) copies of (original)	Death C	ertificate form	City Civil I	Registry Office	(Window 46)	
2. Medical Certificat	e (origina	l)	Hospital,	Clinic, Attendino	g Physician	
3. Notarized Sworn form (1 original)	Statemen	it (Salaysay)	City Healt	h Office- Vital E	Events Section	
4. Notarized Waiver original)	for Autop	osy form (1	City Healt	h Office- Vital E	Events Section	
5. Barangay Certific original)	5. Barangay Certificate of Residency (1 original)		At the respective Barangay Hall of the client's permanent area of residence			
CLIENT STEPS	CLIENT STEPS AGENCY ACTIONS		FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
Give the Death Certificate for verification	Receive, log, and review the death certificate of the deceased		None	3 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)	
2. Submit additional requirements	requiren	tion of	None	5 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)	

3. Wait for the processing of documents	3. Bring the death form to the City Medical Specialist III or City Health Officer for review and signing	None	5 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV/Medical Specialist III/City Health Officer (CHO- Issuance of Death Certificate)
4. Claim the form and go to the City Civil Registry Office (Window 46)	4. Release the form and permit instruct to proceed to the City Civil Registry Office for registration	None	2 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
	None	15 minutes		

21. ISSUANCE OF DEATH CERTIFICATE (OUT OF FACILITY DEATH MEDICALLY UNATTENDED)



The City Health Office is responsible for the review of a Death Certificate. It examines the cause of death, issues the certificate, and directs the registration of the death at the City Civil Registry within the reglementary period of 30 days. The spouse or nearest relative of a person who died without medical attendance must report the deceased within 48 hours.

Office or Division:		City Health Office- 1st floor City Health Office Main Building, A. Consunji St., Brgy. Sto. Rosario, CSFP			
Classification:		Simple			
Type of Transaction: G2C- Gov			ernment to C	Citizen	
Who may avail:				tive and/or Autl deceased only	
CHECKLIST OF REQUI	REMENTS		WHERE T	O SECURE	
1. Four (4) copies of Dea (original)	th Certifica	ate form	City Civil R	Registry Office	(Window 46)
2. Medical Certificate (ori	iginal)		Hospital, C	linic, Attending	g Physician
3. Notarized Sworn State form (1 original)	ement (Sala	aysay)	City Health	o Office- Vital E	vents Section
4. Notarized Waiver for Autopsy form (1 original)			City Health Office- Vital Events Section		
5. Barangay Certificate o original)	f Residenc	cy (1	At the respective Barangay Hall of the client's permanent area of residence		
CLIENT STEPS		ENCY TIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
Accomplish the personal data form of the deceased	Receive and validate completeness of information of the deceased		None	3 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
2. Wait for the processing of information details of the deceased	2. Log and type the information details of the deceased		None	7 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)

3. Check the given details and information	3. Explain additional requirements needed to be accomplished (Cause of Death to be signed by the Attending Physician or Rural Health Physician)	None	10 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
4. Submit additional requirements needed for physician's evaluation and go to the designated Rural Health Unit (if the Rural Health Physician is not available, go to the Medical Officer at the CHO Annex or City Health Officer at 2nd floor CHO)	4. Evaluation and determination on the probable cause of death by the concerned physician and signing of the death certificate with complete requirements. Information on certification of embalmer is required for registration at the CCRO	None	1 day	Rural Health Physician/ Medical Officer/Medical Specialist III/City Health Officer (CHO- Issuance of Death Certificate/ Rural Health Units)
	None	1 day and 20 minutes		





The City Health Office is responsible for the review of a Death Certificate. It examines the cause of death, issues the certificate, and directs the registration of the death at the City Civil Registry within the reglementary period of 30 days. The spouse or nearest relative of a person who died without medical attendance must report the deceased within 48 hours.

Office or Divisio	n:	City Health Office- 1st floor City Health Office Main Building, A. Consunji St., Brgy. Sto. Rosario, CSFP			
Classification:		Simple			
Type of Transac	tion:	G2C- Government to Citizen			
Who may avail:		Spouse, Nearest Relative and/or Authorized Representative of the deceased only			
CHECKLIST O	F REQ	UIREMENTS		WHERE TO S	ECURE
1. Four (4) copies form (original)	of Dea	ath Certificate	City Civil Re	egistry Office (Wi	ndow 46)
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Accomplish the personal data form of the deceased	Receive and validate information of the deceased		None	3 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
2. Wait for the processing of information details of the deceased	2. Log and type the information details of the deceased		None	7 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)
3. Check the given details and information	assist the fil inforn "Post	plain and t the client in ling-up of nation on the - Mortem icate of n"	None	10 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)

4. Submit deceased for autopsy at SOCO situated at Camp Olivas	4. Refer to Medico- Legal Officer/SOCO and instruct client on affixing of Medico-Legal Officer's signature and embalmer's certification on the death form	None	2 days * varies upon the availability of the SOCO/Medico - Legal Officer	Nurse I/ Administrative Officer II/ Administrative Aide IV/ Medico-Legal Officer/SOCO (CHO- Issuance of Death Certificate)
5. Request for review of death certificate	5. Refer to City Medical Specialist III/City Health Officer for review of cause of death and affixing of signature	None	5 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV/Medical Specialist III/City Health Officer (CHO- Issuance of Death Certificate)
	TOTAL:	None	2 days and 25 minutes	

23. REVIEWING OF DEATH CERTIFICATE



The City Health Office is responsible for the reviewing of a Death Certificate. It examines the cause of death, completeness, correctness, consistency and clarity of information in the death certificate and directs the registration of the death at the City Civil Registry Office within the reglementary period of 30 days.

Office or Division	n:	City Health Office- 1st floor City Health Office Main Building, A. Consunji St., Brgy. Sto. Rosario, CSFP				
Classification:		Simple				
Type of Transact	ion:	G2C- Government to Citizen				
Who may avail:		Spouse, Nearest Relative and/or Authorized Representative of the deceased only				
CHECKLIST OF	REQUI	REMENTS		WHERE TO	SECURE	
1. Three (3) or Foundation Death Certificate for accomplished corrupt and signed by properties.	orm duly ectly, co	y ompletely		Records Section		
CLIENT STEPS		GENCY CTIONS	FEES PROCESSING PERSON RESPONSIBLE			
Give the form for verification and review	and re death the de Check inform signati physic	eive, log view the certificate of ceased. for correct ation and ures of ian and eation of mer	None	8 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)	
2. Wait for the processing of documents	certific City M Specia City H	alist III or ealth Officer iew and	None	5 minutes	Nurse I/ Administrative Officer II/ Administrative Aide IV/Medical Specialist III/City Health Officer (CHO- Issuance of Death Certificate)	
3. Claim the form and go to the City Civil Registry Office (Window46)	form a		to the egistry None 2 minutes		Nurse I/ Administrative Officer II/ Administrative Aide IV (CHO- Issuance of Death Certificate)	
		TOTAL:	None	15 minutes		

24. ISSUANCE OF HEALTH CERTIFICATE

SAN FERDING

The City Health Office- Environmental Health and Sanitation Division (EHSD) is responsible for the issuance of Health Certificates. Any person/individual can request a Health Certificate for employment.

Office or Division:	City Health Office- Environmental Health and Sanitation Division (EHSD), 1st floor, City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP				
Classification:	Simple				
Type of Transaction:	G2C- Government to Citi	zen			
Who may avail:	Any person/individual wh	o wants to	work within th	e city	
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SEC	URE	
1. All workers/employed	es' current results/annual	medical res	sults of:		
1.1. Chest X-Ray curre	nt year (original)		edited laborat ernando, Pam	ory within the City panga	
1.2. Urine (within a mor (original)	nth upon application)		edited laborate ernando, Pam	ory within the City panga	
1.3. Stool (within a mor (original)	th upon application)	Any accr		ory within the City	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
Present diagnostic/ laboratory results for validation	Receives diagnostic/laboratory results for validation	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)	
2. Proceed to Window 3 of the City Treasurer's Office for payment	2.1. Instruct the client to pay health certificate fee window 3 (for normal findings)	Php 200.00	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)	
3. Client proceeds to the CHO Annex- City Medical Unit	3.1 Refer to client to City Medical Unit (for any abnormal findings) for medical check up	None	1 minute	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)	

4. Present receipt of payment	4. Validates official receipt issued by the City Treasurer's Office	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
5. Wait until the health certificate is processed	5.1. Prepares health certificates	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
5. Wait until the health certificate is processed	5.2. Record client's information on the logbook for food and non-food establishments	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
6. Receive the health certificate and affix signature on the logbook	6. Instruct client to receive the health certificate on the logbook	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
	None	13 minutes		



25. ISSUANCE OF SANITARY PERMIT

The City Health Office- Environmental Health and Sanitation Division (EHSD) is responsible for the issuance of Sanitary Permits. All business Establishments are required to secure a Sanitary Permit upon application for a Business Permit to ensure that the establishment complies with the laws and/ordinances pertaining to health and sanitation in the City.

Office or Division:	City Health Office- Environmental Health and Sanitation Division (EHSD), 1st floor, City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP				
Classification:	Simple				
Type of Transaction:	G2C- Government to C	itizen			
Who may avail:	Business establishmen	ts			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE			
FOR NEW BUSINESS	S :				
1. Application Form fo		Business One Stop Shop			
OTHER SUPPORTING	G DOCUMENTS BASE	O ON NATURE OF BUSINESS:			
A. For night clubs/er	tertainment establishr	nents:			
	or entertainers/models	Entertainment Establishment Section (located at Rural Health Unit II- Sindalan)			
A.2. Result of the Cerviron the Social Hygier Entertainment Worker	ne Clinic of	Social Hygiene Clinic (located at Rural Health Unit II- Sindalan)			
B. For Water Refilling	g Stations, Water Work	s System and Bulk Water:			
B.1. Certificate of Cert Operator Training Cou Commitment		Water Operator Training Course Provider			
B.2. Sanitary Plan		Licensed Private Sanitary Engineer			
B.3. Physical/Chemica months raw and produ	- , ,	Department of Health Accredited Water Laboratory			
B.4. Sanitary Enginee	r's Report	Licensed Private Sanitary Engineer			
B.5. Microbiological test: Total Coliform, E. Coli & Heterotrophic Plate Count- product every month; raw every six (6) months		Department of Health Accredited Water Laboratory			
C. For Memorial Park	k, Cemetery or private I	ourial ground:			
C.1. Initial or Operational Permit/Clearance from CHD- 3 (Department of Health)		Department of Health			
C.2. Barangay Resolu	tion of no objection	Barangay where business is located			
D. For Crematorium: reviewed and approvolement of Health or his duly	ed by the Secretary				

representative					
E. For Industrial Establishment: Design of Water Treatment Facilities					
F. For Poultry and P Resolution of no ob		Barangay			
G. For Water Labora G.1. NRL Certificate of years)		NRL			
G.2. Picture of Physic laboratory		Business O	wner		
G.3. PRC License to G.4. DOH Certificate G.5. NRL Licensure E	of Accreditation	PRC Department NRL	of Health		
G.6. DENR Environm FOR BUSINESS REM	G.6. DENR Environmental Clearance FOR BUSINESS RENEWAL:		DENR		
1. Application Form for OTHER SUPPORTING		O ON NATURE OF BUSINESS:			
Microbiological test: Total Coliform, E. Coli Heterotrophic Plate Count- product every month; raw every six (6) months		Department of Health Accredited Water Laboratory			
2. Physical/Chemical months raw and prod	• • • • • • • • • • • • • • • • • • • •	Department of Health Accredited Water Laboratory			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Submit required documents	Proper receipt & verification of documents	Based on Chapter IV-Service	15 minutes as		
2. Wait while the personnel process the permit	2.1. Encoding/updating the necessary information in the CHO sanitary information system	Fees, Art. 48 of the Ordinance Enacting the 2017 Revised	stated in the QMS Manual for the issuance of Sanitary Permit	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)	
3. Wait while the personnel process the permit	3.1. Printing of the Sanitary Permit	Revenue Code and Market	1 Offilit		

4. Wait for the approval of the Sanitary Permit	4. Review the approved Sanitary Permit			Chief- Environmental Health & Sanitation Division/City Health Officer (CHO- EHSD)							
5. Receive the Sanitary Permit	5. Releasing of the Sanitary Permit	Code of the CSFP: Php 200.00 to 1,200.00		the CSFP:	the CSFP:	the CSFP:	the CSFP:	the CSFP:	the CSFP:		Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
6. Wait for the ocular inspection to be conducted	6.1. Conduct ocular inspection for new businesses within (1day)		15 minutes- maximum of 4	(Joint Inspection Team) Sanitation Inspectors							
6. Wait for the ocular inspection to be conducted	6.2. If not operating, inspection will be within the year upon start of business			hours; duration varies based on the scale of the	(City Health Office- EHSD)						
6. Wait for the ocular inspection to be conducted	6.3. Renewal of business: year-round based on ocular inspection plan		business establishment	Sanitation Inspector (City Health Office- EHSD)							
	TOTAL:	Php 200.00 to 1,200.00	15 minutes								



26. AVAILMENT OF HIMLAYANG FERNANDINO SERVICES

The City Health Office- Environmental Health and Sanitation Division (EHSD) is responsible for the processing of the application for the Himlayang Fernandino.

Office or Division:	(EHSD), 1st floor, City I	City Health Office- Environmental Health and Sanitation Division (EHSD), 1st floor, City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP			
Classification:	Simple				
Type of Transaction:	G2C- Government to C	itizen			
	Fernandinos (exclusively vested among the bonafide residents of the City of San Fernando, Pampanga are qualified to avail of the facility's burial services)				
Who may avail:	1. Received and maintained in their possession the Fernandino Card issued by the City Government of San Fernando, Pampanga.				
	2. Resided in the City of San Fernando, Pampanga for at least six (6				
	months as evidenced by the Barangay census Logbook maintained				
	and kept by the Barang	ay Secretary	where the benef	iciary has resided	
	during his/her lifetime.				
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC		
1. Death Certificate (1	photocopy)	City Health Office- Issuance of Death Certificate Section			
2. Indigency or inform	ant and indigency of	At the respec	ctive Barangay H	Hall of the client's	
the deceased (1 photo	ocopy each)	permanent area of residence			
3. Voters ID/Voter's C	ertification of the	COMELEC located at the City Health			
	ed (1 photocopy each)	·			
4. Fernandino Access		Community Affairs Division located at the City			
and deceased (1 phot		Hall			
5. Cedula of informant		City Treasurer's Office (Windows 1-4)			
6. Assessment report	(1 original)	City Mayor's Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSIN PERSON BE PAID G TIME RESPONSIBLE			
Present all the requirements	1.1. Receive application form for the above- ground niche/interment and all requirements for the application for leasing of niche/interment	None	3 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)	

2. Present all the requirements	2.1 Instruct client to the City Mayor's Office for validation/checking & approval of the photocopied requirements	None	3 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
	3.1. Assess fee based on the schedule of fees as provided in the Article IV of the Ordinance No. 2009- 015	None	3 minutes	
3. Client will give a copy of the assessment report (medical/ financial form) and wait while the application for the above ground niche/interment is	* Five-year Lease on single niche * Maintenance fee	Php 5,500.00 as per Ordinance * if indigent, no fees once certified by CSWDO None	3 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
being assess	* Perpetual lease on single ossuary	None		
	3.2. Staff will fill-up the application form	None		Sanitation Inspector/
	3.3. Issue order of payment to the applicant(s) for the payment at the Treasurer's Office	None	3 minutes	Administrative Aide (City Health Office- EHSD)
3. Client will give a copy of the assessment report (medical/ financial form) and wait while	3.4. Prepare lease agreement (Contract of Lease) for the above-ground niche and the Field Order Slip	None	3 minutes	Sanitation Inspector/ Administrative Aide
the application for the above ground niche/interment is being assess	3.5. Record approved Niche Leased Application and all pertinent information on the logbook	None		(City Health Office- EHSD)

	3.6. File all attached requirements	None		
	3.7. Instruct client to bring their copy of the Order of Payment at the City Mayor's Office	None		
4. Client brings the needed materials for the burial with the copy of the original Field Order Slip	4. Himalayan Fernandino (Barangay Lara): Instruct clients to look for the in-charge caretaker and hand over their copy of the original Field Order Slip	None	3 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
	TOTAL:	Php 5,500.00	21 minutes	

27. ISSUANCE OF PINK CARD



The City Health Office- Environmental Health and Sanitation Division (EHSD) is responsible for the issuance of Pink Card. Any person/individual (Entertainment Establishment Worker) can request a Pink Card for employment.

Office or	City Health Office- Re	City Health Office- Reproductive Health and Wellness Clinic (Social				
Division:		Hygiene Clinic) located at Sindalan BS- Gloria 1, Brgy. Sindalan, CSFP				
Classification:	Simple	Simple				
Type of Transaction:		G2C- Government to Citizen				
Who may avail:	Any person/individual wants to work within the		ent Establishment	Workers) who		
CHECKLIST O	F REQUIREMENTS		WHERE TO SE	CURE		
	loyees' current results/ar	nual medica	l results of:			
	rrent year (x-ray plate name of the client, age	Any accred Fernando, I	•	thin the City of San		
1.2. Urine (within a application)	month upon	Any accreding Fernando, F	•	thin the City of San		
1.3. Stool (within a application)						
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Present diagnostic/ laboratory results for validation	Receives diagnostic/ laboratory results for validation	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)		
2. Proceed to Window 3 of the City Treasurer's Office for payment	2.1. Instruct the client to pay health certificate fee window 3 (for normal findings)	Php 200.00	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)		
3. Proceed to Window 3 of the City Treasurer's Office for payment	3.1. Refer the client to the Rural Health Unit (for any abnormal findings) for medical check-up and further assessment	None	1 minute	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)		

4. Present official receipt	4. Counter check official receipt issued by the City Treasurer's Office	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
5. Wait until the health certificate is processed	5.1. Prepare the Pink Card	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
5. Wait until the health certificate is processed	5.2. Recording of client's information on the logbook for entertainment establishments	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
6. Receive the health certificate and affix signature on the logbook	6. Instruct client to receive the Pink card on the logbook for entertainment establishments	None	2 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
	TOTAL:	Php 200.00	13 minutes	

28. AVAILMENT OF REPRODUCTIVE HEALTH AND WELLNESS CLINIC SERVICES



The Reproductive Health and Wellness Clinic and Environmental Health and Sanitation Division under the City Health Office are bound together to deliver quality, accessible and sustainable health services to Fernandinos.

Office or Division:	City Health Office- Reproductive Health and Wellness Clinic (Social Hygiene Clinic) located at the City Civic Center, Barangay San Isidro, CSFP			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen			
Who may avail:	Entertainment Establish	ment Worker	s/Bar Personn	el
CHECKLIST OF REQ	UIREMENTS	WHERE TO	SECURE	
 Chest x-ray current should include the nar and gender) 		Any accredit Fernando, P	•	within the City of San
2. Urine (within a mon	th upon application)	Any accredit Fernando, P	•	within the City of San
3. Stool (within a mont	h upon application)	Any accredit Fernando, P	•	within the City of San
4. Pink card (1 original	- for renewal)	City Health Office- Reproductive Health and Wellness Clinic/Environmental Health and Sanitation Division		
5. Philippine Statistics Birthcertificate	Authority	Philippine Statistics Authority Office, City of San Fernando Pampanga		
6. Police clearance		Philippine National Police Office, City of San Fernando Pampanga		
7.Community Tax Cert	tificate Cedula	City Treasurer's Office, City of San Fernando Pampanga		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Present all requirements needed in acquiring Pink Card, Occupational Fee, Health Certificate	1. Review the submitted requirements A. Clients with abnormal results/findings, refer to respective RHUs B. Clients with normal findings, instruct client to pay fees at the cashier	None	5 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)

2. Pay fees at the cashier	2. Receive payment and issue official receipt and instruct client to present the official receipt to EHSD Office	Pink card for Entertaine rs: P200.00 Occupatio nal fee: P200.00 Health Certificate for Bar Personnel P200.00 Smear: P50.00 Communit y Tax Certificate: minimum P120.00 (varies)	5 minutes	Local Revenue Collection Officer I (City Treasurer's Office)
3. Client will present the official receipt to EHSD Staff	3. Record the OR number and issue Pink Card, License, or Health Certificate, if for smear instruct client to proceed to SHC	None	5 minutes	Sanitation Inspector/ Administrative Aide (City Health Office- EHSD)
4. Client will present the issued Pink Card for smearing	4. Register the client's information in the smear registration logbook	None	4 minutes	Laboratory Aide II (CHO- Social Hygiene Clinic)
5. Client will claim the numbered slides	5. Instruct the client to proceed to the examination room	None	2 minutes	Laboratory Aide II (CHO- Social Hygiene Clinic)
6. Client will proceed to the examination room and give the	6.1 Conduct physical examination and prepare the client for smearing	None	4 minutes	Nurse III (CHO- Social Hygiene Clinic)
numbered slides to the Nurse	6.2 Perform smear procedure	None	5 minutes	Nurse III (CHO- Social Hygiene Clinic)

	6.3 Instruct the client on her next schedule and inform them that the Floor Managers will claim all the Pink cards	None	2 minutes	<i>Nurse III</i> (CHO- Social Hygiene Clinic)
7. Return to the SHC for the laboratory result(s)	7.1 Conduct laboratory procedures such as gram staining, microscopic reading or blood testing and after laboratory procedure	None	Smear gramstainin g: 1 hour HIV: 2 hours Hepa B: 1hour Syphilis: 1hour	Medical Technologists II (CHO- Social Hygiene Clinic)
	7.2 Inform the client of the result and provide health teachings, treatment or refer as necessary	None	15 minutes	Nurse III (CHO- Social Hygiene Clinic)
8. Designated Floor Managers will claim the Pink cards	8. Releasing of pink cards to Floor Managers is from Mondays to Fridays, 4PM-5PM	None	5 minutes	Laboratory Aide II (CHO- Social Hygiene Clinic)
	TOTAL:	P570.00	2 hours and 15 minutes	

29. AVAILMENT OF FAMILY PLANNING SERVICES



The Rural Health Units and Barangay Health Stations under the City Health Office ensure that women of reproductive age are counseled for family planning and given informed choice of contraceptive.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP Super Health Center- City Civic Center, Brgy. San Isidro, CSFP Barangay Health Stations in Barangays			
Classification:	Simple			
Type of Transaction:	G2C- Government to C			
Who may avail:	Women of Reproductive	e Age (15-49	years old)	
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
1. Family Planning Fo	rm 1 (1 original)	•	ective Barangay F nt's permanent ar	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fill-up and/or update the Family Planning form	1. Interview and assist the client in filling-up the Family Planning Form	None	15 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU, 41 BHSes)
2. Allow the Health Care Provider to do initial assessment	2. Get the vital signs of the client and conduct initial physical examination before referral to the physician (if not physically present refer thru phone call/video call)	None	10 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU 41 BHSes)
3. Listen to the Health Care Provider	3. Educate and present options to the client on the family planning methods available and provide counseling afterwards	None	20 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU, 41 BHSes)

4. Listen to the Health Care Provider for instruction on the chosen method	4. Give/Administer chosen Family Planning Method	None	10 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU, 41 BHSes)
	TOTAL:	None	55 minutes	* processing time may vary depending on the chosen Family Planning Method



30. ANTI TUBERCULOSIS SERVICES

The City Health Office through its Rural Health Units and Barangay Health Stations ensures that all presumptive TB cases are assessed and given proper medication for six months under the National Tuberculosis Program of the Department of Health.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP Super Health Center- City Civic Center, Brgy. San Isidro, CSFP				
Classification:	Simple				
Type of Transaction:	G2C- Government to Client				
Who may avail:	All				
CHECKLIST OF I	REQUIREMENTS		WHERE TO SEC	URE	
Individual Treatme original)	ent Record (1		tive Barangay Hea nanent area of resi		
2. Specimen Reques Request (1 original)	nen Request or Chest X-ray (1 original) At the respective Barangay Health Station of the patient's permanent area of residence				
*** TB patients for enrolment					
1. NTP Treatment Ca	NTP Treatment Card (1 original)		At the respective Barangay Health Station of the patient's permanent area of residence		
2. Specimen Result of Result/Hospital (1 ori chest x-ray plate)		Laboratory of CSFP Labora		ral Health Unit/any	
Provider-Initiated (Testing Form (1 original)	•	Rural Health	Unit and Super RF	łU	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Patient seek consultation at the Rural Health Unit/Barangay Health Station and answer all the questions of the Health Worker	1. Determine if the patient is a presumptive or symptomatic Tuberculosis patient through history taking and prepare initial treatment record	None	10 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)	

2. Allow the Health Worker to do physical examination	2. Conduct physical examination to the patient and record all findings	None	5 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
3. Listen attentively to the Health Worker	3. Educate patient on proper sputum collection, duration and number of sputum to be submitted and give schedule of laboratory examination	None	5 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
4. Answer all the questions of the Health Worker needed in the Laboratory Request Form	4. Fill-up Direct Sputum Smear Microscopy Laboratory Request Form and instruct patient to proceed to the Rural Health Unit. Instruct client to return after 1-3 days for sputum Result	None	5 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
	TOTAL:	None	25 minutes	
	ENROLI	IENT OF PATIE	ENT	
1. Allow the Health Worker to assess the result of the Direct Sputum Smear Microscopy/Chest x-ray	1. Assess the patient if he/she is eligible to the National Tuberculosis Program	None	1 minute	Public Health Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU)
2. Answer all the questions of the Health Worker needed in the enrolment	2.1. If the patient is not eligible: refer to Rural Health Physician for other Diagnostic Tests such as Chest x-ray, Gene X-pert, etc.	None	5 minutes	Public Health Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU)

	2.2. If the patient is eligible: enroll the patient and issue National Tuberculosis Program Treatment Record and Identification Card	None	20 minutes	Public Health Nurse/ Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
3. Listen attentively to the Health Worker	3. Educate patient and treatment partner about prevention and control Tuberculosis, importance of Tutok Gamutan, and discuss the role of the treatment partner	None	20 minutes	Public Health Nurse/Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
4. Listen attentively to the Health Worker and sign the consent	4. Conduct Human Immunodeficiency Virus counseling prior to testing and refer to the Rural Health Unit Laboratory	None	10 minutes	Public Health Nurse/ Rural Health Midwife/ Barangay Health Station Nurse/Medical Technologist (CHO- RHU I-V, Super RHU)
5. Allow Health Worker to test initial intake of Anti- Tuberculosis drugs for hypersensitivity	5. Issue initial dose of Anti- Tuberculosis drugs to the patient; if with reaction, refer to the Rural Health Physician	None	15 minutes	Public Health Nurse/ Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
6. Listen attentively to the Health Worker and give Diagnostic Laboratory Request	6.1. Ask client to identify all his household members; if household members are symptomatic, high risk or if client is bacteriologically confirmed, give diagnostic	None	15 minutes	Public Health Nurse/ Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU / Identified Diagnostic facility of RHU I-V)

	laboratory request form to identified household member			
6. Listen attentively to the final instructions	6.2. Inform the patient where to get his/her daily Anti-Tuberculosis drugs and schedule of sputum follow-up; inform the patient of the side effects	None	3 minutes	Public Health Nurse/Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU)
	TOTAL:	None	1 hour and 29 minutes	





The Rural Health Units under the City Health Office ensures that all children under 5 years of age are fully immunized.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP Super Health Center- City Civic Center, Brgy. San Isidro, CSFP Barangay Health Stations in Barangays			
Classification:	Simple			
Type of Transaction:	G2C- Government to C	lient		
Who may avail:	Children below 5 years	old		
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
1. Individual Treatmer	nt Record (1 original)		ective Barangay F s permanent area	
2. Immunization Card	(1 original)	At the respective Barangay Health Station of the patient's permanent area of residence		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Mother/guardian seek basic immunization services at the Rural Health Unit/Barangay Health Station	1.1. Register client's information/give queue number	None	2 minutes	Barangay Health Worker/Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)

2. Allow the Health Worker to conduct physical assessment to the infant and answer all the questions of the Health Worker 3. Allow the Health Worker 3. Allow the Health Worker 3. Allow the Health Worker beachings about the vaccine to be given 3. Allow the Health Worker beachings about the vaccine to be given 3. Allow the Health Worker beachings about the vaccine to be given 4. Receive the Early Childhood Care Development Card and referral form and listen to the instruction of the Health Worker 5. Listen attentively to the instructions of the Health Worker 5. Listen attentively to the instructions of the Health Worker 5. Listen attentively to the instructions of the Health Worker 6. Listen attentively to the instructions of the Health Worker 7. Listen attentively to the instructions of the Health Worker 8. Cho-Rhu I-V, Super RHU & 41 BHSes) 8. Minutes 8. Rural Health Midwife/ Barangay Health Station Nurse (CHO-RHU I-V, Super RHU & 41 BHSes) 8. Minutes 8. Rural Health Midwife/ Barangay Health Station Nurse (CHO-RHU I-V, Super RHU & 41 BHSes) 8. Minutes 9. Minutes 10. minutes 10. minutes 10. minutes 11. minutes 12. Check and record the vital signs and anthropometric measurements of the infant to determine wellness or presence of illness. Give health teachings which includes date of next immunization, care for the injection site and danger signs to watch for, and administration of medicine if any		1.3. For new clients: register the infant and issue an immunization card	None	5 minutes	Barangay Health Worker/Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
3. Allow the Health Worker to vaccinate the infant and listen to the instruction of the Health Worker 4. Receive the Early Childhood Care Development Card and referral form and listen to the instruction of the Health Worker 4. If the patient is not well: render Out Patient Consultation Services and give next schedule of immunization 5. Listen attentively to the instructions of the Health Worker 3. Allow the Health Worker worker to vaccinate the infant's record on the Expanded Program on Immunization None 5. minutes 6. Fininutes 8. Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes) 8. Give additional health teachings, which includes date of next immunization, care for the injection site and danger signs to watch for, and administration of	Worker to conduct physical assessment to the infant and answer all the questions of the	the vital signs and anthropometric measurements of the infant to determine wellness or presence of illness. Give health teachings about the	None	10 minutes	Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41
Childhood Care Development Card and referral form and listen to the instruction of the Health Worker 5 minutes None 5 minutes 5 minutes 6 minutes 6 minutes 6 minutes 6 minutes 6 minutes 6 minutes 7 minutes 6 minutes 6 minutes 6 minutes 7 minutes 6 minutes 7 minutes 6 minutes 6 minutes 7 minutes 6 minutes 7 minutes 6 minutes 6 minutes 7 minutes 6 minutes 7 minutes 6 minutes 7 minutes 7 minutes 6 minutes 7 minutes 7 minutes 8 minutes 7 minutes 8 minutes 7 minutes 8 minutes 8 minutes 8 minutes 8 minutes 9 minutes 1 minutes 8 minutes 9 minutes 1	Worker to vaccinate the infant and listen to the instruction of	update the infant's record on the Expanded Program on Immunization Target Client List and	None	5 minutes	Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41
bealth teachings, which includes date of next immunization, to the instructions of the Health Worker site and danger signs to watch for, and administration of Amount of the Health Worker site and danger signs to watch for and administration of Rural Health Midwife/Barangay None 3 minutes (CHO- RHU I-V, Super RHU & 41 BHSes)	Childhood Care Development Card and referral form and listen to the instruction of the	well: render Out Patient Consultation Services and give next schedule of	None	5 minutes	Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41
TOTAL: None 35 minutes	to the instructions of	health teachings, which includes date of next immunization, care for the injection site and danger signs to watch for, and administration of medicine if any			Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41

32. OUT-PATIENT CONSULTATION AT THE RURAL HEALTH UNITS AND BARANGAY HEALTH STATIONS



The Rural Health Units and Barangay Health Stations under the City Health Office ensure that all are given basic quality health services through proper assessment, treatment, and referral.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP Super Health Center- City Civic Center, Brgy. San Isidro, CSFP Barangay Health Stations in Barangays					
Classification:	Simple					
Type of Transaction:	G2C- Government to C	lient				
Who may avail:	All					
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE		
1. Individual Treatme	nt Record (1 original)		ective Barangay F s permanent area			
2. Prescription (1 orig	2. Prescription (1 original) At the respective Barangay Health Station of the patient's permanent area of residence					
*** Patients for referra	al:					
1. Referral Slip (1 orig	ginal)		ective Barangay F nt's permanent ar			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Ask for medical consultation	1. Register the patient's data on the Individual Treatment Record (for new patients)	None	2 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)		
2. Provide personal data for record retrieval	2. Retrieve patient's previous individual treatment record and register chief complaints and health services rendered	Rural Healt Midwife/Baran Health Statio None 2 minutes Nurse (CHO- RHU I				

3. Wait for the vital signs to be taken	3. Take and record vital signs and medical history	None	5 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
4. Wait for the issuance of referral slip	4. Conduct physical examination to assess patient's condition	None	15 minutes	Rural Health Midwife/Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
5. Listen attentively to the instruction of the Health Worker or receive medical prescription	5. Refer via chat, phone call, text Rural Health Physician regarding patient's health status and chief complaint before giving appropriate medicines or prescription/s if not available	None	10 minutes	Rural Health Midwife/Barangay Health Station Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU & 41 BHSes)
6. Receive the referral slip	6. If emergency case, refer to hospital or CHO- HEMS Unit with the properly filled 2- way referral slip	None	5 minutes	Rural Health Midwife/Barangay Health Station Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU & 41 BHSes)
	TOTAL:	None	41 minutes	*processing time may vary depending on patient's case

33. RHU MATERNAL SERVICES



The Rural Health Units under the City Health Office ensures that all pregnant women are assessed and given services for safe pregnancy and delivery.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP Super Health Center- City Civic Center, Brgy. San Isidro, CSFP Barangay Health Stations in Barangays			
Classification:	Simple			
Type of Transaction:	G2C- Government to C	lient		
Who may avail:	Pregnant women	1		
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE
1. Individual Treatmer	nt Record (1 original)	•	ective Barangay I s permanent area	
2. Maternal Client Red	cord (1 original)		ective Barangay I nt's permanent a	
3. Laboratory Request Form (1 original)		At the respective Barangay Health Station of the patient's permanent area of residence		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
1. Seek consultation at the Rural Health Unit/Barangay Health Station	1. Register patient's data on the Treatment Record. Check and record the vital signs of the mother	None	5 minutes	Barangay Health Worker/Rural Health Midwife/ Barangay Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
2. Answer all the questions of the Health Worker	2.1. For new clients: complete and issue Home Based Mother's Record/ Mother Baby Booket	None	8 minutes	Rural Health Midwife/Baranga y Health Station Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
	2.2. For old clients: update the Home Based Mother's Record/ Mother Baby Booket	None	3 minutes	Rural Health Midwife/Baranga y Health Station Nurse (CHO- RHU I-V, Super RHU & 41

				BHSes)
3. Allow the Health Worker to conduct physical examination	3. Conduct physical examination to the mother to determine risk factors	None	5 minutes	Rural Health Midwife/Baranga y Health Station Nurse/Public Health Nurse/Rural Health Physician (CHO- RHU I-V & 41 BHSes)
4. Receive accomplished laboratory request form	4. Request for urinalysis, Hgb/Hct and Hepa B and Syphilis Screening for eligible patients and refer for laboratory tests and give instructions regarding the procedures	None	3 minutes	Rural Health Midwife/Baranga y Health Station Nurse/ Public Health Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU & 41 BHSes)
5. Listen attentively to the Health Worker	5. Orient the mother on proper maternal nutrition, maternal care and possible danger signs/symptoms and complications of pregnancy, etc.	None	10 minutes	Rural Health Midwife/Baranga y Health Station Nurse/Public Health Nurse/Rural Health Physician (CHO- RHU I-V, Super RHU & 41 BHSes)
6. Receive the Home Based Mother's Record/Booklet ni Nanay and iron supplementation tablets	6. Give additional instructions which includes next pre and post-natal visit, tetanus toxoid immunization schedule, intake of iron supplementation which depends on trimester of pregnancy	None	5 minutes	Rural Health Midwife/Baranga y Health Station Nurse/Public Health Nurse (CHO- RHU I-V, Super RHU & 41 BHSes)
	TOTAL:	None	41 minutes	



34. AVAILMENT OF BASIC LABORATORY SERVICES

Laboratory units in the Rural Health Units (RHUs)/City Medical Unit (CMU) under the City Health Office provide basic laboratory services to all Fernandinos, ensuring quality laboratory results

laboratory results.					
Office or Division:	City Health Office- City Medical Unit RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP RHU VI (Super Health Center)- City Civic Center, Barangay San Isidro, CSFP				
Classification:	Simple				
Type of Transaction:	G2C- Government	to Citizen			
Who may avail:	All Fernandinos				
CHECKLIST OF	REQUIREMENTS		WHERE	TO SECUR	E
Laboratory Reque	uest Form Barangay Health Station (BHS)/Rural Health Unit of the patient's permanent area of residence				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PROCES SING TIME	PERSON RESPONSIBLE
1. Present all the requirements to avail the service	1. Verify all the requirements and instruct client to pay fees at the cashier	None		5 minutes	Laboratory Aide (RHU I-VI Laboratory Unit/CHO- CMU)
		Sputum Exam (DSSM/ GeneXpert) Blood	None		
	2. Receive	Chemistry	P800.00		
	payment and issue official	Fasting Blood Sugar	P100.00		Local Revenue
2. Pay fees at	receipt and	Lipid Profile	P300.00	5 minutes	Collection Officer
the cashier	instruct client to present the official receipt to the laboratory	Complete Blood Count (Hemoglobi n & Hematocrit)	(City	(City Treasurer's Office)	
		Platelet Count	P100.00		
		Blood Typing	P50.00		

		Hepatitis B Screening	P200.00		
		Syphilis Screening	None		
		HIV Screening	P500.00		
		Dengue Test	None		
		Urinalysis Fecalysis	P60.00 P60.00	-	
		COVID-19 Antigen Test	None		
3. Client will present the official receipt to the Laboratory	3. Record the OR number and client details	Non	е	5 minutes	Laboratory Aide (RHU I-VI Laboratory Unit/CHO- CMU)
4. Collect and submit laboratory specimen	4. Check and receive laboratory specimen submitted	Non	e	15 minutes	Medical Technologist/ Laboratory Aide (RHU I-VI Laboratory Unit/CHO- CMU)
	5. Perform laboratory procedure(s) as per indicated request:				
	Sputum Exam (DSSM/GeneXp ert)	Non	e	3 working days	
	Blood Chemistry	Non		4 hours	
E Comply to the	Lipid Profile Fasting Blood	Non	e	4 hours	Medical
5. Comply to the waiting time of each laboratory	Sugar (Capillary Blood Glucose)	Non	е	30 minutes	<i>Technologist</i> (RHU I-VI Laboratory
procedure	Fasting Blood Sugar (ChemAnalyzer))	Non	е	4 hours	Unit/CHO- CMU)
	Complete Blood Count (Hemoglobin & Hematocrit)	Non	е	2 hours	
	Platelet Count	Non		1 hour	
	Blood Typing Hepatitis B	Non		1 hour	
	Screening	Non	e	1 hour	

	Syphilis Screening HIV Screening Dengue NS1 Urinalysis Fecalysis COVID-19	None None None None None	1 hour 2 hours 1 hour 1 hour 1 hour	
	Antigen Test	None	1 hour	
6. Receive the result(s) and sign at the end-user logbook	6. Log results at the laboratory end-user logbook	None	10 minutes	Laboratory Aide (RHU I-VI Laboratory Unit/CHO- CMU)
7. Listen to instructions for result correlation	7. Instruct client to return to the requesting BHS/RHU/CMU consultation area for proper treatment	None	5 minutes	Laboratory Aide (RHU I-VI Laboratory Unit/CHO- CMU)
	TOTAL:	*** Fees to be paid vary per procedure (Based on Article 49, Service Fees for Health Examination Enacting the 2017 Revised Revenue Code and Market Code of the CSFP)	1 hour and 15 minutes to 3 days	*** Releasing of results varies per procedure

35. AVAILMENT OF DENTAL HEALTH SERVICES



The Dental Health Services Unit of the City Health Office provides quality, affordable, accessible and available oral health care delivery to every Fernandino.

Office or Division:	City Health Office- City Medical Unit RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP RHU VI (Super Health Center)- City Civic Center, Brgy. San Isidro, CSFP			
Classification:	Simple			
Type of Transaction:	G2C- Government to C	itizen		
Who may avail:	All Fernandinos			
	REQUIREMENTS	V	VHERE TO SEC	URE
Voter's ID (1 original original or 1 photocopy)/Kayabe Ca	,	COMELEC/O located at the	office of the Come City Hall	munity Affairs
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Inquire for dental services	1. Register the name of the patient, give queue number and record patient information and vital signs	None	10 minutes	Dental Aide (City Health Office RHU I-VI Dental Units)
2. Ask dentist for specific dental service	2. Assess dental history of the patient	None	10 minutes	Public Health Dentist (City Health Office RHU I-VI Dental Units)
3. Inquire for schedule of dental procedure	3. Schedule dental procedure	None	5 minutes	Dental Aide (City Health Office RHU I-VI Dental Units)
4. Wait for the dental	4. Inform patient of the dental procedure and give dental health education. Perform	Public Health Dentist		
procedure to be completed	necessary dental procedure on the patient	Php 250.00	Tooth Extraction: 30 minutes	(City Health Office RHU I-VI Dental Units)

		Php 300.00	Oral Prophylaxis: 30 minutes	
		Temporary Filling Php 200.00/ tooth	Restoration 40 minutes/ tooth	
		Permanent Filling Php 250.00/ tooth	Restoration 40 minutes/ tooth	
5. Wait for the dental procedure to be completed	5.Give post-operative dental instructions	None	5 minutes	Public Health Dentist (City Health Office RHU I-VI Dental Units)
6. Wait for the dental procedure to be completed	6. Give appropriate treatment and home instructions as necessary and assist the patient in signing the end-user form	None	5 minutes	Dental Aide/ (City Health Office RHU I- VI/CMU)
	TOTAL:	* no fees for indigent patients as certified by the CSWDO	30 minutes to 3 hours	

36. REQUEST FOR BLOOD PRODUCTS



The City Blood Program under the City Health Office is in-charge of the coordination and processing of blood requests to different partner Blood Bank in the city.

Office or Division:	City Health Office- City Population Office 2nd floor City Health Office Main Building, A. Consunji St., Brgy. Sto. Rosario, CSFP (beside City Hall)					
Classification:	Simple					
Type of Transaction:	G2C- Government to Citizen					
Who may avail:	Bonified resident of the					
	REQUIREMENTS	WHERE TO				
Copy of blood i	request	Patient's dod	ctor or requesting f	acility		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Present blood request	Validate blood request	None	1 minute	Blood Program Coordinator (City Health Office)		
2. Client fills-out the blood request form	2. Assist the client	None	2 minutes	Blood Program Coordinator (City Health Office)		
3. Client waits for the confirmation of the availability and approval of blood request	3. Forward blood request details to partner Blood Bank for confirmation, availability and approval of blood request	None	15 minutes	Blood Program Coordinator (City Health Office)		
4. Listen to the Blood Program Coordinator for further instructions	4. Instruct the client to coordinate with partner blood bank or hospital laboratory/blood bank	None 2 minutes Blood Programme Coordinate (City Health C				
	TOTAL:	None	20 minutes			

37. AVAILMENT OF COVID-19 IMMUNIZATION SERVICES

The immunization program of the City Health Office ensures that all Fernandinos ages 5 years old and above are fully immunized with COVID-19 vaccines.



Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C- Government to Ci	tizen		
Who may avail:	All individuals 5 years of	ld and above		
CHECKLIST OF	REQUIREMENTS	V	VHERE TO S	SECURE
1. Client's 1 valid ID		Any governm	ent issued v	alid ID
2. Informed Consent	Form (1 original)	At the vaccin	ation site	
3. Health Declaration original)	Screening Form (1	At the vaccin	ation site	
4. Certification for CO Vaccination (5-17 years old with original)		Private or Go	overnment Ph	nysician
5. Client's 1 valid ID Certificate for Minor (•	Any governm	nent issued v	alid ID (PSA)
6. Authorization letter/Affidavit of Guardanship/Kinship if minor is accompanied by significant other		Parent, Attorney/Lawyer		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE
1. Present 1 valid	1.1 NEW CLIENT - check the client's valid ID and register to the CSFP- VIMS	None	2 minutes	Covax Team- Registration Staff (City Health Office)
ID and vaccination card	1.2 OLD CLIENT - check the client's valid ID and update the his/her record to the CSFP- VIMS	None	2 minutes	Covax Team- Registration Staff (City Health Office)
2. Accomplish and sign the informed consent and health declaration screening form upon arrival to the facility	2.1 Receive and review the SIGNED informed consent and health declaration screening form 2.2 5-17 years old vaccine- ensure that the Parents/Guardian's Consent Form and Minor's Assent forms are signed	None	2 minutes	Covax Team- Registration Staff (City Health Office)

3. Client will answer the questions being asked by the screener	3.1 Examine and assess the client thru health history and vital signs taking 3.2 Carry out necessary medical disposition and referral if necessary	None	2 minutes	Covax Team- Screening/ Assessment Staff (City Health Office)
4. Wait while the Midwife/Doctor/Nur se prepares the vaccine	4.1 Verify and check the client's valid ID 4.2 Prepare and accomplish the client's vaccination card 4.3 Prepare the correct vaccine and vaccine dose 4.4 State the name/ vaccine brand to be administered 4.5 Administer the correct vaccine and vaccine dose following the 7 Rights of vaccine administration	None	3 minutes	Covax Team- Vaccinator (City Health Office)
5. Wait for further instructions and schedule of the next visit	5.1 Provide health teachings which includes the schedule of next visit, care of the injection site and its expected side effects 5.2 Issue the client's vaccination card	None	2 minutes	Covax Team- Vaccinator (City Health Office)
6. Wait and rest for 15 minutes	6.1.Post vaccination vital signs and monitoring a. WITH HISTORY OF ALLERGY b. WITHOUT HISTORY OF ALLERGY	None	15 minutes 30 minutes	Covax Team- Post Vaccination Staff (City Health Office)
	TOTAL:	None	28-43 minutes	

38. ISSUANCE OF COVID-19 VACCINE CERTIFICATE



The immunization program of the City Health Office is responsible for the encoding, uploading, and updating of the client's COVID-19 Vaccine Records at the VAS Line List Upload Tool.

Office or Division:	City Health Office- 1st f Consunji St. Brgy. Sto.	•		Building, A.	
Classification:	Simple				
Type of Transaction:	G2C- Government to C	itizen			
Who may avail:	Any person/individual who was vaccinated in the vaccination sites of the City of San Fernando, Pampanga.				
CHECKLIST OF	REQUIREMENTS WHERE TO SECURE				
1.1 Client's 1 valid ID	(1 original)	Any govern	ment issued valid	ID	
1.2 Client's COVID-19 original)	Vaccination Card/s (1	COVID-19	/accination Site		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirements to avail the service and register on the Vaxcert Logbook	1.1 Receive and review the valid ID and vaccination card/s	None	1 minute	LGU Vaxcert Staff (City Health Office)	
2. Provide all necessary information needed by the LGU Vaxcert Staff	2. Check the clients record in VAS Linelist Upload Tool Website A. NO RECORDS-Upload the missing linelist/s of the client B. IN CORRECT RECORD- edit the necessary details for updating C. UPDATE REQUEST STILL IN PROGRESS-Close any pending request	None	5 minutes	LGU Vaxcert Staff (City Health Office)	
3. Wait while the staff check the VaxcertPH website	3.1 Check the clients record in VaxcertPH Website 3.2 Download the Vaxcert and send to the clients respective email address	None	3 minutes	LGU Vaxcert Staff (City Health Office)	
	TOTAL:	None	9 minutes		

39. AVAILMENT OF DRUG DEPENDENCY ASSESSMENT



The Rural Health Units and Barangay Health Stations under the City Health Office ensure that individuals who are in need of Drug Dependency Evaluation will be assessed so as to determine the severity and nature of an individual's substance use disorder and recommend appropriate treatment regimen.

Office or Division:	City Health Office- Rural Health Units (RHU) RHU I (Dolores)- 2nd St. Looban, Brgy. Dolores, CSFP RHU II (Sindalan)- Gloria 1, Brgy. Sindalan, CSFP RHU III (San Nicolas)- Bulusan St., Brgy. San Nicolas, CSFP RHU IV (San Agustin)- Diretso St. Brgy. San Agustin, CSFP RHU V (Northville)- Northville 14, Phase 1, Brgy. Calulut, CSFP RHU VI (Super Health Center)- City Civic Center, Brgy. San Isidro, CSFP Barangay Health Stations in Barangays			
Classification:	Simple			
Type of Transaction:	G2C- Government to 0	Client		
Who may avail:	Clients requring Drug	Dependency E		
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE
Court Order requesting DDE duly signed by a judge and or court		At the respective Trial Court and/or Barangay Council requesting for Drug Dependency Evaluation (DDE) for those individuals who surrender themselves for assessment and rehabilitation		
2. Original Drug Test	result	DOH accredited drug testing hospital or stand alone laboratories		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-up the DDE request form	Interview and assist the client in filling-up the DDE request form	None	2 minutes	Rural Health Midwife/Barangay Health Station Nurse/DDE Trained Personnel (CHO/RHU/BHS)
2. Allow the Health Care Provider to do initial assessment of the documents required	2. Get the DDE court order and original Drug Test Results before referral to the physician	None	2 minutes	Rural Health Midwife/Barangay Health Station Nurse/DDE Trained Personnel (CHO/RHU/BHS)

3. Wait for the schedule of DDE NOTE: Schedule of DDE will be based on the availability of their Health Care Provider (within 24-72 hours- Mondays to Fridays)	3. Schedule of the DDE will be provided by the attending health care worker NOTE: Schedule of DDE will be based on the availability of their Health Care Provider (within 24-72 hours- Mondays to Fridays)	None	2 minutes	Rural Health Midwife/Barangay Health Station Nurse/DDE Trained Personnel (CHO/RHU/BHS)
4. Proceed to the health facility following the given schedule of Drug Dependency Evaluation	4. Conduct Drug Dependency Evaluation	None	20 minutes	Rural Health Midwife/Barangay Health Station Nurse/DDE Trained Personnel (CHO/RHU/BHS)
5. Listen to the instruction of the physician	5. Refer the results of the DDE to the physician	None	10 minutes	Rural Health Physician (CHO/RHU)
	TOTAL:	None	36 minutes	_

40. SECURING OF PRE-MARRIAGE ORIENTATION AND COUNSELING SCHEDULE



The City Population Office under the City Health Office ensures the issuance of Premarriage Orientation and Counseling Certificate as part of the process and requirement in obtaining Marriage License.

Office or Division:	City Health Office- City Population Office 2nd floor City Health Office Main Building, A. Consunji St. Brgy. Sto. Rosario, CSFP (beside City Hall)				
Classification:	Simple				
Type of Transaction:	G2C- Government	G2C- Government to Citizen			
Who may avail:	Residents who are 18 y/o and above- Pre-marriage Orientation Certificate Residents who are 18 y/o to 25 y/o- Pre-marriage Counselling Certificate				
CHECKLIST OF RE	EQUIREMENTS		WHERE TO SECU	JRE	
Receipt of applications (1 original)	of application for Marriage City Treasurer's Office located at the City Hall (Window 37)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present receipt of Marriage License Application	1. Check receipt and check for the upcoming Pre- marriage Orientation and Counseling schedule	P150.00 (included in the payment for Marriage License application)	1 minute	City Population Office Staff (City Health Office)	
2. Client fill-out pertinent information in the PMOC logbook	2. Assist the client.	None	2 minutes	City Population Office Staff (City Health Office)	
3. Client listen to the instructions given by Population office staff	3. Hand over the Pre- marriage Orientation and Counseling Application form to the client, gives instructions on how to fill-out the form and provide details of the scheduled orientation-counseling	None	2 minutes	City Population Office Staff (City Health Office/ CSWDO)	
	TOTAL:	None	5 minutes		



City Health Office

Internal Services

1. CITY HEALTH OFFICE CONFERENCE ROOM BOOKING REQUEST

The conference room of the City Health Office located at the 3rd floor CHO main building is a venue for the conduct of various CHO conferences, meetings, regular premarriage counseling/orientation, among others. To some extent the conference room may also be used by other departments of the LGU-CSFP.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2G- Governme	ent to Gove	rnment	
Who may avail:	Employees of th	e City Gove	ernment of San F	ernando, Pampanga
CHECKLIST OF REQ	UIREMENTS		WHERE TO	SECURE
1. Conference room red	quest form (2	3rd floor C	City Health Office	Procurement/
original copies)		Records/	Supply Section	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire the availability of the conference room at the CHO - Procurement/ Records/ Supply Section	1. Check booking and availability of the conference room	None	2 minutes	Administrative Aide, (Procurement /Records/ Supply Section)
2. Fill-out the conference room request form and submit to the CHO Central Receiving Unit located at the 2nd floor CHO main building	2.1 Receive accomplishe d request form 2.2 Approve/ disapprove and sign the request form	None None	2 minutes 2 minutes	Administrative Alde CHO Central Receiving Unit City Health Officer (CHO Administrative Health Care Division)
3. Follow-up approval and status of request and coordinate any changes or cancellation of reservation to the CHO	3. Relay the status of request and process any changes in the booking schedule	None	1 minute	Administrative Aide, (Procurement /Records/ Supply Section)
	TOTAL:	None	7 minutes	

2. ADMINISTRATIVE VEHICLE REQUEST

The City Health Office administrative vehicle is intended for the allocation of drugs and medicines, various supplies, etc. to its Rural Health Units, Birthing Stations, and Units/Section/Division of the City Health Office. It is also used for the transport of CHO personnel who will attend meetings, training, seminars, etc. as well as to carry out daily operations of the CHO Administrative Health Care Division.

1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Check booking and availability of the admin vehicle and make necessary recommenda tions 1. Check booking and availability of the admin vehicle and make necessary recommenda tions 1. Check booking and availability of the administrative Officer V, (CHO - Administrative Health Care Division)					
Type of Transaction: Who may avail: Employees of the City Health Office CHECKLIST OF REQUIREMENTS WHERE TO SECURE 1. Vehicle room request form (2 2nd floor City Health Office - Administrative Health Care Division CLIENT STEPS AGENCY ACTIONS FEES TO BE PAID 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Check booking and availability of the admin vehicle and make necessary recommenda tions None 2 minutes Administrative Health Care Division)		7	- Administra	tive Health Care D	Division
Transaction: Who may avail: Employees of the City Health Office CHECKLIST OF REQUIREMENTS 1. Vehicle room request form (2 original copies) CLIENT STEPS AGENCY ACTIONS TO BE PAID 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Inquire the availability of the admin vehicle and make health Care Division None 2 minutes Administrative Health Care Division		•			
Who may avail: Employees of the City Health Office CHECKLIST OF REQUIREMENTS WHERE TO SECURE 1. Vehicle room request form (2 original copies) 2nd floor City Health Office - Administrative Health Care Division CLIENT STEPS AGENCY ACTIONS FEES TO BE PAID PROCESSING TIME PROSON RESPONSIBLE 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Check booking and availability of the admin vehicle and make necessary recommenda tions None 2 minutes Administrative Officer V, (CHO - Administrative Health Care Division)	• •	G2G- Governmen	t to Governn	nent	
CHECKLIST OF REQUIREMENTS 1. Vehicle room request form (2 original copies) CLIENT STEPS AGENCY ACTIONS 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division None 2 minutes WHERE TO SECURE 2nd floor City Health Office - Administrative Health Care Division PERSON RESPONSIBLE Administrative Officer V, (CHO - Administrative Health Care Division)	Transaction:				
1. Vehicle room request form (2 original copies) CLIENT STEPS AGENCY ACTIONS 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division 1. Check booking and availability of the admin vehicle and make Health Care Division None 2 minutes Administrative Health Care Division Administrative Health Care Division None 2 minutes Administrative Health Care Division)	Who may avail:	Employees of the	City Health (Office	
CLIENT STEPS AGENCY ACTIONS TO BE PAID 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division Time PROCESSING TIME PROCESSING TIME PROCESSING TIME PROCESSING TIME Administrative Officer V, (CHO - Administrative Health Care Division) None 2 minutes Administrative Health Care Division	CHECKLIST OF RE	EQUIREMENTS WHERE TO SECURE			CURE
CLIENT STEPS AGENCY ACTIONS TO BE PAID 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division AGENCY ACTIONS FEES TO BE PAID PROCESSING TIME PROCESSING TIME PROCESSING TIME Administrative Officer V, (CHO - Administrative Health Care Division)	1. Vehicle room reque	est form (2 2nd floor City Health Office - Administrative			Administrative
CLIENT STEPS AGENCY ACTIONS TO BE PAID 1. Inquire the availability of the conference room at the CHO - Administrative Health Care Division AGENCY ACTIONS TO BE PAID PROCESSING TIME PROCESSING TIME PROCESSING TIME Administrative Administrative Officer V, (CHO - Administrative Health Care Division)	original copies)				
availability of the conference room at the CHO - Administrative Health Care Division	CLIENT STEPS		TO BE		PERSON RESPONSIBLE
	availability of the conference room at the CHO - Administrative	booking and availability of the admin vehicle and make necessary recommenda	None	2 minutes	(CHO - Administrative Health Care
conference accomplished room request form None 2 minutes Administrative A. CHO Central Receiving Unit to the CHO 2.2 Approve/ Central disapprove and (CHO)	room request form and submit to the CHO Central	request form 2.2 Approve/ disapprove and			Receiving Unit City Health Officer
form Sign the request None 2 minutes Health Care Division)	Necelving Offic		None	2 minutes	Health Care
coordinate any status of None 1 minute Officer V, (CHO -	approval and status of request and coordinate any changes or cancellation of reservation to	status of	None	1 minute	(CHO - Administrative Health Care
TOTAL: None 7 minutes		TOTAL:	None	7 minutes	



3. REQUEST FOR PHOTOCOPY OF RISO

The City Health Office - Procurement/ Records/ Supply Section is in-charge of the reproduction of various forms used by the different sections/ units/ divisions of the CHO so as to ensure proper management and allocation of CHO resources.

Office or Division:	City Health Office - Procurement/Records/Supply Section			
Classification:	Simple			11.7
Type of Transaction:	G2G- Governme	ent to Go	vernment	
Who may avail:	Employees of th	ne City He	ealth Office	
CHECKLIST OF REC	ST OF REQUIREMENTS WHERE TO SECURE			SECURE
Photocopy/ riso re original copy)	Photocopy/ riso request form (1 original copy) 3rd floor City Health Office Procurement Records/ Supply Section			e Procurement/
Printed copy of the be reproduced (**)		Concern	ned CHO Division/	Section/Unit
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-out the photocopy/ riso request form	1. Check availability of supplies for the reproduction of forms	None	2 minutes	Administrative Aide, (CHO - Procurement/ Records/ Supply Section)
2. Submit the photocopy/ riso request form and attach the printed	2.1 Receive accomplished request form	None	2 minutes	Administrative Alde CHO Central Receiving Unit
copy of the document to be reproduced at 2nd floor CHO Central Receiving Unit	2.2 Approve/ disapprove and sign the request form	None	2 minutes	City Health Officer (CHO Administrative Health Care Division)
3. Follow-up approval and status of request and/or coordinate any changes or cancellation of request to the CHO	3. Relay the status of request, once approved, process the request	None	5 minutes	Administrative Officer V, (CHO - Administrative Health Care Division)
	TOTAL:	None	11 minutes (**** may vary depending on the volume of request	

4. REQUEST FOR VARIOUS CITY HEALTH OFFICE SUPPLIES

The City Health Office - Procurement/ Records/ Supply Section and CHO Central Pharmacy is in-charge in the safekeeping and dispensing of various CHO supplies and health logistics such as janitorial and office supplies, drugs and medicines, medical supplies, other supplies, etc.

Office or Division:	City Health Office - Procurement/Records/Supply Section			
Classification:	Simple			
Type of Transaction:	G2G- Governmen	nt to Goverr	nment	
Who may avail:	Employees of the	City Health	o Office	
CHECKLIST OF RE	QUIREMENTS		WHERE TO S	ECURE
1. Supply Request copy)			City Health Office F Supply Section or	
Latest inventory corresponding in the correspo	of supplies and utilization report	Concerne	d CHO Division/Se	ection/Unit
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-out the request form and attach the latest inventory of supplies and corresponding utilization report and coordinate with the CHO Procurement and Supply Officer.	1. Validate, assess, and recommend based on the availability of requested supply	None	5 minutes	Administrative Aide, CHO - Procurement/ Records/ Supply Section Pharmacy IV (CHO Central Pharmacy)
2. Submit the request form, latest reports and recommendation of	2.1 Receive accomplished request form	None	2 minutes	Administrative Alde CHO Central Receiving Unit
the CHO Procurement and Supply Officer to 2nd floor CHO	2.2 Approve/ disapprove and sign the request form	None	3 minutes	City Health Officer (CHO Administrative Health Care Division)
Central Receiving Unit				

3. Follow-up approval and status of request	3. Relay the status of request, once approved, issue the RIS form, update stock cards and schedule date of delivery or pickup of supplies.	None	5 minutes	Administrative Aide, CHO - Procurement/ Records/ Supply Section Pharmacy IV (CHO Central Pharmacy
	TOTAL:	None	15 minutes	



5. REQUEST FOR TARPAULIN/STREAMERS/IEC MATERIALS, ETC.

The City Health Office – Health Education and Promotions Office (HEPO) is in- charge of the development and processing of all Information, Education and Communication (IEC) materials for all cluster health programs and health advocacy campaigns through the use of various media.

Office or Division:	City Health Office - Health Education and Promotions Office				
Classification:	Highly Technical				
Type of Transaction:	G2G- Governmen	t to Gove	rnment		
Who may avail:	Employees of the				
CHECKLIST OF RE			WHERE TO S	ECURE	
Printed copy/layout of re	equest (1 original)	Concern	ed CHO Division/S	Section/Unit	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Coordinate the layout and details of the request to the CHO-HEPO	1. Validate, assess, and recommend based on the layout and details of the request	None	10 minutes	OIC- HEPO (CHO- Health Education and Promotions Office)	
2. Submit the sample layout at the CHO	2.1 Receive accomplished request form	None	3 minutes	Administrative Aide CHO Central Receiving Unit	
Central Receiving Unit	2.2 Approve/ disapprove and sign the request form	None	3 minutes	City Health Officer (CHO Administrative Health Care Division)	
3. Follow-up approval and status of request	3. Relay the status of request, once approved, the CHO-HEPO shall coordinate the request to the City Information Office	None	5 minutes to 10 working days	OIC- HEPO (CHO- Health Education and Promotions Office)	
	TOTAL:	None	21 minutes to 10 working days		



City Employment Services Division

External Services

1. ISSUANCE OF MAYOR'S CLEARANCE



Mayor's Clearance is a provision from the 2017 Revised Revenue Code and Market Code of the City of San Fernando, Pampanga under Article 52, Section 205-207. It is a document issued to individuals who are residing in the city for local employment purposes.

Office or Division:		City Employment Service Division (CESD), 2nd Gate, 1st Floor, Miguel G. Baluyut Atrium, City Hall			
Classification:	Simple				
Type of Transaction:	G2C – Gove	ernment to Citizen			
Who may avail:	Residents of	f City of San F	ernando (P) wł	no secure	
	certification/	clearance for	purpose of emp	loyment	
	Residents of	f City of San F	Fernando (P) wł	no secure	
		•	` '		
		certification/clearance for purpose of entering military or police service			
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE	
Barangay Clearance	, -	Barangay H			
2. Police Clearance (Local Police			
3. Community Tax Ce	rtificate	City Treasu	rer's Office		
(Cedula) (1 original)	-				
4. Court Clearances (MTC/RTC				
5. Voter's ID/Certificat	COMELEC				
6. Official Receipt of F original)	City Treasurer's Office				
CLIENT STEPS	AGENCY ACTIONS	FEES PROCESSING PERSON TO BE TIME RESPONSIBLE PAID		PERSON RESPONSIBLE	
Secure Checklist of Requirements at Window 36 (Mayor's Permit Unit) for transaction references	Issue checklist for specific transaction	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)	
2. Submit complete documents at Window 36 (Mayor's Permit Unit) as listed on the checklist	2. Receive and check the requirements if complete then refer to Division Head for validation/verification	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)	

	2.1. Verify/ validate the requirements2.2. Issue an Order of Payment to the applicant	None	4 minutes 3 minutes	Administrative Officer IV/Labor and Employment Officer III (City Employment Service Division) Labor and Employment
				Assistant (City Employment Service Division)
3. Proceed to City Treasurer's Office – Window 4 for	Receive and review order of payment	PHP150 (for purpose of employment)	3 minutes	Local Revenue Collection
payment	3.1 Issue Official Receipt of Mayor's Clearance	PHP 50 (for purpose of entering military or police service)	3 minutes	Officer I (Permit and Licenses Division City Treasurer's Office)
4. Present Official Receipt and requirements at Window 36 (Mayor's Permit	4. Issue claim stub indicating the date and time of release	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)
Unit)	4.1. Prepare Mayor's Clearance	None	5 minutes	Labor and Employment Assistant
				(City Employment Service Division)
	4.2 Recommend Approval	None	5 minutes	PESO Manager/ Labor and Employment Officer III/ Administrative Officer IV (City Employment Service Division)
	4.3 Approve Mayor's Clearance	None	20 minutes (per batch)	City Administrator (City Administrator's Office)
5. Present the claim stub & sign upon	5. Release Mayor's Clearance	None	3 minutes	Labor and Employment

receipt of the Mayor's Clearance				Assistant (City Employment Service Division)
	TOTAL:	PHP150 (for purpose of employment) PHP 50 (for purpose of entering military or police service)	55 minutes	



2. ISSUANCE OF MAYOR'S WORKING PERMITS

Mayor's Working Permit is a provision from the 2017 Revised Revenue Code and Market Code of the City of San Fernando, Pampanga under Article 44, Section 177- 182. Under Section 179. An individual Mayor's Permit is required for workers or employees, whether temporary or permanent, working within the jurisdiction of the City.

temporary or permaner				Gate, 1st Floor,	
Office or Division:	Miguel	ient Service Div	ision(CLOD), Z	Gale, i i looi,	
Office of Division.		rium City Hall			
Classification:		rium, City Hall			
	Simple	amant to Citizar			
Type of Transaction:		nment to Citizer			
Who may avail:			ing workers or er		
		whether working on temporary or permanent basis, shall			
	secure the inc	secure the individual Mayor's Permit prescribed herewith;			
	Employees ar	nd workers in co	mmercial establ	ishments who	
			eds of the inquir		
	public	a to the daily he	odo or the inquir	ing or paying	
	Employees ar	nd workers in fo	od or eatery esta	ablishments	
	Employees ar	Employees and workers in night or night and day			
	establishment	establishments			
	All other empl	All other employees and persons who exercise their profession,			
	occupation or	calling within th	ne jurisdiction lim	its of the city.	
CHECKLIST OF RI	QUIREMENTS		WHERE TO SE	CURE	
1. Barangay Clearance	(1 original)	Barangay Ha	II		
2. Police Clearance (1 c	original)	Local Police	Station		
3. Community Tax Certi (Cedula) (1 original)	ficate	City Treasure	er's Office		
Official Receipt of Pa original)	yment (1	City Treasure	er's Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Secure Checklist of Requirements at Window 36 (Mayor's Permit Unit) for transaction References	1. Issue checklist for specific transaction	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)	

2. Submit complete documents at Window 36 (Mayor's Permit Unit) as listed on the checklist	2. Receive and check the requirements if complete then refer to Division Head for validation/	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)
	2.1. Verify/ validate the requirements	None	3 minutes	Administrative Officer IV /Labor and Employment Officer III
				(City Employment Service Division)
	2.3. Issue an Order of Payment to the applicant		3 minutes	Labor and Employment Assistant (City Employment Service Division)
3. Proceed to City Treasurer's Office	3. Receive and review order of		3 minutes	
Window 4 for payment	payment			Local Revenue Collection Officer I
	3.1 Issue Official Receipt of Mayor's Working Permit	PHP 150	3 minutes	(City Treasurer's Office -Permit and Licenses Division)
4. Present Official Receipt and requirements at Window 36 (Mayor's Permit Unit)	4. Issue claim stub indicating the date and time of release	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)
	4.1. Prepare Mayor's Working Permit	None	5 minutes	Labor and Employment Assistant (City Employment Service Division) PESO Manager/ Labor and
	4.2.Recommend Approval	None	5 minutes (per batch)	Employment Officer III/ Administrative Officer IV (City Employment

				Service Division)
	4.3. Approve Mayor's Working Permit	None	20 minutes (per batch)	City Administrator (City Administrator's Office)
5. Present the claim stub & sign upon receipt of the permit	5. Release Mayor's Working Permit	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)
	TOTAL:	PHP 150	55 minutes	·



3. JOB REFERRAL

Job Referral is one of the PESO's core services as stipulated by Republic Act 8759 (PESO Act of 1999) and as amended by Republic Act 10691. Job Referral is an employment facilitation process that includes registration, preliminary interview as well as job matching, referral and follow-up with employers regarding employment referrals. It provides employment information services to job seekers, both for local and overseas employment, and recruitment assistance to employers.

Office or Division:	City Employment Service Division (CESD), 2 nd Gate, 1 st Floor,			
	Miguel G. Baluyut Atrium, City Hall			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Jobseekers and Employers			
CHECKLIST OF F	REQUIREMENTS	WHERE TO SECURE		
A. For Job Seekers				
Resume (1 original) a credentials (1 photo-		From the Job Seeker		
B. For Employers				
1. Letter of Intent (1 orig	ginal)			
2. BIR 2303 (1 photoco		BIR		
3. DOLE certification Lo Agency (1 photocop		DOLE		
4. POEA License for Over photocopy)	verseas Agency (1	POEA		
5. Business Permit (1 p	hotocopy)	BLPD		
6. Job orders/Vacancies	s (1 photocopy)	From the I	Employer	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
A. For Job Seeker				
1. Secure Skills Registry System Form (SRS) at Window 35 (Job Referral & Placement Section) and fill-up properly	1. Issue SRS Form	None	3 minutes	Labor and Employment Assistant (City Employment Service Division)

2. Submit fully accomplished SRS and fill-up registration form at Window 35 (Job Referral & Placement Section)	2. Review the SRS if properly filled-up/accomplished	None	5 minutes	Labor and Employment Assistant (City Employment Service Division)
	2.1. Interview/ counsel the jobseekers and proceed to job matching	None	5 minutes	Labor and Employment Assistant (City Employment Service Division)
	2.2. If qualified, give referral slip/recommend dation letter	None	5 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
3. Wait while referral slip/recommendati on letter is being prepared	3. Prepare referral slip/recommend-dation letter (If the jobseeker asked for recommendation letter from the PESO Manager)		7 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
	3.1. Approve recommendation letter		10 minutes	PESO Manager (City Employment Service Division)
4. Sign upon receipt of the recommendation letter	4. Release referral slip/ recommendation letter	None	5 minutes	Labor and Employment Assistant (City Employment Service Division)
	TOTAL:	None	40 minutes	
B. For Employers 1. Submit a Letter of Intent addressed to the City Mayor thru the PESO Manager	Receive letter of ntent	None	5 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)

2. Proceed to Referral and Placement Section of City Employment Service Division if letter of intent was approved	2. Interview the employer	None	10 minutes	Administrative Officer IV/ Labor and Employment Officer III (City Employment Service Division)
3. Secure an Employer's Record Card (ERC) and fill- up accordingly	3. Issue the ERC	None	5 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
4. Submit Company profile, Business Permit, DOLE certification, POEA License, BIR 2303 and Job orders/ Vacancies with the ERC	4. Review all submitted documents (if it is an overseas agency – verify license & JO through POEA website)	None	20 minutes	Administrative Officer IV/ Labor and Employment Officer III (City Employment Service Division)
LING	4.1. Post submitted Job Orders/ Vacancies at the PESO bulletin board and SRS online	None	15 minutes	Labor and Employment Officer III/ Labor and Employment Assistant (City Employment Service Division)
	4.2. Provide the employer with referred applicants form or SRS	None	5 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)

		1	_	
5. Sort the needed manpower from the filed SRS and jot them down on the form of referred applicants to be provided by CESD (2 copies)	5. Get one copy of the Referred Applicants Form and check if it is properly filled- out. Give the original copy to the employer while the other copy will be kept for filing	None	30 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
6. Secure a letter of no objection/ Approval of Local Recruitment Activity	6. If the employer is qualified for Special Recruitment Activity or Local Recruitment Activity, prepare the No Objection or Approval letter	None	10 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
7. Wait for the release of Letter of No Objection	7. Recommendation and Approval of Letter of No Objection	None	15 minutes	PESO Manager (City Employment Service Division)
8. Present the Special Recruitment Authorization (issued by POEA) to the PESO before the Activity	8. File the SRA and arrange with employer the start of recruitment activity	None	5 minutes	Administrative Officer IV/ Labor and Employment Assistant (City Employment Service Division)
	TOTAL:	None	2 hours	



City Agriculture and Veterinary Office

External Services



The City Agriculture and Veterinary Office through the Agriculture Division issues Certificate for Bonafide Farmers only for those who are listed in the General Masterlist.

Office or Division:	<u> </u>	Agriculture Division – City Agriculture and Veterinary Office, Command and Control Center, Alasas, City of San Fernando, Pampanga			
Classification:	Simple	Simple			
Type of Transaction:		G2C – Government to Citizen			
Who may avail:	All farmers listed	in the Genera	al Masterlist whos	se location of farm	
	area is within the	jurisdiction of	the City of San		
		Fernando, Pampanga.			
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE	
1 Fornandina Card /	ID (1 photocopy)	City Mayors	City Mayors Office		
 Fernandino Card / Valid Government 			Employment		
photocopy)	1330E0 1D (1	Company of	Litipioyitient		
3. Barangay Certificat	e as bonafide	_			
	Barangay (1 original)	Barangay H	all		
4. TCT, if land owner		Land Regist	ration or DAR (C	I OA)	
CLIENT	AGENCY ACTIONS	FEES TO	PROCESSING	PERSON	
STEPS	AGENCT ACTIONS	BE PAID	TIME	RESPONSIBLE	
1. Fill-up the request	1. Check				
form and submit	requirements	None	10	Agricultural Extension	
documents	submitted /	INOTIC	minutes	Workers	
	presented			(CAVO)	
2. Undergo Interview	2. Conduct			Supervising	
	Interview	None	5 minutes	Agriculturist	
				(CAVO)	
3. Receive order of	3. Prepare the			Supervising	
payment and pay	certificate and			Agriculturist (CAVO)	
the corresponding fee at the City	issue order of payment	P 500.00	5 minutes	(CAVO)	
Treasurer's Office	payment			CTO Staff	
ricasarci s Office				(City Treasurers'	
4 \\\\-i\\ for the	4 Davison			Office)	
4. Wait for the	4. Review,			City Agriculturist	
approval and signing of the	approve and sign	None	3 minutes	City Agriculturist (CAVO)	
certificate	the certificate			(0/1/0)	
5. Receive Certificate	5. Release				
of Bonafide	Certificate for	Nia-a-	4	Supervising	
Farmer	Bonafide Farmer	None	1 minute	Agriculturist- (CAVO)	
				(0/1/0)	
	TOTAL:	P500.00	24 minutes		



2. REQUEST FOR ANIMAL VACCINATION & TREATMENT

The City Agriculture and Veterinary Office – Veterinary Services Division performs Animal Vaccination and Animal Treatment to all livestock farmers/ pet owners to prevent the spread of livestock and small animal diseases.

	T -			
Office or Division:	'		y Office, Command	
	Center, Alasas, Ci	ty of San Fe	ernando, Pampanga	
Classification:	Simple			
Type of Transaction:	G2C – Governmer	nt to Citizen		
Who may avail:	Livestock Farmers	& Pet Own	ners of City of San F	ernando,
	Pampanga			
CHECKLIST OF RE	REQUIREMENTS WHERE TO SECURE			CURE
None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Undergo assessment	1. Conduct Interview	None	10 minutes	Veterinarian / Livestock Inspector (CAVO)
Provide details of request	Fill-up the log book for proper documentatio n	None	5 minutes	Veterinarian / Livestock Inspector (CAVO)
3. Handle the animal properly for administration of vaccine / treatment	3. Administer treatment/ vaccine a. for walk in b. for on site	a. For Walk in 5 minutes/ animal b. For on-site 30 minutes to 4 hrs. depending on the distance of the site		
4. For vaccination: Wait and receive the Dog Card or Vaccination Record	4.Fill-up the Dog Card or Vaccination Record	None	1 minute	Veterinarian / Livestock Inspector (CAVO)
	TOTAL:	None	21 minutes	



3. REQUEST FOR IPM/INM/CROP PRODUCTION/LIVESTOCK PRODUCTION/ IEC/ LIVELIHOOD SEMINAR

The City Agriculture and Veterinary Office provides technical assistance by means of consultations, (IPM/INM/CROP PRODUCTION/LIVESTOCK PRODUCTION/IEC/LIVELIHOOD SEMINAR) seminars and trainings to walk-in farmers or clientele. Consultations may be accommodated by the assigned technical staff.

Office or Division:	City Agriculture and Veterinary Office, Command and Control Center,				
	Alasas, City of San Fern	ando, Pamp	anga		
Classification:	Simple	Simple			
Type of	G2C – Government to C	G2C – Government to Citizen/G2G-Government to Government			
Transaction:					
Who may avail:	Bonafide Fernandino Cit				
	T OF REQUIREMENTS WHERE TO SECURE			URE	
None	None			,	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Undergo Assessment	1. Conduct Interview	NONE	3 minutes	Agricultural Extension Workers (CAVO)	
2. Provide Details of the Request	Fill-up logbook for proper documentation	NONE	2 minutes	Agricultural Extension Workers (CAVO)	
3.Discuss the issue / concern to the personnel / assign technical staff	3.a. Consultation/Technic al Assistance: Discuss the issue / answer the queries/conduct consultation/technical assistance to the walk-in client	NONE	10 minutes- 1 hour	Agricultural Extension Workers (CAVO)	
	3.b Request for seminars/trainings: Log the details of seminars or trainings, schedule the date, venue and target audience	NONE	10 minutes	Agricultural Extension Workers (CAVO)	
	TOTAL:	NONE	15 minutes to 1 hour & 15 minutes		



4. REQUEST FOR MEAT INSPECTION CERTIFICATE (MIC) AND / OR NATIONAL MEAT AND MEAT PRODUCTS CERTIFICATE (NMMPIC)

The City Agriculture and Veterinary Office – Veterinary Services Division issues the MIC and/ or NMMPIC to all carcasses inspected which passed the standards at the City Slaughterhouse.

Office or Division:	City Agriculture and				
	New Public Market,	Del Pilar, Ci	ty of San Fernand	10	
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	Meat Dealers & Vendors				
CHECKLIST OF R	REQUIREMENTS WHERE TO SECURE			CURE	
NONE		NONE			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill-up the request form	Receive Request / Accommodate Dealer or requesting person	None	2 minutes	Veterinarian / Meat Inspector (CAVO)	
2. Undergo Assessment	2. Assess, check and validate request from Animal Incoming Report	None	3 minutes	Veterinarian / Meat Inspector (CAVO)	
3. Wait and receive the MIC or NMMPIC	3. Fill-up and Release MIC or NMMPIC	None 5 minutes / MIC or NMMPIC Veterinary (CAVC)			
	TOTAL:	None	10 minutes		

5. REQUEST FOR VEGETABLE SEEDS AND VEGETABLE AND FRUIT BEARING SEEDLINGS



The City Agriculture and Veterinary Office through the Agriculture Division accommodates requests for vegetable seeds and vegetable and fruit bearing seedlings from individual clients / farmers, associations or institutions to eradicate hunger, and ensure sufficiency of supply of vegetables / fruits in the community.

a. For Seeds:

Office or Division:	Agriculture Division – City Agriculture and Veterinary Office,				
	Command and Contro	ol Center, Al	asas, City of San	Fernando,	
	Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Government to	Citizen/G2	G-Government to	Government	
Who may avail:	Bonafide Fernandino	Citizen			
CHECKLIST OF R	EQUIREMENTS	V	WHERE TO SEC	JRE	
None		None			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PERSON RESPONSIBLE		
1. Undergo Assessment	1. Conduct Interview	NONE	3 minutes		
2. Provide details of the Request	Fill-up logbook for proper documentation	NONE	3 minutes	Agricultural Extension	
3. Receive vegetable seeds	3. Release vegetable seeds (as per availability)	NONE	Workers (CAVO)		
	TOTAL:	None	7 minutes		

b. For Seedlings:

Office or Division:	Agriculture Division – 0	City Agricu	Iture and Veterina	ary Office,	
	Command and Control	Command and Control Center, Del Rosario, City of San Fernando,			
	Pampanga and City Nu	ursery Der	nonstration Site, F	Himlayan	
	Fernandino, Barangay	-		•	
Classification:	Simple	•			
Type of Transaction:	•	G2C – Government to Citizen/G2G-Government to Government			
Who may avail:	Bonafide Fernandino Citizen				
CHECKLIST OF R				CURE	
None		None			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Undergo Assessment	1. Conduct Interview	NONE	3 minutes	Agricultural Extension Workers (CAVO)	
2. Provide details of request	2. Interview client and fill –up Request/ Release Form	NONE	10 minutes	City Agriculturist- CAVO/ Supervising Agriculturist- (CAVO)	
3. Present Release Form	3. Log the number of seedling for dispersal and return the Release Form to the beneficiary	NONE	2 minutes	Agricultural Extension Workers (CAVO)	
4. Proceed to the nursery and give the Request/Release Form and wait for the release of seedlings	4. Check and Validate Request / Release Form and prepare all items required	NONE	5-30 minutes (depends on volume request)	Farm Foreman(Nursery Supervisor) (CAVO)	
5. Sign the Acknowledgeme nt Form and Receive the items	5. Release the items	NONE	5-30 minutes (depends on volume request)	Nursery Worker- (CAVO)	
TOTAL: None 1 hour & 15 minutes					



Community Affairs Division

External Services

1. APPLYING FOR A NEW FERNANDINO ACCESS CARD (ID) (FERNANDINO KAYABE KARD)

The Fernandino Access Card is a resident identification ID card issued to constituents of the City of San Fernando, Pampanga. It can be used in availing basic services being provided by the City. It can be acquired from the Community Affairs Division of the City Mayor's Office.

Office or Division:	Office of the Community Affairs Division (CAD), 2 nd gate entrance, Window (53-54) at the 2nd floor of the newly constructed building beside the CESD Office, City Hall.			
Classification:	Simple			
Type of Transaction:	G2C – Government to Ci	tizen		
Who may avail:	Fernandino's (San Ferna	ndo Reside	ents only) 0 to d	eath of age
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	
Barangay Certification	ation or Clearance	Respectiv	ve Barangay Ha	ll where the
(1 original copy)		client's re	sidence is situa	ted.
2. Any of the following	ng valid IDs with proof of			
residency in the (City of San Fernando,			
Pampanga (1 ph	otocopy)			
Company ID		Client's C	ompany of emp	loyment
Philippine Passper	ort		Regional Office	-
Driver's License		LTO	<u> </u>	
UMID Card		SSS or GSIS		
Philhealth ID		Philhealth Local Insurance Office		
TIN Card		BIR		
Postal ID		PhilPost		
Voter's ID		Comelec		
Professional Reg	ulations Commission ID	PRC		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Prepare and submit the necessary requirements needed for issuance of FAC ID	Review the requirements and Issue application form	None	5 minutes	Community Affairs Officer II (Community Affairs Division)
Fill out Application form	Review the filled-out application form	None	6 minutes	Community Affairs Officer II (Community Affairs Division)
Log in on the logbook all information needed	Assist client on inquiries regarding the information needed on the log book	None	3 minutes	Community Affairs Officer II (Community Affairs Division)

 4. Wait while data is being encoded on the system 4.1 Confirm the data/informati on encoded 	4. Encode the data /Information on the database/system 4.1 Ask client to confirm the accuracy of encoded data	None	8 minutes	Community Affairs Officer II (Community Affairs Division)
4. Have photo taken	5. Capture photo of client	None	2 minutes	Community Affairs Officer II (Community Affairs Division)
5. Affix signature on the signature pad	6. Ask client to affix signature on the signature pad and check signature for authenticity	None	5 minutes	Community Affairs Officer II (Community Affairs Division)
6. Claim the Fernandino Access Card	7. Print and Release the Fernandino Access Card	None	1 minute	Community Affairs Officer II (Community Affairs Division)
	TOTAL:	None	30 minutes	

2. APPLYING FOR THE REPLACEMENT OF LOST FERNANDINO ACCESS CARD (ID) (FERNANDINO KAYABE KARD)

The Fernandino Access Card is a resident identification ID card issued to constituents of the City of San Fernando, Pampanga. It can be used in availing basic services being provided by the City. The Community Affairs Division of the City Mayor's Office ensures the issuance of replacement ID for lost Fernandino Access Card.

Office or Division: Classification: Type of Transaction: Who may avail:	Office of the Community Affairs Division (CAD), 2 nd gate entrance, Window (53-54) at the 2nd floor of the newly constructed building beside the CESD Office, City Hall. Simple G2C – Government to Citizen Fernandino's (San Fernando Residents only) 0 to death of age			
CHECKLIST OF REQU	JIREMENTS		WHERE TO SECU	JRE
None	4051101/	None	DD00E00H1	DEDOON
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PERSON RESPONSIBLE
1. Inform in-charge personnel of the intent to claim a replacement ID in lieu of the lost Fernandino Access Card. 1.1 Secure order of payment	 Verify clients records on the system 1.1 Issuanc e of order of payment 	None	5 minutes	Community Affairs Officer II (Community Affairs Division)
2. Proceed to the City Treasurer's Office and pay the required fees by showing the order of payment	2. Accept payment and issue Official Receipt	PHP 100	20 minutes	Collecting Officer City Treasurer's Office
 Go back to the CAD Office and present Official Receipt as proof of payment. 	3. Verify OR and register the OR No. on the log book	None	3 minutes	Community Affairs Officer II (Community Affairs Division)

4. Wait for the re- printing of FAC ID	4.Reprint Fernandino Access Card ID of the client	None	3 minutes	Community Affairs Officer II (Community Affairs Division)
5. Claim the Fernandino Access Card	5. Release Fernandino Access Card	None	2 minutes	Community Affairs Officer II (Community Affairs Division)
TOTAL:		PHP100	33 minutes	



City Social Welfare and Development Office

External Services



1. ISSUANCE OF MINOR TRAVEL ASSESSMENT

The primary objective of the issuance of Minor Travel Assessment is to protect minors from trafficking, abuse, exploitation or improper influence by person/s engaged in trafficking.

Office or Division:	City Social Welfare and	Development Office		
	2nd Flr., City Hall, Cons	sunji St., Sto Rosario Poblacion, City of San		
	Fernando, Pampanga			
Classification:	Simple			
Type of	G2C – Government to C	Citizen		
Transaction:				
Who may avail:	1. a minor traveling ald	one		
	2. a minor accompanio	ed by a person other than his/her parents		
	Note: If the miner is to	avaling with aither perent, no peed for any lf the		
		aveling with either parent, no need for one. If the		
	<u> </u>	the legal guardian, no need for one (but one must		
	nave all documents to	prove that you are indeed the legal guardian).		
CHECKLIST OF F	REQUIREMENTS WHERE TO SECURE			
1. Duly Accomplished	ed Form	CSWDO/DSWD		
2. Birth Certificate (1 original, 1 photocopy)	Philippine Statistics Authority		
3. Marriage Contact	t of Parents (1 original,	Philippine Statistics Authority		
1 photocopy)				
	Marriage <i>in case of</i>	Philippine Statistics Authority		
illegitimate minor (1				
	indonment in case	Legal Officer		
parents are married b	out separated (1			
photocopy)				
6. Certified True Co		City Civil Registry Office		
	of the parents in case			
either or both parents				
deceased (1 photoco		1 1 0 / 6		
	rit of Consent or written	Legal Officer		
consent of BOTH par	ents (1 original, 1			
photocopy)	to with anadiman	Parent/s of the Minor		
8. Valid ID of parent	•	raienvs of the Millor		
signature (1 photocopy 9. Original colored p	passport-size picture	Any Photo Capturing Shop		
white or red backgrou		Any Fhoto Capturing Shop		
write of red backgrou	πια (∠ μοδ <i>)</i>			

 10. Affidavit of Support and Certified copy of any evidence to show financial capability of sponsor such as: (1 original and 1 photocopy of any of the following) § Certificate of Employment § Latest Income Tax Return § Bank Statement, ect. 11. Copy of Passport of minor's travel companion (1 photocopy) 12. Certificate from the Airlines in case of unaccompanied minor (1 photocopy) 		Employer Bureau of Internal Revenue Respective Bank Department of Foreign Affairs Respective Airline		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	TIME	PERSON RESPONSIBLE
Prepare the requirements to avail the service and accomplish the application form at the CSWD Office	Issue application form	None	10 minutes	Registered Social Worker (City Social Welfare & Development Office)
Wait for your turn for the staff to check the requirements	2. Review the submitted documents	None	10 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
3. Sign-in in the Clients' Logbook of the CSWD Office	3. Hand over the logbook to the client upon checking of documents	None	2 minutes	Social Welfare Assistant/ Social Welfare Officer
4. Attend interview for assessment	4. Conduct Interview and prepare Minor Travel Assessment Report	None	40 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
5. Answer further queries for clarification	5. Review and finalize Minor Travel Assessment Report	None	30 minutes	

6. Pay the required fees at the City Treasurer's Office by showing the Order Payment Slip	6. Ensure accurate and complete information and attachments of the report	Php 300.00 (good for one year)	10 minutes	Administrative Aide (City Treasurer's Office)
7. Submit official receipt to the CSWD Office	7. Receive and check the receipt and record to the logbook	None	10 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
8. Sign in in the CSWDO logbook for recording purposes	8. Hand over the logbook to the client for sign in and release	None	5 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
9. Claim the Minor Travel Assessment	9. Release of Minor Travel Assessment	None	3 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
	TOTAL:	Php 300	2 Hours	

2. ISSUANCE OF SOLO PARENT ID

A Solo Parent ID is a government-enforced ID for solo or single parents in the Philippines. Solo parents who carry such ID can enjoy certain government discounts and benefits. These rules shall be known and cited as the Rules and Regulations Implementing Republic Act No. 8972, more commonly known as the Solo Parents' Welfare Act of 2000

Office or	ity Social Welfare a	and Development Office			
Division:	City Hall, A. Consu	nji St., Sto Rosario Poblacion, City of San			
	ernando, Pampanç	да			
Classification:	Highly Technical				
Type of	G2C – Governme	G2C – Government to Citizen			
Transaction:					
Who may avail:		o gives birth as a result of rape and other crimes			
	2. Parent left so				
		other/father who has preferred to keep and rear her/his			
	child/children alon 4. Any other per	son who solely provides parent care			
	•	ember who assumes the responsibility of head of family			
	o. Tary raining the	5. Any family member who assumes the responsibility of flead of family			
	•	ble in the issuance of a Solo Parent ID, applicant must elow 18 years old and shall comply with all the			
	requirements	elow to years old and shall comply with all the			
CHECKLIST OF RE	<u> </u>	WHERE TO SECURE			
NEW APPLICANTS					
		00/4/00//00/4/0			
Duly Accomplis	shed Form	CSWDO/DSWD			
2. Barangay Certi	fication (1	Respective barangay			
original)					
3. Birth Certificate	e of Minor	Philippine Statistics Authority			
Children					
(1 photocopy of each minor)		Any Photo Conturing Chan			
Original colored 1x1 picture white or red background (2 pcs)		Any Photo Capturing Shop			
5. Original colored 2x2 picture		Any Photo Capturing Shop			
white or red background (1 pc)		The Captaining Shop			
	- ··· · · · · · · · · · · · · · · · · ·				
	rd (1 photocopy)	City Mayor's Office			

8. Copy of Death Censpouse is dead (1 photocopy)	rtificate if	City	Civil Registry	Office	
9. Medical Certificate PWD (1 photocopy)	if spouse id	Atter	nding Physicia	an	
Certificate of Determined (1 photocopy) is detained (1 photocopy)		Dete	ntion Facility		
11. Copy of Court Declaration annulled (1 photocopy)		Trial	Court		
12. Affidavit of Solo Parent/Guardianship (1 photocopy)		Lega	l Officer		
13. Income Tax Return (1 original, 1 photocopy	•	Bure	au of Interna	I Revenue	
		RE	NEWAL		
Surrender of Old	Solo Parent ID		Client		
Original colored red background (2 pcs		e or	or Any Photo Capturing Shop		
3. Original colored red background (1 pc)		e or	or Any Photo Capturing Shop		
4. Fernandino Card (1 photocopy)		City Mayor's Office		
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Accomplish the Solo Parent Application Form at the CSWD Office	1. Issue application form		None	10 minutes	Solo Parent Focal Person (City Social Welfare &
Submit the Application Form	2.Review duly accomplished form				Development Office)
3. Answer interview questions for initial validation	3.Conduct bried orientation on 8972 and facilitation interview to cli	RA itate	None	45 minutes	Solo Parent Focal Person (City Social Welfare & Development Office)

4. Receive List of Solo Parent ID requirements	4. Issue Solo Parent ID Checklist Tracking Form indicating the date of submission of requirements	None	10 minutes	Solo Parent Focal Person (City Social Welfare & Development Office)
5. Completion of requirements from the checklist provided	5. Attend to clients queries re: requirements	None	1-3 days	Solo Parent Focal Person (City Social Welfare & Development Office)
6. Submit complete requirements to the Solo Parent Focal Person at CSWD Office	5.Ensure accurate and complete requirements and attachments for application of Solo Parent ID	None	15 minutes	Solo Parent Focal Person (City Social Welfare & Development Office)
7. Wait for the approval of Solo Parent ID Application from the given date	6.Conduct initial validation and/or home visitation 6.1. Processing of	None	27 days	Solo Parent Focal Person (City Social Welfare & Development Office)
	Solo Parent ID			
8. Claim the Solo Parent ID from the Solo Parent Focal Person at the CSWD Office	7. Release of Solo Parent ID	None	10 minutes	Solo Parent Focal Person (City Social Welfare & Development Office)
	TOTAL:	None	30 days, 1 Hour	& 30 minutes
	TOTAL:	INOLIE	person shall inforthe status of his/lethirty (30) workin such and shall rethe agency/instituassistance as an and Regulations Act No. 8972, me	er/Solo Parent focal rm the solo parent of ther application within g days from the filing of equire him/her to visit ution providing the od cited in the Rules Implementing Republic ore commonly known nts' Welfare Act of

3. ISSUANCE OF PERSONS WITH DISABILITY ID

The primary objective of the issuance of PWD ID is to provide persons with disabilities the opportunity to participate fully into the mainstream of society by granting them at least 20% discount and exemption from the value added tax on the sale of certain goods and services.

Office or	Person	with Disability Affairs C	Office		
Division:	City Hall, A. Consunji St., Sto Rosario Poblacion, City of San Fernando,				an Fernando,
	Pampanga				
Classification:	Simple				
Type of	G2C -	Government to Citizen			
Transaction:					
Who may avail:	Danala		المالية المالية	talla atroal an a a	
	•	with long term physica may hinder their full and			•
CHECKLIST		QUIREMENTS	•	VHERE TO SEC	•
1. Duly Accomp			CSWDO/DS		JUNE
, ,					
original, 1 photoco		of Residency (1	Respective Barangay		
3. Valid ID with	signatur	e (1 original, 1	Client		
photocopy)	_	-			
4. Original color	ed 1x1 _l	picture white or red	Any Photo Capturing Shop		
background (2 pc	s); in ca	se the client has			
apparent disability	, 3r pict	ture whole body must			
be attached					
	-	original, 1 photocopy)	Referral to City Medical Doctor/Rural Health		
indicating his/her			Physician		
CLIENT STEPS	3	AGENCY ACTIONS		PROCESSING	
			BE PAID	TIME	RESPONSIBLE
1. Prepare the					PWD Focal
requirements to av	ail the	Issue application			Person
services and accor		form	None	10 minutes	(City Social Welfare &
the application for	•				Development
the PDAO	11 UL				Office)
					,

	TOTAL:	None	3 days, 1 Hour & 32 minutes	
7. Claim the PWD ID	7. Release of PWD	None	10 minutes	PWD Focal Person (City Social Welfare & Development Office)
6. Sign in in the CSWDO logbook for recording purposes	6. Hand over the logbook to the client for sign in and release	None	5 minutes	PWD Focal Person (City Social Welfare & Development Office)
5. Wait for the approval of PWD ID Application from the given date	5. Processing of PWD ID	None	3 days	PWD Focal Person (City Social Welfare & Development Office)
Answer further queries for clarification	4. Conduct Interview and assessment	None	40 minutes	PWD Focal Person (City Social Welfare & Development Office)
3. Sign in in the Clients' Logbook at the CSWD Office	3. Hand over the logbook to the client upon checking of documents	None	2 minutes	PWD Focal Person (City Social Welfare & Development Office)
2. Wait while the staff check the requirements	2. Review and verify the submitted documents 2.1 Checking the validity and accuracy of the medical certificates presented; request for other supporting documents when necessary	None	25 minutes	PWD Focal Person (City Social Welfare & Development Office)

4. ISSUANCE OF CERTIFICATE OF INDIGENCY

Certificate of Indigency it is one of the in availing programs and services that are available in other institutions as such to avail free legal assistance and avail discounts which therefore need in-depth assessment from the City Social Welfare and Development Office.

Office or	City Social Welfare and Development Office				
Division:	-	City Hall, A. Consunji St., Sto Rosario Poblacion, City of San Fernando,			
2111010111	Pampanga				
Classification:	Complex				
Type of	G2C – Government	to Citizen			
Transaction:					
Who may					
avail:	Indigent individuals	and families in the community			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE			
Correction of Bi	rth Certificate				
1. Barangay Ind	digency of the Client	Respective barangay			
(1 original)					
	with signature of the	Client			
client					
(1 original, 1 pho					
3. Cedula of clie	ent (1 original, 1	Barangay Hall or City Treasurer's Office			
photocopy)	· · · · · · · · · · · · · · · · · · ·				
4. Birth Certifica		Philippine Statistics Authority or City Civil Registry Office			
<u>`</u>	ginal, 1 photocopy)	City Civil Bogistry Office			
City Civil Registr	ral Form from the	City Civil Registry Office			
Legal Assistanc	<u> </u>				
	digency of the Client	Respective barangay			
(1 original)	ligericy of the Chefit	Nespective barangay			
	with signature of the	Client			
client	with orginators of the	Chorte			
(1 original, 1 pho	otocopy)				
3. Cedula of the client (1 original)		Barangay Hall or City Treasurer's Office			
Proof of Income of the client		Payslip- Employer			
(Payslip/Income Tax Return/Bank		Income Tax Return (ITR)- Bureau of Internal Revenue			
Statement) (Present original, 1		Bank Statement- Respective Bank			
photocopy of any)					
5. For Court ca	ases: Copy of Court	Trial Court			
Order/Resolution	n (Present the				
original, 1 photo	copy of any)				

Land Contract/Title/Res	6. For Property concerns: Copy of Land Contract/Title/Resolution (Present original, 1 photocopy of any)		sessor's Office)	
Scholarship Grants/ Ed	lucational As	sistance			
Barangay Indigency Parent/Guardian (1 original)		ı	tive barangay		
 Barangay Certificate Residency of the studer (1 original) 			tive Barangay		
3. Any valid ID with sig original, 1 photocopy)	nature (1	Client			
4. For Guardians: Cer Guardianship)/Affidavit Guardianship (1 Original)		Baranga	ay/Legal Office	е	
5. Copy of Registration Confirmation/Certificate Enrolment of the studen	5. Copy of Registration/Admission Confirmation/Certificate of Enrolment of the student				
6. Cedula of the parent original)	/guardian (1	Barangay Hall or City Treasurer's Office			
7. Proof of Billing (Elec Water Bill, etc.)	tric Bill,	Respective Billing Companies			
Point of Service (POS)	Financially In	capable			
Medical Certificate/C Client (1 Original)	Clinical Abstrac	ct of the	e Hospital where the client is admitted		
Duly Accomplished I Registration Form of the					
Barangay Indigency Subject/Parents/Guardia			Respective Barangay		
Barangay Certificate of Residency of Client (1 original)		of			
(1 original, 1 photocopy)	5. Any valid ID with signature of the cli (1 original, 1 photocopy)		Client		
CLIENT STEPS	AGENCY AC	CTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Proceed to the CSWDO to get a queuing number. Wait for your turn	1. Issue a queuir numbe	ng	None	15 minutes	Social Welfare Assistant/ Social Welfare Officer

2. Inquire for the details regarding the availment of the desired service	2. Answer queries the client may ask regarding the service			(City Social Welfare & Development Office)
	2.1 Review and verify client's requirements			
3. Attend and answer questions in the interview for the assessment	3. Conduct comprehensive interview for intake	None	30 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
4. Wait for the approval of the Certificate of Indigency	4. Review and finalize Certificate of Indigency	None	10 minutes	
	4.1 For Legal Assistance, home- visitation is conducted	None	1-3 days	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
5. Receive the Certificate of Indigency and sign in the logbook indicating the released of the certificate	5. Give instruction to client on what to do next relative to transaction to other offices	None	20 minutes	Social Welfare Assistant/ Social Welfare Officer (City Social Welfare & Development Office)
	TOTAL:	None	3 days and 1 hour, 15 minutes	

5. ISSUANCE OF GENERAL INTAKE SHEET

The Expanded Assistance to Individuals in Crisis Situation (E-AICS) is part of the City Social Welfare and Development Office protective services for the poor, marginalized and vulnerable/disadvantaged individuals.

0.00	0 0	10 1 00	
Office or	City Social Welfare and Development Office		
Division:	City Hall, A. Consunji St., Sto Rosario Poblacion, City of San Fernando,		
	Pampanga		
Classification	Complex		
:			
Type of	G2C - Government	to Citizen	
Transaction:			
Who may			
avail:	Indigent individuals	and families in the community	
	_	red person can process for the assistance provided that	
	the said has an auti	horization letter and valid ID of the client/patient.	
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE	
Medical Assist	ance		
1. Barangay (Certification of	Respective Barangay	
Residency of th	ne client and		
beneficiary (1 C	Original)		
2. Barangay I	ndigency of the	Respective barangay	
client and bene	ficiary (1 original)		
3. Valid ID wit	th signature of the	Client	
	ficiary (Present		
original, 1 photo	• `		
	equest/Bill/Costing	Hospital where the client was admitted	
of the client (1			
photocopy)	3 ,		
	Certificate/Clinical		
5. Medical (Jerundate/Climical		
	ataaanu)		
(1 original, 1 ph			
Educational As			
 Barangay Certification of 		Respective Barangay	
Residency			
(1 Original)			
	/ Indigency of the	Respective barangay	
Subject/Parent/	/Guardian (1		
original)			

3. For Guardians: C Guardianship)/Affidavit Guardianship (1 Original)		Barangay	/Legal Office			
School ID and ar of parent (Present original)	•	Client				
photocopy)	iridi, i					
5. Copy of		School wh	nere the clien	t is enrolled		
Registration/Admission						
Confirmation/Certificate Enrolment	e or					
Burial Assistance						
Barangay Certific	cation of Resi	idency of	Respective	Barangay		
the client and beneficia	ary (1 Origina	l)	-			
2. Barangay Indige (1 original)	ncy of the be	neficiary	Respective	barangay		
3. Valid ID with sign	nature of the	client and	Claimant			
1	beneficiary (Present original, 1 photo					
4. Death Certificate (ICTC,1 photocopy back	•	nal or	City Civil Registry Office			
5. Funeral Contract (nal, 1	Funeral Ser	vice		
photocopy)	_					
CLIENT STEPS	AGENCY A	ACTIONS	FEES TO	PROCESSI	PERSON	
Prepare the	1.Issue a qu	ıeı leina	BE PAID	NG TIME	RESPONSIBLE	
requirements to avail	number	louding				
the service and						
proceed to the						
CSWDO to get a					Social Welfare	
queuing number	0.01	1	None	15 minutes	Assistant/ Social	
2. Submit complete	2. Check an all the requi	•			Welfare Officer	
requirements written in the <i>Checklist Form</i>	submitted	rements				
from the City Mayor's	Gabriilled					
Office						
3. Attend and	3. Conduct					
answer questions in	comprehens		None	45 minutes	Social Welfare Assistant/ Social	
the interview for the	interview for	r intake	INOLIC	40 minutes	Welfare Officer	
assessment						

4. Wait for the approval of the General Intake Sheet	4. Review and finalize	None	30 minutes	Social Welfare Assistant/ Social Welfare Officer
5. Receive the General Intake Sheet and sign in the logbook indicating the released of the certificate	5. Give instruction to client on what to do next relative to transaction to other offices	None	20 minutes	Social Welfare Assistant/ Social Welfare Officer
	TOTAL:	None	1 hour and 50 minutes	

6. ISSUANCE OF SOCIAL CASE STUDY REPORT



The Expanded Assistance to Individuals in Crisis Situation (E-AICS) is part of the City Social Welfare and Development Office protective services for the poor, marginalized and vulnerable/disadvantaged individuals.

Office or Division:	City Social We	elfare and Development Office	
	City Hall, A. Co	onsunji St., Sto Rosario Poblacion, City of San	
	Fernando, Pampanga		
Classification:	Complex		
Type of	G2C – Govern	ment to Citizen	
Transaction:			
Who may avail:	Indigent indiv	viduals and families in the community	
	Note: Only	authorized person can process for the assistance	
	provided that	t the said has an authorization letter and valid ID of the	
	client/patient	•	
CHECKLIST OF REC	QUIREMENTS	WHERE TO SECURE	
Medical Assistance			
Barangay Certifica		Respective Barangay	
Residency of the clien			
beneficiary (1 Original			
2. Barangay Indigend	•	Respective barangay	
and beneficiary (1 original an		Oliver	
3. Valid ID with signa		Client	
client and beneficiary original, 1 photocopy)	(Present		
4. Hospital Request/E	Rill/Costing of	Hospital where the client was admitted	
the client (1 original, 1	_	Troophar where the orient was darritted	
5. Medical Certificate/0		-	
Abstract	Cillical		
(1 original, 1 photocop	nv)		
`			
Educational Assista		Despertive Parangey	
Barangay Certification Residency	ication of	Respective Barangay	
(1 Original)			
Barangay Indigency of the		Respective barangay	
Subject/Parent/Guard	=	Troopeouve barangay	
3. For Guardians.	` ' '	Barangay/Legal Office	
Guardianship)/Affidav			
Guardianship			
(1 Original)			

4. School ID and ar parent (Present original photocopy)		Client			
photocopy) 5. Copy of Sconding Registration/Admission Confirmation/Certificate of Enrolment			ol where the o	client is enrolled	
Burial Assistance					
Barangay Certific	cation of Reside	ncy	Respective	Barangay	
of the client and benefi		•	·	0 ,	
2. Barangay Indige	ncy of the benef	ficiary	Respective	barangay	
(1 original)	-		-		
3. Valid ID with sign	nature of the clie	ent	Claimant		
and beneficiary (Prese	nt original, 1				
photocopy)					
4. Death Certificate (Present original	or	City Civil Re	egistry Office	
CTC,1 photocopy back	& front)				
5. Barangay Certifica	tion of Residenc	cy of	Respective	Barangay	
the client and beneficiary (1 Original)					
	, ,				
6. Picture of funeral s	- ' - '		Beneficiary		
	- ' - '	•	Beneficiary FEES TO	PROCESSING	PERSON
6. Picture of funeral s	service		•	PROCESSING TIME	PERSON RESPONSIBLE
6. Picture of funeral s	service AGENCY	8	FEES TO		
6. Picture of funeral s	AGENCY ACTIONS	8	FEES TO		
6. Picture of funeral sCLIENT STEPS1. Prepare the	AGENCY ACTIONS 1. Issue a que	8	FEES TO		
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail	AGENCY ACTIONS 1. Issue a que	8	FEES TO		
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and	AGENCY ACTIONS 1. Issue a que	8	FEES TO BE PAID	TIME	RESPONSIBLE Social Welfare
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the	AGENCY ACTIONS 1. Issue a que	8	FEES TO		Social Welfare Assistant/ Social
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a	AGENCY ACTIONS 1. Issue a quel number	ueing	FEES TO BE PAID	TIME	RESPONSIBLE Social Welfare
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number	AGENCY ACTIONS 1. Issue a quer number 2. Check and v	ueing verify	FEES TO BE PAID	TIME	Social Welfare Assistant/ Social
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number 2. Submit complete	AGENCY ACTIONS 1. Issue a quer number 2. Check and vall the requiren	ueing verify	FEES TO BE PAID	TIME	Social Welfare Assistant/ Social
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number 2. Submit complete requirements	AGENCY ACTIONS 1. Issue a quer number 2. Check and v	ueing verify	FEES TO BE PAID	TIME	Social Welfare Assistant/ Social
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number 2. Submit complete requirements 3. Attend and	AGENCY ACTIONS 1. Issue a quer number 2. Check and vall the requirent submitted	ueing verify	FEES TO BE PAID	TIME	Social Welfare Assistant/ Social
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number 2. Submit complete requirements 3. Attend and answer questions in	AGENCY ACTIONS 1. Issue a quer number 2. Check and v all the requirent submitted 3. Conduct	verify ments	FEES TO BE PAID	TIME	Social Welfare Assistant/ Social Welfare Officer
6. Picture of funeral s CLIENT STEPS 1. Prepare the requirements to avail the service and proceed to the CSWDO to get a queuing number 2. Submit complete requirements 3. Attend and	AGENCY ACTIONS 1. Issue a quer number 2. Check and vall the requirent submitted	verify ments	FEES TO BE PAID	TIME 15 minutes	Social Welfare Assistant/ Social Welfare Officer Social Welfare

4. Wait for the approval of the Social Case Study Report	4.Review and finalize 4.1 Complex cases require home visitation for further assessment	None	1-3 days	Social Welfare Assistant/ Social Welfare Officer
5. Receive the Social Case Study Report and sign in the logbook indicating the released of the certificate	5. Give instruction to client on what to do next relative to transaction to other offices	None	20 minutes	Social Welfare Assistant/ Social Welfare Officer
	TOTAL:	None	3 days, 1 hour and 20 minutes	



City Legal Office

External Services

1. LEGAL CONSULTATION

The City Legal Office (CLO) provides free legal consultation among walk-in clients who have queries with regard to different legal matters and concerns. While observing minimum public health standards, clients are given honest assessment and informed of the legal procedures/processes to resolve their issues.

Office or Division:	Last Fir., Atrium. City Hail, A. Consunii St., Sto Rosario Podiacion, City of Li					
Classification:	Simple	Simple				
Type of Transaction:	G2C – Government to Citizen G2G – Government to Government G2B – Government to Business					
Who may avail:	18 years old and abo	ve				
CHECKLIST OI	FREQUIREMENTS		WHERE TO SEC	CURE		
	IO IE		NONE			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Accomplish Log Book through window transaction	Request client to log onto the Visitor's Log	None	3 minutes	Messenger/Lega I Assistant III		
2. Maintain one- meter distance apart, properly wear facemasks and face shields and provide details regarding the legal consultation/advic e being seek for	2.1.Interview Clients 2.2.Evaluate the information gathered and pertinent documents presented by clients	None	5 minutes	City Legal Officer/ Administrative Officer V (CLO)		
3. Pay attention to the information being discussed	3. Render Advice/Legal Opinion	None	15 minutes	City Legal Officer/ Administrative Officer V (CLO)		
	TOTAL: None 23 minutes					

2. PREPARATION OF AFFIDAVITS, DEEDS AND OTHER LEGAL FORMS AND DOCUMENTS

The City Legal Office (CLO) provides legal services such as preparation of affidavits and other legal documents needed by the requesting client. Clients are reminded to strictly adhere to minimum public health standards to prevent the spread of the virus within the City Hall premises.

	City Land Offic	- (CLO)		
o	City Legal Office (CLO)			
Office or Division:	1st Flr., Atrium, City Hall, A. Consunji St., Sto Rosario			
	Poblacion, City of San Fernando, Pampanga			
Classification:	Simple			
	G2C – Governr	nent to Citizen		
Type of Transaction:	G2G – Governr	ment to Government G2B – Government to		
	Business			
Who may avail:	18 years old an	d above		
CHECKLIST OF REQUIREMEN	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
1. Valid IDs or Government issu	ied IDs			
(Original and / or photocopy)		Any Department of Foreign Affairs (DFA)		
, , , , , , , , , , , , , , , , , , , ,		Regional Office		
Philippine Passport		-3		
Driver's License		Land Transportation Office (LTO)		
UMID Card		Social Security System (SSS) or Government		
OMID Card		Service Insurance System (GSIS)		
Philhealth ID		Philippine Health Insurance Corporation		
TIN Card		Bureau of Internal Revenue (BIR)		
Postal ID		Philippine Postal Corporation		
Voter's ID/Certification		Commission on Elections (COMELEC)		
Professional Regulations		Professional Regulation Commission		
Commission ID		(PRC)		

1. Clients must present valid identification card/s and necessary document/s / requirement/s relative to the requested document

(Original and / or photocopy)
Certificate of Live Birth Certificate of
Death Certificate of No Record
Marriage Contract
Certificate of No Marriage (CENOMAR)

For Extrajudicial Settlement:

(Original)

Transfer/ Original Certificate of Title Passbook/ Account Name & Number Certification of Award

Others:

(Original and / or photocopy)
Official Receipt and Certificate of Registration
Travel Documents
Item Description of Lost Pawn Ticket
Declaration of Real Property Tax

Office of the Civil Registrar/
Philippine Statistics Authority Office
of the Civil Registrar/ Philippine
Statistics Authority Office of the Civil
Registrar/ Philippine Statistics
Authority Office of the Civil Registrar/
Philippine Statistics Authority Office
of the Civil Registrar/ Philippine
Statistics Authority

Registry of Deeds Designated Banks Pertinent Agencies

Land Transportation Office

Philippine Embassy Designated Pawnshops

Assessor's Office

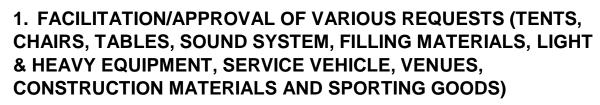
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
Log name/ register into the Visitor's Log through window transaction	Request client to log onto the Visitor's Log	None	2 minutes	Messenger/ Administrative Assistant III (CLO)

2. Observe public minimum health protocols and present requirements and identification card/s	2. Verify the validity of the IDs and requirements presented	None	3 minutes	Administrative Assistant III (CLO)
3. State in detail all matters/information to be reduced in writing	3. Evaluate the information gathered and pertinent documents presented by the clients	None	5 minutes	Administrative Assistant III (CLO)
4. Wait while the document is being prepared	Prepare the legal forms and documents requested	None	8 minutes	Administrative Assistant III (CLO)
	TOTAL:	None	18 minutes	



City Administrator's Office

External Services





The City Administrator's Office ensures that all various requests are attended to and are properly facilitated and coordinated with the concerned offices on time, efficiently and effectively.

Office or Division:	City Administrator's Office-Administrative Services Division (ASD)/ 2 nd Floor Main Building, City Hall, CSFP			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen, G2G – Government to Government, G2B – Government to Business Entity			
Who may avail:	All Fernandinos residing within the territorial property of the City of San Fernando, Pampanga			
CHECKLIST OF REQ	UIREMENTS	W	HERE TO SECU	IRE
1. Request Form (1 copy	/ original)	City Administr Services Divis	rator's Office – Ac sion	Iministrative
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Inquire on the availability of the item being request and wait for the feedback/ confirmation of request	1. Coordinate at CGSO-UMSD thru phone call/messenger or EC Record-Requests for the availability of the requested item	None	7 minutes/ request	Administrative Aide VI/ Administrative Assistant II
2. If available, accomplish appropriate Request Form and submit the same to the person in-charge for requests	2. Receive and review the information on the filled-out form and endorse to the Approving Authority	None	3 minutes/ request	Administrative Aide VI/ Administrative Assistant II Administrative Assistant II/ Administrative Officer IV/

	2.1 Approve Request			(City Administrator)
3. Accomplish Feedback Form (attached at the Request Form) and drop at the Feedback Box CAdminO located in front of City Administrator's Office	2.2 Log in at the EC Record, encode the information and the action taken of the approved request	None	30 minutes/ request	Administrative Aide VI/ Administrative Assistant II
	TOTAL:	None	40 minutes	



2. PROCESSING OF COMPLAINTS/AND OTHER ISSUES RELATED TO THE TERRITORIAL JURISDICTION OF THE CITY OF SAN FERNANDO, PAMPANGA (OPERATIONS MANAGEMENT SERVICES)

The City Administrator's Office receives and logs various complaints. Coordination to concerned offices are properly facilitated and ensured so that due process is being observed. Resolutions are properly identified and handed over on time, just and fair.

Office or Division:		City Administrator's Office-Administrative Services Division (ASD)/ 2 nd Floor Main Building, City Hall, CSFP			
Classification:		Highly Technical			
Type of Transaction:		G2C – Government to Citizen			
Who may avail:		All Fernandinos res San Fernando, Pan	_	the territorial prop	erty of the City of
CHECKLIST OF RE	EQU	IREMENTS	\	WHERE TO SECU	JRE
Written Communic Complaint (1 origin			Complaina	nt	
CLIENT STEPS	A	GENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit letter of complaint and other concerns to Incoming and	complaint and other concerns to rece		None	5 minutes/ client	Administrative Aide VI
Outgoing Receiving Clerk at the front table	CC Of	Refer complaint to oncerned Head of ffice for appropriate ction	None	1 day	Administrative Officer IV/ (City Administrator)
	re in fro	Take final action on submission of commendation/vestigation report om concerned ead of Office	None		(City Administrator)
2. Receive Feedback			6 days	Administrative Aide VI/ Administrative Assistant II/ Administrative Officer IV	
		TOTAL:	None	7 days & 5 minutes	



Local Housing and Settlement Division



1. ISSUANCE OF CERTIFICATE OF AWARD / INCLUSION FOR INFORMAL SETTLER FAMILIES (ISFS) WITHIN CSFP

The Local Housing and Settlement Division under the City Administrator's Office ensures the issuance of the Certificate of Award / Inclusion to informal settling families listed on the office database and whose residence is located within the jurisdiction of the City of San Fernando, Pampanga in relation to Application for Business Permit and Application for Electric and Water Connection.

Office or Division:		Local Housing and Settlement Division (LHSD), 2 nd floor, Ring Wing, Back Entrance, Heroes Hall			
Classification:	Simple	ack Lilliai	ice, Heroes Hai	I	
Type of Transaction:	·	Government to Citizen			
Type of Transaction.			nformal Settler	Families whose	
Who may avail:				he jurisdiction of City of	
	San Fernando			no juniculation of Only of	
CHECKLIST O	F REQUIREMENTS	-, 		TO SECURE	
1. Any of the following Val		ed ID ID			
(1 original and 1 photocop	oy):				
Company ID			Company of E		
Philippine Passpor	t		Any DFA Regi	onal Office	
Driver's License			LTO		
UMID Card			SSS or GSIS		
Philhealth ID			Philhealth Local Insurance		
			Office		
TIN Card			BIR		
Postal ID			PhilPost		
Voter's ID			Comelec		
	ations Commission I		PRC		
2. Barangay Business Cle	earance (for Business	s Permit	At the respective Barangay Hall of the		
Application) Or Barangay Clearance			client's permanent area of residence		
(for Electric and Water Co	nnection)				
(10) Liectific and water oc	,	FEES			
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
Log name/register into the Visitor's Log	Verify applicant's record in the office database	None	2mins.	HHRO I /Administrative Aide VI (Local Housing Settlement Division)	

Submits required documents	2. Assess and photocopy submitted documents (for office file copy)	None	2mins.	HHRO I /Administrative Aide VI (Local Housing Settlement Division)
3. Wait while the certification is being prepared	3. Prepare and print the certification and have it signed by the head of office	None	1min.	HHRO I /Administrative Aide VI (Local Housing Settlement Division)
Receive and sign the Certification	Release the Certification	None	30sec.	HHRO I /Administrative Aide VI (Local Housing Settlement Division)
TOTAL		None	5 minutes & 30 seconds	



City Market Operations Division

1. APPLICATION FOR PROMOTIONAL PERMIT AT THE PUBLIC MARKETS IN THE CITY OF SAN FERNANDO, PAMPANGA

The Promotional Permit is issued to any business entity who desires to conduct promotional activity or display signs, billboards and advertising within the Public Market Premises to promote or advertise their products.

Office or Division:	City Market Operations Division (CMOD), 2 nd Floor, East Wing, City Market Plaza. Sto. Rosario, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2B – Governme	ent to Business Ent	ity		
Who may avail:	Business Entity v	yho wants to promo	ote their busines	s/products	
CHECKLIST OF REQ	UIREMENTS	WH	ERE TO SECU	RE	
2. Letter of Intent		The company who permit.	o wants to secur	e a promotional	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
Submit the letter of intent to the CMOD Office	Receive the letter of intent	None	1 minute	Administrative Aide	
2. Wait while the staff evaluates the request.	2. Evaluate the request, once approved, the requester shall be instructed to pay the corresponding fee.	None	7 minutes	Market Specialist / Administrative Officer	
3. Pay the required fees. *Make sure to secure Official Receipt that will be issued upon payment.	3. Receive payment 3.1 Issue Official Receipt	500.00 per day for promotional activity 5,000.00 per day for promotional activity with selling 2.00 per sq.ft per day for tarpaulin, placards and banners 100.00 per day For Flyering	7 minutes	Revenue Collection Clerk	

4.	Sign the Client Logbook	4. Prepare the Permit 4.1 Ask the Client to Sign at the Logbook	None	5 minutes	Administrative Aide
5.	Claim the Promotional Permit	5. Release the Promotional Permit	None	1 minute	Administrative Aide
		TOTAL	Fixed Fees Php100 Php500 Php5,000 Case to Case Php2.00 per sq.ft. per day	21 minutes	



City General Services Office



1. SALE OF BIDDING DOCUMENTS

The City General Services Office (CGSO), through the Procurement Management Division (PMD) regularly post at the PhilGEPS, City's Website and the City's Bulletin Boards the bidding opportunities of the City thus sale of bid documents is open to all interested bidders and may purchase bid documents from the Procurement Unit.

Office or Division:	City General Services Office (CGSO) – Procurement Management Division (PMD), CGSO Compound, New Public Market, Brgy. Del Pilar, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2B – Government	to Business		
Who may avail:	Government and Suppliers			
CHECKLIST OF REC	UIREMENTS		WHERE TO SEC	URE
1. One (1) Downloaded co to Bid (for Goods and Ser Infrastructure Projects) or I Expression of Interest (for Services)	vices and Request for	Philippine Government Electronic Procurement System (PhilGEPS) website		
Accomplished Inform	nation Sheet	CGSO-PMD		
Duly Notarized author representative)	orization letter (if	Supplier		
4. One (1) Certified Tru License (for Infrastr only)	ucture projects	Philippine Contractor's Accreditation Board (PCAB)		
5. One (1) photocopy of	of two (2) valid ID's	Supplier		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the required documents at the PMD Office, CGSO Building, New Public Market, Barangay Del Pilar	1.1 Receive the required documents;1.2 Issue the Order of Payment	None	3 minutes	Buyer III (CGSO-PMD) Administrative Aide (CMO)
2. Pay the required fee at the City Treasurer's Office, City Hall, Brgy. Sto.Rosario	2. Accept payment and issue Official Receipt	Refer to the table below	3 minutes	Cashier (City Treasurer's Office)
3. Return to PMD Office, CGSO Building, New Public Market, Barangay Del Pilar for the release of Bid Documents	3. Release of Bid Documents	None	5 minutes	Buyer III (CGSO-PMD)
	TOTAL:		11 minutes	

Approved Budget for the Contract (ABC)	Cost of Bidding Documents (Php)
Less than P500,000.00	P500.00
More than P500,000.00 up to P1 million	P1,000.00
More than P1 million to P5 million	P5,000.00
More than P5 million up to P10 million	P10,000.00
More than P10 million up to P50 million	P25,000.00
More than P50 million up to P500 million	P50,000.00
More than P500 million	P75,000.00

2. SALE OF COPIES OF MINUTES OF BID OPENINGS, BAC RESOLUTIONS AND OTHER BAC DOCUMENTS

The City General Services Office (CGSO), through the Bids and Awards Committee (BAC) issues copies of BAC documents upon request of Suppliers/ Contractors/ Consulting Firms.

Office or Division:	City General Services Office (CGSO) – Bids and Awards Committee CGSO Compound, New Public Market, Brgy. Del Pilar, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:				
Who may avail:	Government and S	Suppliers		
	REQUIREMENTS		WHERE TO SEC	
Request Letter	T _		tractor/ Consultan	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Request Letter to the BAC Secretariat at PMD Office, CGSO Building, New Public Market, Barangay Del Pilar	1.1 Receive the Request Letter; 1.2 Issue the Order of Payment; 1.3 Start Processing	None	3 minutes	Buyer III (CGSO-PMD) Administrative Aide (CMO)
2. Pay the required fee at the City Treasurer's Office, City Hall, Brgy. Sto.Rosario	Accept payment and issue Official Receipt	P10.00/ page	3 minutes	<i>Cashier</i> (City Treasurer's Office)
3. Return to PMD Office, CGSO Building, New Public Market, Barangay Del Pilar for the release of BAC Documents	Release of BAC Documents	None	10 minutes	Buyer III (CGSO-PMD)
TOTAL:		P10.00/ page	13 minutes	

3. INSPECTION AND ACCEPTANCE OF DELIVERY

The Property and Supply Management Division (PSMD) under the City General Services Office (CGSO) ensures the completeness of deliveries.

	0000 0			20112/ 14		
Office or Division:		CGSO-Property and Supply Management Division (PSMD), Motorpool				
	Compound New Public N	∕larket,Brgy. I	Del Pilar, City o	of San Fernando		
	Pampanga					
Classification:	Simple					
Type of	G2B – Government to Bi	G2B – Government to Business				
Transaction:						
Who may avail:	Suppliers					
	F OF REQUIREMENTS		WHERE TO			
1. Copy of Appro	oved Purchase Order	CGSO-Prod	curement Mana	agement Division		
2. Supplier's Ev	aluation Form	CGSO-Prod	curement Mana	agement Division		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE		
1.Present the requirements together with the Sales Invoice/Delivery Receipt 2. Wait while	Check and verify as to completeness and accuracy of the PO/DOC, sales invoice/delivery receipt together with the other supporting documents. Conduct inspection and	None		Administrative Officer (CGSO-PSMD)		
checking the delivery	acceptance as to the accuracy and completeness of deliveries through comparison of the Purchase Order/ Delivery Order Contract and the Delivery Receipt/Sales Invoice.	None	1 day	Supervising Administrative Officer (CGSO-PSMD) Inspector (CGSO-PSMD)		
3. N/A	3. Preparation of Acceptance and Inspection Report (AIR) thru FMaPs 3.2 Scan and upload necessary documents 3.3 Affix the signature in the Inspection and Acceptance portion. 3.4 Print Acceptance and Inspection Report	None	1 day	Administrative Aide (CGSO-PSMD) Inspector (CGSO-PSMD) Supervising Administrative Officer (CGSO-PSMD) / End-User (Requisitioning Office)		

4. N/A	4. Preparation and Approval of Notice of Delivery 4.1 Endorse to CGSO Head the AIR and other supporting documents for approval 4.2 Photocopy Purchase Order and other requirements into three (3) copies: (1) COA, (1) End User, (1) File Copy 4.2 Segregate Notice of Delivery	None		CGSO Head Supervising Administrative Officer (CGSO-PSMD) Administrative Aide (CGSO-PSMD)
5. N/A	5. Issuance of Notice of Delivery 5.1 Provide copies of Notice of Delivery to the following: a. COA b. End-User (if applicable) 5.2 Photocopy the Notice of Delivery file copy and attach to the original documents 5.3 Endorse all the documents to the City General Services Office — Procurement Management Division	None	1 day	Administrative Aide (CGSO-PSMD)
	TOTAL:	None	3 days	



City General Services Office

Internal Services



1. PROVISION OF TENTS, STAGE, CHAIRS AND TABLES

The City Government through the City General Services Office – Utility and Maintenance Services Division (CGSO-UMSD) also extends further assistance through the provision of logistical support and services to various individuals or families and also to government and private organizations for their various activities or endeavors.

Office or Division:		City General Services Office – Utility & Maintenance Services Division			
	•	CGSO Compound, New Public Market, Brgy. Del Pilar, City of San			
	Fernando, Pampang	ja			
Classification:	Simple				
Type of Transaction:	G2G – Government	to Governm	nent		
Who may avail:	Government & Priva	te Organiza	itions and Various	Individuals or	
	Families within San	Fernando			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
Duly accomplished and form (Preferably 5 days activity/need)		City Admir	nistrator's Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Upload the approved request at the E-C records system	1.Print the approved request and record details	None	2 minutes	Administrative Officer II (CGSO- UMSD)	
None	2.Review and approve the request	None	5 minutes	UMSD - Supervising Administrative Officer (CGSO-UMSD)	
None	3.Assign Approved request to concerned UMSD personnel	None	2 minutes	Administrative Officer II (CGSO- UMSD)	
None	4.Serve approved request	None	As Scheduled	Concerned UMSD personnel	
	TOTAL:	None	9 minutes		



2. PREVENTIVE MAINTENANCE OF SERVICE VEHICLES AND EQUIPMENT

The Motorpool Division under the City General Service ensures that all service vehicles and equipment of the City Government Unit of San Fernando, Pampanga are properly maintained and sustained thru regular conduct of Preventive Maintenance.

Office or Division:	CGSO-Motorpool Division CGSO Compound, New Public Market, Del Pilar, CSFP			
Classification:	Simple			
Type of Transaction:	G2G – Governm	ent to Gover	nment	
Who may avail:	Authorized Drive	rs of the City	Government of Sa	n
	Fernando,Pampa	anga with as	signed equipment/s	ervice vehicle.
CHECKLIST OF R	EQUIREMENTS		WHERE TO SEC	URE
N/A			N/A	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Coordinate with the Motorpool Dispatcher regarding the schedule of Preventive maintenance. Through window 2	1. Notify the concerned office of the scheduled date of preventive maintenance through E.C. records	None	5 minutes	Administrative Aide (CGSO-MPD)
2. Deliver concerned service vehicle/equipment to the Motorpool Compound on the assigned schedule.	2. Receive and Verify Service Vehicle & Equipment	None	30 minutes	Administrative Aide (CGSO-MPD)
3. Wait while the service vehicle is being assessed.	3. Check and Assess Service Vehicle & Equipment	None	45 minutes	Chief Mechanic (CGSO-MPD)
4. Have the Job Order be approved by the concerned head of office.	4. Issue Job Order	None	20 minutes	Administrative Aide (CGSO-MPD)

5. Wait while the preventive maintenance is being conducted.	5. Check availability of parts	None	30 minutes	Motorpool Supervisor II (CGSO-MPD)
	6. Conduct Preventive Maintenance	None	120 minutes	Assigned Mechanic (CGSO-MPD)
	7. Inspect and Test Service Vehicle for faults and problems	None	20 minutes	Chief Mechanic (CGSO-MPD)
6.Acknowledge and receive the service vehicle	8. Release and turn-over service vehicle to concerned driver	None	30 minutes	Motorpool Supervisor II (CGSO-MPD)
TOTAL:		None	299 minutes or 4 hour and 59 minutes	



3. CORRECTIVE MAINTENANCE OF SERVICE VEHICLES AND EQUIPMENT

The Motorpool Division under the City General Service ensures that all service vehicles and equipment of the City Government Unit of San Fernando, Pampanga are properly maintained and sustained thru conduct of Corrective Maintenance.

Office or Division:	CGSO-Motorpool Division CGSO Compound, New Public Market, Del Pilar, CSFP			
Classification:	Simple			
Type of Transaction:	G2G – Government to	Governmer	nt	
Who may avail:	Authorized Drivers of	•		
	Fernando,Pampanga	with assigne		
	REQUIREMENTS		WHERE TO SE	CURE
N/A	Г	N/A		Г
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Notify dispatcher of the problem and deliver concerned service vehicle/equipment to the Motorpool Compound through window 2	1. Receive and Verify concern/problem with the Service Vehicle & Equipment	None	30 minutes	Administrative Aide (CGSO-MPD)
2. Wait while the service vehicle is being assessed.	2. Check and Assess Service Vehicle & Equipment	None	180 minutes	Chief Mechanic (CGSO-MPD)
3. Have the Job Order be approved by the concerned head of office.	3. Issue Job Order	None	30 minutes	Administrative Aide (CGSO-MPD)

4. Wait while the corrective maintenance is being conducted.	4. Check availability of parts	None	30 minutes	Motorpool Supervisor II (CGSO-MPD)
	5. Conduct Corrective Maintenance	None	480 minutes	Assigned Mechanic (CGSO-MPD)
	6. Inspect and Test Service Vehicle for faults and problems	None	20 minutes	Chief Mechanic (CGSO-MPD)
	7. Prepare Post Repair Inspection Report	None	5minutes	Motorpool Supervisor II (CGSO-MPD)
5.Acknowledge and Receive the service vehicle	8. Release and turn- over service vehicle to concerned driver	None	30 minutes	Motorpool Supervisor II (CGSO-MPD)
	TOTAL:	None	805 minutes or 13 hours and 25 minutes	

4. MANAGEMENT AND CONTROL OF INCOMING AND OUTGOING DOCUMENTS

The Records and Archives Management Division (RAMD) is primarily responsible for the management and control of the incoming/outgoing communications received from the departments/offices of the City Government and its attached agencies, as well as those received from other government agencies or private entities. It is the centralized receiving and releasing unit of all communications for proper recording and dissemination procedure through the use of EC-RECORDS which are available electronically whenever and wherever you need it.

		Γ				
Office or Division:	Office or Division:		Records and Archives Management Division			
	1st Flr., City H San Fernando		lall, A. Consunji St., Brgy Sto Rosario, City of p. Pampanga			
Classification:		Simple				
Type of Transaction:		G2G – Govern	ment to Gov	vernment		
Who may avail:		Government				
CHECKLIST OF RE	EQUIREN	IENTS	V	HERE TO S	ECURE	
Accomplished RCSS Form for Internal and External Communications			Forms for internal communications can be downloaded from the EC-Rec for reproduction Forms for external communications are provided by the RCSS			
Communications/Doc originating office	Communications/Document from the originating office			City Government Offices and other agencies		
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE	
1. Comes personally to send communication/ document with a properly filled-out RCSS Form	1.Receive the communication/ document with a properly filled-out RCSS Form		None	5 minutes	Administrative Assistant II	
2. Wait while the staff checks on the record	2.Record the particulars in the RCSS logbook		None	5 minutes	Administrative Assistant II	
3. Wait for a photocopy of the document	3. Provide a photocopy of the received document		None	2 minutes	Administrative Assistant II	
4. None	4.Record in the Messenger Dispatch Logbook and dispatch to the department/office if the document is to be hand carried,		None	10 minutes	Messenger	

5. None	5. Scan, upload and encode the document in the EC-Records	None	10 minutes	Administrative Aide VI
6. None	6. Review and analyze the particulars and attachment/s of the post	None	10 minutes	Administrative Assistant II
7. None	7. Edit the post if there are any corrections to be made	None	5 minutes	Records Officer II
8. None	8. Approve the post for dissemination	None	5 minutes	Supervising Administrative Officer
9. None	9. Monitor post thru EC-Records	None	1 day	Administrative Assistant II
10. None	10. Update RCSS Logbook/RCSS Form	None	5 minutes	Administrative Assistant II
11. None	11. File, reserve and secure records	None	5 minutes	Administrative Assistant II
	TOTAL:	None	1 day 1 hour and 2 minutes	

5. SAFEKEEPING AND STORAGE OF INACTIVE RECORDS

The Records and Archives Management Division (RAMD) provides a proper environment for the purpose of storing records that require protection, security and preservation of records.

Office or Division:		Records and	d Archives Management Division		
	·		pound, New Public Market, Brgy. Del Pilar, City ando, Pampanga		
Classification:	Classification: Simple				
Type of Transaction:		G2G – Gove	rnment to (Government	
Who may avail:		Government			
CHECKLIST OF R	EQUIREM	ENTS		WHERE TO SEC	URE
1. Transmittal and Rec Public Records Form, RAMD	•		RAMD		
2. Transmittal Letter to original	RAMD, 1	copy – client,	Originating	g Office	
3. GRDS 2009 and GR	RDS 2011		NAP Onlir	ne/RAMD	
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit request to transfer records for safekeeping	Receive request for safekeeping		None	10 minutes	Administrative Assistant
2. Wait for the RAMD staff in the evaluation process and for the approval of the request	2. Review, check or request for amendments to ensure that said records are eligible and contain sufficient information and in accordance with the General Records Disposition Schedule of the National Archives of the Philippines Act 0f 2009 and 2011 including the identification of storage location		None	30 minutes	Administrative Assistant

	Note: If the request is approved, instruct on the next step to take for the actual transfer of records			
3. Fill out the Transmittal and Receipt of Government records Form and assist in the transfer of records including the checking and inventory of records	3. Evaluate the form for correctness of information	None	30 minutes	Records and Information Officer
4. Actual transfer of records to RAMD Records Building	4. Receive and inspects the records transferred	None	As scheduled	Records and Information Officer/Admin Assistant
5. Wait for RAMD staff to check and inspect the records	5. Inspect the declared records versus the accomplished form	None	1 hour	Administrative Assistant
6. Assist and witness the sealing of boxes	6. Facilitate the sealing, labeling, numbering and coding of boxes	None	1 hour	Admin Assistant/Admin Aide
7. Secure the received accomplished transmittal and receipt of non-current public records	7. Store, protect and maintain records in an appropriate location	None	30 minutes	Admin Assistant/Admin Aide
	TOTAL:	None	3 hours 40mins	

6. DISPOSAL OF VALUELESS RECORDS

The Records and Archives Management Division (RAMD) is also responsible for records disposal, which is one component of the records management process. Records have retention periods or lifespan based on/in accordance with approved Records Disposition Schedule (RDS) and General Records Disposition Schedule (GRDS) of National Archives of the Philippines (NAP).

- a) Records must be kept until the records end their retention period or as needed for valid reasons.
- b) Only dispose with authorization
- c) Dispose records securely and the type of disposal must be documented.

Its important benefit is to ease space to accommodate records from previous years for storage. Accomplishment of NAP form 3 (Request for authority to dispose records) and the certificate to dispose records from the National Archives of the Philippines are two authorizations necessary to legally dispose valueless records to avoid future litigation. It shall be the responsibility of the RAMD to program the disposal of records at least once a year depending on the volume of the accumulation of non-current and disposable records of the city government offices.

Office or Division:			and Archives Management Division ompound, New Public Market, Brgy. Del Pilar, City of		
			ando, Pam		i, bigy. boil hai, only of
Classification:		Simple			
Type of Transaction	n:	G2G – G	overnment	to Government	
Who may avail:		Governm	ent		
CHECKLIST OF RI	EQUIREMI	ENTS		WHERE TO S	SECURE
1. Accomplished NA copies-NAP, 1 copy-		3 original	RAMD		
2. GRDS 2009 and 0	SRDS 201	1	NAP Online/RAMD		
3. Valueless Records	6		Originating office		
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Seek information regarding disposal of valueless records	1. Advice to conduct inventory of records in the prescribed form (NAP Form 1) and shall observe the NAP General Records Disposition Schedule		None	Within 15 minutes or more depending on information needed	Supervising Administrative Officer / Administrative Assistant

2. Conduct				
inventory of documents/records annually in accordance with the NAP General Records Disposition Schedule	2. Determine Valueless Records	None	Conducted every year	Records and Information Officer
3. Prepare Request for Authority to Dispose (Form 3)	3. Advice to estimate the volume of the valueless records to determine and facilitate activities for disposal	None	30 minutes	Supervising Administrative Officer / Administrative Assistant
4. Accomplish NAP Form No.3- copies and a Letter Request	4. Review and evaluate the form	None	As scheduled	Administrative Assistant
5. None	5. Transmit to the Office of the RMIC Chairman/City General Services Officer for approval	None	30 minutes	Administrative Assistant
6. None	6. Endorse the Request to NAP for approval	None	10 minutes	Administrative Assistant
7. None	7. Receive Authority to Dispose	None	10 minutes	Supervising Administrative Officer / CGSO Head
8. None	8. Receive Notification of Actual Disposal	None	10 minutes	Supervising Administrative Officer
9. None	9. Notify (thru letter request) representatives from COA, RMIC Chairman, RIO of respective offices on the actual date of disposal	None	15 minutes	Supervising Administrative Officer / Records Information Officer / Administrative Assistant

10. None	10. Conduct actual disposal to be witnessed by representative from NAP, COA, RMIC chairman and RIO of respective offices	None	As scheduled	Concerned Records and Information Officers, NAP Representatives and Official Buyer, COA, RMIC Chairperson/CGSO Head, Supervising Administrative Officer, RAMD Personnel
11. None	11. Obtain Certificate of Disposal	None	As scheduled	NAP Authorized Representative
12. None	12. Remit Process of Sale to the City Treasurer's Office	None	15 mins	Records Information / Administrative Assistant
	TOTAL:	None	2 hour 15 minutes	





The Property and Supply Management Division (PSMD) under the City General Services Office (CGSO) aims to ensure that all issued supply/equipment are in good condition.

Office or Division:	CGSO-Property and Supply Management Division (PSMD), Motorpool Compound New Public Market, City of San Fernando Pampanga				
Classification:		Simple			
Type of	G2G – Government to Government				
Transaction:					
Who may avail:	All offices including attac Fernando, Pampanga	ched agenc	ies under the C	City Government of San	
CHECKLIST C	F REQUIREMENTS		WHERE TO	SECURE	
Notice of Delivery		CGSO- Pr Division	operty and Sup	oply Management	
2. Supplies/Equipmer (SEAI) signed by the		CGSO- Pr Division	operty and Sup	oply Management	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE	
Present Notice of Delivery and SEAI	Check the SEAI if properly signed	None	1 minute	Administrative Aide (CGSO-PSMD)	
2. Wait while the documents are being prepared	2. Prepare the following: a. Three (3) copies of Requisition & Issue Slip (RIS) b. Transfer the ARE/ICS to the Accountable Person and print two (2) copies, if applicable c. Inventory Sticker/s for ARE, if applicable	None	29 minutes	Administrative Aide (CGSO-PSMD) Records Officer I (CGSO-PSMD) Inspector (CGSO-PSMD)	
3. Sign on the RIS	3. Issue delivery to End Users	None	2 hours	Administrative Aide (CGSO-PSMD) Administrative Aide (CGSO-PSMD)	
	TOTAL:	None	2 hours and 30 minutes		



City Public Order and Safety Coordinating Office



1. SETTLEMENT OF ISSUED TRAFFIC CITATION TICKET

The City Public Order and Safety Coordinating Office ensures that all city public order and safety ordinances are strictly followed by Fernandinos. For each violation, a TCT shall be issued to violators and must be settled within 3 regular working days from its issuance for disposition.

Office or Division:	City Public Order and Safety Coordinating Office (CPOSCO) CPOSCO Headquarters, Brgy. Calulut, City of San Fernando, Pampanga		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizen		
Who may avail:	Traffic and Public Orde	r Violators	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
For Traffic Violation/s:			
Official Receipt		(CPOSCO)	

^{*}Apprehensions from 0701H to 1130H shall be available for payment on 0100H onwards of the date of violation

^{*}Apprehensions from 1131H to 0700H on the following day shall be available for payment on 1000H onwards on the following day of apprehension

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIB LE
1. Present the issued TCT to CPOSCO Cashier	Review Daily Apprehensions Report for Verification	None	3 minutes	Supervising Administrative Officer
2. Logging from CPOSCO Log Book	2. Issuance of Official Receipt	None	3 minutes	Supervising Administrative Officer
	TOTAL:	Varies to Violation/s	6 minutes	

2. SECURING OF ORDER OF PAYMENT FOR THE RENEWAL OF PUBLIC MOTORIZED TRICYCLE FOR HIRE

The Transport Regulatory Unit of City Public Order and Safety Coordinating Office regulate the renewal of motorized tricycle franchises within the City of San Fernando, Pampanga. Renewal of motorized tricycle franchise shall be issued upon completing all the requirements.

Office or Division:	City Public Order and Safety Coordinating Office – Located at CPOSCO Headquarters, Brgy. Calulut, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Government to	G2C – Government to Citizen			
Who may avail:	Public Motorized Trice	ycle Operato	ors Within City of	San Fernando	
CHECKLIST OF R	REQUIREMENTS		WHERE TO SECURE		
Permit (1 Origina	I Tricycle Operations al) or (1 Duplicate)	Treasurer	's Office (LGU-CS	SFP)	
Certificate of Re Receipt of Motor Original) or (1 December 1)	• ,	LTO	LTO		
5. Driver's License Code 1)	(with Restriction	LTO			
6. Membership Certification from Tricycle Operators and Drivers Association (TODA)		Respective TODA			
7. Barangay Trans	port Certification	Respectiv	e Barangay		
8. Accomplished M Franchise Renev		TRU Personnel			
9. Physical Appear Tricycle Unit	ance of Motorized	Applicant			
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE			
1. Submission of Motorized Tricycle Franchise Renewal Application (CPOSCO)	1. Receive and Evaluate Motorized Tricycle Franchise Renewal Application	None	5 minutes	Administrative Aide, TRU (CPOSCO)	
2. Verification of MTOP Application	2. Signing of the Order of Payment	None	1 minute	CPOSCO Officer	

3. Claiming of the Order of Payment (CPOSCO)	3. Releasing of Order of Payment (CPOSCO)	None	1 minute	Administrative Aide, TRU (CPOSCO)
4. Issuance of OR and claiming of Motorized Tricycle Operator's Permit	4. Encoding of OR and releasing of MTOP	525.00 pesos	9 minutes	Administrative Aide, TRU (CPOSCO)
	TOTAL:	525.00 pesos	16 MINUTES	

Public Motorized Tricycle Franchise Fees:

	ORDER OF PAYMENT
Public Franchise Fee	Php 300.00
Application Fee	100.00
Annual Sticker	25.00
Terminal Fee	100.00
TOTAL	525.00

Renewal of Franchise and Late Registration

The Tricycle and Regulatory Board (TFRB) shall start to accept renewal of the franchise (1) month before the date of the expiration. A surcharge of 25% plus 2% interest monthly from the annual supervision and processing fees but not exceed 36 months shall be collected from the operators with expired franchises who will apply for renewal.

Note: The abovementioned fees are based from the Traffic Management Code Ordinance No. 2017-034



3. SECURING OF PEDICAB OPERATOR'S PERMIT

The Transport Regulatory Unit of City Public Order and Safety Coordinating Office regulates the issuance of Pedicab Operator's Permit among Pedicab Drivers within the City of San Fernando, Pampanga. Pedicab Operator's Permit shall be issued upon completing all the requirements.

Office or Division:	City Public Order and Safety Coordinating Office – Located at CPOSCO Headquarters, Brgy. Calulut, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Governmen	G2C – Government to Citizen			
Who may avail:	Pedicab Operators	Within City of	San Fernando		
CHECKLIST OF RE	QUIREMENTS		WHERE TO SEC	URE	
1. Cedula (1 Original)	or (1 Duplicate)	City Treasur	er's Office (LGU-C	CSFP)	
2. Physical Appearan	ce of Pedicab	Applicant			
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE			
1. Submission of Pedicab Operator's Permit (POP) Application (TRU Office)	1. Receive and Evaluate Pedicab Operator's Permit (POP) Application	None	3 minutes	Administrative Aide, TRU (CPOSCO)	
2. Verification of Pedicab Operator's Permit (POP) Application	2. Signing of the Order of Payment	None	1 minute	CPOSCO Officer	
3. Claiming of the Order of Payment (TRU Office)	3. Releasing of Order of Payment (TRU Office)	None	1 minute	Administrative Aide, TRU (CPOSCO)	
4.Issuance of OR and claiming of Sticker	4. Encoding of OR and releasing of sticker	135.00 pesos	3 minutes	Administrative Aide, TRU (CPOSCO)	
	TOTAL:	None	8 MINUTES		

4. CLAIMING OF IMPOUNDED VEHICLE

Accompanied By Professional Driver's License Holder (Photo

Copy - Professional Driver's ID)

The City Public Order and Safety Coordinating Office ensures that all City public order and safety ordinances are strictly followed by Fernandinos. For each violation, a TCT shall be issued to violators and must be settled within 3 regular working days from its issuance for disposition.

Office or Division:	City Public Order and Safety Coordinating Office (CPOSCO) - Located at CPOSCO Headquarters, Brgy. Calulut, City of San Fernando, Pampanga		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizen		
Who may avail:	Traffic and Public Order Violators		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
For Traffic Violation/s:			
Official Receipt of the Vehicle (Photo Copy)		LTO	
Certificate of Registration of the Vehicle (Photo Copy)		LTO	
3. Traffic Citation Ticket		Issued by CPOSCO Enforcer	
4. Official Receipt (Photo Copy)		City Treasurer's Office	

pprehensions from 0701H to 1130H shall be available for payment on 1500H onwards of the date of violation

LTO

pprehensions from 1131H to 0700H on the following day shall be available for payment on 1000H onwards on the following day of apprehension

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
Present Official Receipt to Releasing Officer (Releasing Office)	Review Daily Apprehensions Report for Verification	None	3 minutes	Supervising Administrative Officer
 2. Present the photo copy of the following to the Impounding Officer at the Impounding Area: Latest (OR/CR) Official Receipt and Certificate of Registration of the Impounded Vehicle Official Receipt 	2. Review Impounding Logs and Requirements Presented	None	3 minutes	Supervising Administrative Officer

Issued by (CTO) City Treasurer's Office Claimer's Driver's License				
3. Signing log and Claiming of Impounded Vehicle (Releasing Office)	3. Releasing of Impounded Vehicle	None	3 minutes	Supervising Administrative Officer
	TOTAL:	None	9 MINUTES	

Violations	Penalties
Smoking/ Vaping and allowing any person to smoke/vape in enclosed	500
public places and conveyances	
Selling and smoking tobacco products in schools, hospitals, public facilities	3,000
and selling to minors	
Vandalism	500
Jaywalking	100
Illegal vending along passageways and sidewalks	1,000
Open Burning of solid waste	300
Littering, throwing, dumping of waste in public places	300
Public Utility Vehicles w/o waste receptacle (Trashcan)	200
Spitting/Nose blowing/urinating and defecating in public places	200
No Safety Helmet	300
Out of route/Line/Service area	1,000
Trip Cutting	500
Loading /Unloading at PZ	500
Reckless Driving	500
Illegal Turning/Counter Flow	500
Not Wearing Seat belt	500
No silencer/defective or modified muffler (Sec. 35) (Confiscation of muffler)	500
Driving Tricycle on National Road/Major Thoroughfares	500
Obstruction of roads by MV/Vendors and any kind of Obstruction to include	500
Stalled Vehicle	
Illegal Parking/waiting on prohibited area/Illegal Terminal	500
Number Coding	750
Odd-even scheme	300
No Entry Pass	300
No Logo	300
No DL/Invalid DL	500
OR/CR Not Carried	500
Unregistered Vehicle	500
Not in proper uniform (PUV)	300
Calling or receiving calls and reading/sending text messages	500
Using/wearing headset, earphone, earplug and other similar gadget	300

Illegal Parking of Trucks/Heavy Vehicles on major thoroughfare 24hrs	500
No helmet (Driver/Back rider)	300
Unqualified child back rider	300
More than one backrider	500
Unlocked helmet strap	300
Colorum Tricycle	500
*Note: These penalties are subject for amendment.	



City Human Resource Management Office



1. APPLICATION FOR VARIOUS CERTIFICATION, SERVICE RECORD AND OTHER HR-RELATED DOCUMENTS FOR RETIRED, RESIGNED AND SEPARATED EMPLOYEES

The City Human Resource Management Office ensures readiness and accessibility of records through timely, efficient, accurate and systematic issuance of records/certifications such as Service Record, Certificate of Employment, personnel records and other HR related certifications.

Office or Division:	Hall, A. Consunji St., Brgy. Sto Rosario, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C – Government to Cit	izen		
Who may avail:	City Government of San Fernando (P)'s employees and retired, resigned and separated City employees			
CHECKLIS	T OF REQUIREMENTS WHERE TO SECURE			
Request Record and separated e	Form for retired, resigned imployees	Online Requ	ppy – CHRM Offuest – Accessib fsanfernando.gu	le online at
and Work-Relate (CSC form No. 7 copies) ➤ For newly	from Money, Property ed Accountabilities 7, s. 2017) (4 original 7 retired, resigned and 6 employees	CHRM Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Fill-out the Request Record Form (RRF) or request thru the HRIS	Receive/ evaluate the request	None	3 minutes	HRM Officer I (CHRMO)
2. Process manual request: 2. Wait and check for the status of concerned personnel		None	2 minutes	HRM Officer I (CHRMO)
requested document/s	2.2 Prepare/print/ photocopy the requested document/ record		3 days	HRM Officer I (CHRMO)

	2.3. Review, sign, certify the requested document/s		2 days	HRM Officer II & CHRM Officer (CHRMO)
3. Receive the requested document/s	3. Release requested document/s	None	5 minutes	HRM Officer I (CHRMO)
	TOTAL:	None	5 days and 10 minutes	

2. PROCESSING OF ONLINE AND WALK-IN APPLICANTS

The City Human Resource Management Office ensures accessibility and abruptness in the provision of competent manpower to be able to augment the needs and demands of the City Government in providing quality public service.

Office or Division:	City Human Resource Management Office - Located at the 2nd Flr, City Hall, A. Consunji St., Brgy. Sto Rosario, City of San Fernando, Pampanga			
Classification:	Complex			
Type of Transaction:	G2C – Governmen	t to Citizen		
Who may avail:	Online and Walk-in	Applicants		
CHECKLIST O	F REQUIREMENTS		WHERE TO SEC	URE
 Personal Data She No. 212 revised Ju 	•	City Human	Resource Manag	ement Office
4. Certified True Copy Records/Academic		Applicant's	School	
5. Authenticated Copy Eligibility or PRC Li		Civil Service	e Commission/ PR	C
6. Photocopy of Certific Trainings/ Seminar		Training Ins	titutions	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-out PDS and complete the necessary requirements to be submitted to CHRM Office.	1.Receive and appraise PDS	None		HRM Officer I (CHRMO)
2. Wait for notification for status of application and/or schedule of initial assessment.	2.1 Encode applicant's information at the HRIS- applicants database (for walk-in applicant/s only)	None	5 days	HRM Officer I (CHRMO)
	2.2 Pre-assess status of application (for filing or forward to	None		HRM Officer I (CHRMO)

	CESD)			
	2.3 Review and approve the pre-assessed application	None		CHRM Officer (CHRMO)
3. Receive Response Letter via electronic mail	3. Send Response Letter	None		HRM Officer I (CHRMO)
	TOTAL:	None	5 days	

Note: All applicants would be notified through a response letter within five working days upon receipt of the application.

3. PROCESSING OF APPOINTMENT FOR PERMANENT PLANTILLA POSITION



The City Human Resource Management Office ensures accessibility and abruptness in the provision of competent manpower to be able to augment the needs and demands of the City Government in providing quality public service.

Office or Division:	City Human Resource Management Office - Located at the 2nd Flr, City Hall, A. Consunji St., Brgy. Sto Rosario, City of San Fernando, Pampanga			
Classification:	Highly Technical			
Type of Transaction:	G2G – Governmen Citizen	t to Governm	nent and G2C – G	overnment to
Who may avail:	Applicants			
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE
1. Letter of Intent		Applicant		
2. Personal Data Sheer revised 2017)	et (CS Form No. 212		bsite (cityofsanfe te (csc.gov.ph)	rnando.gov.ph)/
3. Certified True Copy Scholastic Records/Ad Records		Applicant's	School	
4. Authenticated Copy Eligibility or PRC L		Civil Service Commission/ PRC		
5. Photocopy of Certification Seminars	cate of Trainings/	Training Institutions		
6. Performance Rating Position for 1 year	•	Previous/ present employer		
7. Authenticated Certif	ficate of Live Birth	Philippine Statistics Authority or Local Civil Registry of the City/Municipality		
8. Authenticated Marri	age	Philippine Statistics Authority or Local Civil		
Contract/ Certificat married)	e (if	Registry of the City/Municipality		
9. NBI Clearance		National Bureau of Investigation		
10. Medical Certificate	e (CS Form No. 211)	Licensed G	overnment Physic	cian
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID PROCESSING RESPONSIBL		
1. Signify intent by submitting complete requirements to the CHRM Office.	1. Publish Vacant Position	None	1 working day	HRM Officer II (City Human Resource Management Office)

2. Wait for the notification on the status of the application	2.1 Receive and appraise application	None	15 working days upon publication	HRM Officer I (City Human Resource Management Office)
	2.2 Notify qualified applicants of the schedule of examination through electronic mail	None	1 working day	HRM Officer I (City Human Resource Management Office)
	2.3 Administer IQ/EQ Exam/s procedure	None	1 hour and 30 minutes per batch (scheduling of IQ/EQ Exams is within 9 working days after the notification)	HRM Officer I (City Human Resource Management Office)
	2.4 Prepare Promotion al Line-Up	None	2 working days	HRM Officer I (City Human Resource Management Office)
	2.5 Notify applicants of the schedule of HRMPSB deliberation through electronic mail	None	1 working day	HRM Officer I (City Human Resource Management Office)
	2.6 Conduct Human Resource Merit Promotion and Selection Board (HRMPSB) Deliberation	None	Within 10 working days after notification	HRMPSB Members and Secretariat (City Human Resource Management Office)
	2.7 Prepare HRMPSB Ranking		0	HRMPSB Secretariat (City Human Resource Management Office)
	2.8 Sign the HRMPSB Ranking	None	3 working days	HRMPSB Chairperson Representative (City Human Resource Management Office)

	2.9 Select among the top five deemed most qualified candidates	None		Appointing Authority (City Human Resource Management Office)
	2.10 Prepare Appointme nt paper/ documents 2.11 Sign appointme nt paper	None	10 working days	HRM Officer I/ CHRMO (City Human Resource Management Office) Appointing Authority (City Mayor's Office)
3. Receive notification on the status of the application	Send notification/ letter through electronic mail Post Notice of Appointment	None	3 working days	HRM Officer I (City Human Resource Management Office)
	TOTAL:	None	55 working days	

Note:

- 1. Publication of a particular vacant position shall be valid until filled but not to extend beyond nine (9) months reckoned from the date the vacant position was published. (CSC 2017 Omnibus Rules on Appointment and Other Human Resource Actions-Revised July 2018 Rule VII Sec. 29)
- 2. Processing time is based on ISO 9001: 2015



4. ISSUANCE OF CERTIFICATE OF COMPLETION FOR ON-THE-JOB TRAINEES

The CHRMO aims to ensure the efficient and accurate issuance of the Certification of Completion to eligible on-the-job trainees as proof of their apprenticeship in the City Government.

				1
Office or Division:	City Human Resource	_		* 1
	City Hall, A. Consunji	i St., Brgy.	Sto Rosario, City	of San Fernando,
	Pampanga			
Classification:	Complex			
Type of Transaction:	G2C – Government to	o Citizen		
Who may avail:	All On-the-Job Traine	es of the	City Government	
CHECKLIST OF F	REQUIREMENTS		WHERE TO SI	ECURE
Filled out Electronic C	. ,			
Total Hours Request Slip	` '	From CH	RM Office or thru	email
Certificate of Completion	Request Form			
		FEES	DD 00E00INO	DEDOON
CLIENT STEPS	AGENCY ACTIONS	TO BE	PROCESSING	PERSON
		PAID	TIME	RESPONSIBLE
1. Send a filled out	 Respond to 			
electronic copy of	initial online			
the (1) OJT Total	request and			Administrative
Hours Request	send copies of	None		Aide/ HRMO II
Slip and (2)	(1) OJT Total			(CHRMO)
Certificate of	Hours Request			
Completion	Slip and (2)			
Request Slip thru	Certificate of			
the CHRMO-	Completion			
PDD's email	Request Slip			
address				
2. Wait for the	2. Send the draft			
details/content to	contents of the			Administrative
be sent via email -	Summary Total	None	4 working days	Aide/ HRMO II
(1) Summary of	Hours			(CHRMO)
Total Hours	Rendered and			
Rendered and (2)	Certificate of			
Certificate of	Completion			
Completion				

3. Send a Confirmation/Corr ection email regarding the details of the (1) Summary of Total Hours Rendered and (2) Certificate of Completion thru email including the OJT's preferred copy (printed or softcopy)	3. Print and have the Certificate of completion signed by the City Human Resource Management Officer	None		Administrative Aide/ HRMO II CHRM Officer (CHRMO)
4. Receive (Download or Claim) the (1) Summary of Total Hours Rendered and (2) Certificate of Completion	4. Release the Summary of Total Hours Rendered and Certificate of Completion	None		Administrative Aide/ HRMO II (CHRMO)
	TOTAL:	None	4 working days	



City Human Resource Management Office

Internal Services





The City Human Resource Management Office ensures readiness and accessibility of records through timely, efficient, accurate and systematic issuance of records/certifications such as Service Record, Certificate of Employment, personnel records and other HR related certifications.

Office or Division:	City Human Resource Management Office - Located at the 2nd Flr., City Hall, A. Consunji St., Brgy Sto Rosario Poblacion, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2G – Government to Government			
Who may avail:	City Government o casual employees	of San Ferna	ando (P)'s active	permanent and
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE
1 On-line Document Application (DRApp) employees	•	HRIS – Re	equest Record Mo	odule
2 Clearance Form fr Property and Work-R Accountabilities (CSC s.2017) (4 original co ➤ For newly retired, separated employees	elated C form No. 7, pies) resigned and	CRMO		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1 Apply through HRIS – Request Record Module (RRM)	1 Receive/check the HRIS- DRApp	None		HRM Officer I (City Human Resource Management Office)
2 Wait and check	2 .1 Process DRApp:			

the status of the requested document/s. (If the status shown is PRINTED, that was the sign that the request is ready for release)	2.2 Click the name of the requesting employee, then review the completeness and accuracy of the data	None		HRM Officer I (City Human Resource Management Office)
	2.3. Print the certification/se rvice record 2.4. Review and sign the certification	None None	1 day	HRM Officer I (City Human Resource Management Office) CHRM Officer (City Human Resource
	/service record 2.5. Print transmittal	None		Management Office) HRM Officer I (City Human Resource Management Office)
3. Receive the requested document/s	3 Release Certificate/ Service Record	None		HRM Officer I (City Human Resource Management Office)
	TOTAL:	None	1 day	

Note: All requested document/s would be available on the next working day except for unavoidable circumstances.





The City Human Resource Management Office ensures readiness and accessibility of records through timely, efficient, accurate and systematic issuance of records/certifications such as Service Record, Certificate of Employment, personnel records and other HR related certifications.

Office or Division:	City Human Resource Management Office- Located at the 2nd Flr. City Hall, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2G – Government to	Governme	ent	
Who may avail:	City Government of S employees	an Fernanc	do (P)'s active peri	manent and casual
CHECKLIST OF RE	QUIREMENTS		WHERE TO SI	ECURE
On-line Document R (DRApp) for existing	• • • • • • • • • • • • • • • • • • • •	HRIS – F	Request Record	Module
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Apply through HRIS – Request Record Module (RRM)	1. Receive/check the HRIS- DRApp	None		HRM Officer I (City Human Resource Management Office)
2. Wait and check the status of the requested document/s. (If the status shown is APPROVED FOR	2. Process DRApp: 2.1. Click the name of the requesting employee and review the request	None		HRM Officer I (City Human Resource Management Office)
RELEASE, that was the sign that the request is ready for release)	2.2. Prepare/print/ photocopy the requested document /record	None	1 day	HRM Officer I (City Human Resource Management Office)

	2.3. Certify true copy of document/ record	None		CHRM Officer (City Human Resource Management Office)
	2.4. Print transmittal	None		HRM Officer I (City Human Resource Management Office)
3. Receive the requested document/s	3. Release Certificate/ Service Record	None		HRM Officer I (City Human Resource Management Office)
TOTAL:		None	1 day	

Note: All requested document/s would be available on the next working day except for unavoidable circumstances.

3. APPLICATION OF LEAVE

The City Human Resource Management Office ensures readiness and accessibility of records in order to provide timely, efficient, accurate and systematic procedures on leave application.

Office or Division:	City Human Resource Management Office - Located at the 2nd Flr. City Hall, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga					
Classification:	Complex	Complex				
Type of Transaction:	G2 – Government to Go G	overnment				
Who may avail:	City Government of Sar employees	n Fernando	o (P)'s permaner	nt and casual		
CHECKLIST OF	F REQUIREMENTS WHERE TO SECURE					
1. On-line Leave of App 6)		HRIS – L	eave Application			
For sick leave	 Medical Certificate (1 original copy) For sick leave in excess of five successive days or as 			tor		
3. Clearance Form from Money, Property and Work-Related Accountabilities (CSC form No. 7, s.2017) (4 original copies) ➤ If leave is to last for 30 calendar days or more; and in case of vacation leave abroad regardless of days		CHRMO				
 Request Letter (1 oring) If leave is to language days or more 	ginal copy) ast for 30 calendar	Employee				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Apply through HRIS on-line Leave of Application (LOA)	1 Receive on-line LOA	None		HRM Officer I (CHRMO)		
2. Wait and check the status of the applied LOA through HRIS	2 Process LOA: 2.1. Provide and enter leave credit balance in the Certification of Leave Credits (CLC) portion of LOA	None 5 days HRM Office (CHRMC				

	2.2. Certify the recorded leave credit balance in the LOA-CLC	None		CHRM Officer (CHRMO)
3. Wait and check the status of the applied LOA through HRIS	3 Approve/ Disapprove leave application	None		Concerned Department Heads; City Administrator for rank and file employees; City Mayor for
				Department Heads under Executive and City Vice-Mayor for Legislative
	TOTAL:	None	5 days	

Cut-off Time: 12:00nn (8:00am-12:00nn) and 5:00pm (12:01 to 5:00pm)



4. PROCESSING OF PAYROLL FOR PERMANENT AND CASUAL EMPLOYEES

The City Human Resource Management Office ensures the timely release of salaries and wages through accurate, efficient and systematic computation of payroll.

Office or Divisions	Oita I I ann an Danasa				
Office or Division:	City Human Resource Management Office - Located at the 2nd Flr.				
	City Hall, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San				
Classification:	Fernando, Pampanga	<u> </u>			
	Complex				
Type of Transaction:					
Who may avail:	City Government of	San Fernan	ido (P)'s perman	ent and casual	
	employees		14// 1555 50 6		
CHECKLIST OF F			WHERE TO S	ECURE	
Daily Time Record (DT Record (BR)	R)/ Biometrics	Attendance	Management S	ystem under ALAS	
Payroll Adjustment		CHRMO			
		Downloada	ble at the City's	website	
Locator Slip			mentofsanfernar		
		Forms		0 1 //	
	AGENCY	FEES	PROCESSIN	PERSON	
CLIENT STEPS	ACTIONS	TO BE PAID	G TIME	RESPONSIBLE	
1 Log-in/out entries	1.1 Extract and import Biometrics data (every 11 th and 26 th of the month)	None	8 hours	HRM Officer I (City Human Resource Management Office)	
	1.2 View entries every 1 st and 16 th of the month	None	8 hours	HRM Officer I (City Human Resource Management Office)	
	1.3 Prepare and Transmit Biometrics Summary Report (BSR)	None	4 hours	HRM Officer I (City Human Resource Management Office)	

1		I]
1.4 Prepare and Transmit Payroll Adjustments to City Accountant's Office	None	8 hours	HRM Officer II (City Human Resource Management Office)
1.5 Prepare and Check Payroll Adjustments noted by the City Accountant	None	8 hours	Administrative Officer IV (City Accountant's Office)
1.6 Post Payroll Adjustments and transmit to CAccO	None	4 hours	HRM Officer II (City Human Resource Management Office)
1.7 Reconcile the payroll total amount with the CAccO	None	1 hour	HRM Officer II (City Human Resource Management Office)
1.8 Countercheck and Transmit PACSVAL/ Alpha list to CAccO	None	1 hour	HRM Officer II (City Human Resource Management Office)
1.9 Print PACSVAL/ Alpha list of employees	None	2 hours	Administrative Officer IV (City Accountant's Office)
1.10 Prepare and transmit OBR per Office to	None	8 hours	Administrative Officer IV (City Accountant's Office)
CBO 1.11Prepare DV, JEV and Authority to Deduct	None	4 hours	Administrative Officer IV (City Accountant's Office)

		1.12 Check Payroll by CAccO - IASD and to be signed by the City Accountant 1.13 Transmit DV to CTO	None	1 hour	Administrative Officer IV (City Accountant's Office) Administrative Officer IV (City Accountant's
		1.14 Transmit payroll to landbank	None	1 hour	Office) Administrative Officer IV (City Accountant's Office)
2	Receive salaries/wag es through ATM	2. Process and release Payroll of LGU-CSFP employees	None	6 hours	Clerk Landbank of the Philippines
		TOTAL:	None	8 Days	



Human

Resourc

5. PROCESSING OF PERSONNEL REQUISITION FORM/MANPOWER REQUESTS

The City Human Resource Management Office ensures accessibility and abruptness in the provision of competent manpower to be able to augment the needs and demands of the City Government in providing quality public service.

2 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mig quanty public co				
Office or Division:	City Human Resource Management Office - Located at the 2nd Flr. City Hall, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga				
Classification:	Highly Technical				
Type of Transaction:	G2G – Government to Government				
Who may avail:	City Government of San Fernando (P)'s Department Heads				
	REQUIREMENTS		WHÉRE TO SE		
Personnel Requisition	on Form (PRF)	-	Website (cityofsanferi Resource Manageme	• · · ·	
Copy of Resignation/Retirement/ Transfer/ENDO Letter/Memorandum		Requesting Office			
Copy of Project Prop	oosal (if necessary)				
Copy of Organization	nal				
Structure (if					
necessary)	1	_			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONS IBLE	
1 Fill-out PRF and submit to the CHRM Office	1. Assess and approve PRF	None	3 working days	HRM Officer II, HRMO IV and CHRM Officer (City Human Resourc e Manageme nt Office)	
2 Wait for the status of request	2.1 Notify requesting office through electronic	None	1 working day	HRM Officer I (City	

mail

1	Γ	<u> </u>	1	
				e Manageme nt Office)
2.2 Source applicant (subject to the technicality of the qualifications of the request)	None	3 working days		HRM Officer I (City Human Resourc e Manageme nt Office)
2.3 Conduct Background Investigation to pre-qualified applicants	None	11 working days		HRM Officer I (City Human Resourc e Manageme nt Office)
2.4 Notify short- listed applicants of the schedule of examination	None			HRM Officer I (City Human Resourc e Manageme nt Office)
2.5 Administer IQ & EQ Exams and Technical or Trade Tests if necessary	None			HRM Officer I (City Human Resourc e Manageme nt Office)
2.6 Assess examination results and conduct initial interview	None			HRM Officer I (City Human Resourc e Manageme nt Office)
2.7 Consolidate and prepare summary of pre- qualified applicants	None			HRM Officer I (City Human Resourc e

			Manageme
			nt Office)
			·
2.8 Notify pre-			
qualified			
applicants of the			HRM
schedule of the			Officer I
next interview &	None		(City
send letter of			Human
regret to			Resourc
unsuccessful			е
applicant/s			Manageme
			nt Office)
2.9 Facilitate the			HRMO I
Conduct of			and
Interview			Concerned
	None		Department
	None		<i>Head</i> (City Human
			Resource
			Manageme
			nt
			Office/Conc
			erned
		9 working	Office)
2.10 Notify pre-		days	·
qualified			
applicants of the			HRM
schedule of the			Officer I
final interview &	None		(City
send letter of			Human
regret to			Resourc
unsuccessful			е
applicant/			Manageme
			nt Office) HRM
2.11 Facilitate			нки 0 I
the Conduct of	NI		and
Interview	None		CHR
			M
			Offic
			er
			(City
			Hum
			an
			Reso
			urce
			Manageme
			nt Office)

	2.12 Prepare appointment of prospective employee & send letter of regret to	None	13 working days	HRM Officer I (City Human Resourc e Manageme nt Office)
	unsuccessful applicant/s			
	2.13 Review and finalize appointment of prospective employee	None		HRM Officer IV/ CHRM Officer (City Human Resourc e Manageme nt Office)
	2.14 Approve appointment	None		Appointing Authority (City Mayor's Office)
3 Sign Appointment documents and undergo onboarding process	3. Facilitate onboarding process	None	1 working day	HRM Officer I, Concern ed Departm ent Head (City Human Resourc e Manage ment Office/C oncerne d Office)
	TOTAL:	None	40 working days	

Note: Processing time is based on ISO 9001: 2015



6. FILING OF SIMPLE COMPLAINTS



The CHRMO aims to address all complaints and suggestions in accordance with the Civil Service Law and Rules and City Government policies.

Office or Division: Classification: Type of Transaction: Who may avail:	City Human Resource Management Office- Located at the 2nd Flr. City Hall, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga Highly Technical G2C – Government to Citizen/ G2G- Government to Government All				
	REQUIREMENTS	Crom com	WHERE TO SE	CURE	
Written unnotarized/online complaint Proof/Basis of complaint (if available)		From comp			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Submit written complaint through the official CHRMO email (hr.csfp@gmail.com) or personally through the office via window.	1. Receive complaints from External and internal clients.	None	15 minutes	HRMO IV (CHRMO)	
2. Wait for the receipt of response of person complained of.	2. Endorse the complaint to the department head of the person complained of and wait for response.	None	5 days	HRMO IV (CHRMO)	
3. Receive the response and decide whether to pursue complaint.	3. Send response of person complained of through email.	None	3 days	Administrative Aide (CHRMO)	

4. Decide whether to push through with formal complaint or file.	4. Based on investigation and validation, possible results may lead to verbal warning to the person being complained of, amicable settlement between two (2) opposing parties, endorsement of complaint to the City Legal Office or filing	None	2 days	HRMO IV (CHRMO)
TOTAL:		None	10 days and 15 minutes	



7. FILING OF FORMAL COMPLAINTS

The CHRMO aims to address all formal complaints and suggestions in accordance with the 2017 Rules in Administrative Cases in the Civil Service (RACCS).

Office or Division: Classification: Type of Transaction: Who may avail: CHECKLIST OF I	All			
Notarized complete	aint	From comp	lainant	
	pies of documentary			
	fidavits of his/her	From witnes	sses	
3. Certification or st forum shopping	tatement of non-	From comp	lainant	
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE		
1.Submit written complaint through the official CHRMO email (hr.csfp@gmail.com) or personally through the office via window.	Receive complaints from external and internal clients.	None	15 minutes	HRMO IV/ Administrative Aide (CHRMO)
2. Wait to be called for the conference/ Investigation.	2.1 Issue Order to Comment to person complained of.	None	3 days	Disciplining Authority (City Mayor's Office)
	Receive Notarized Response. Forward the pertinent documents to the City Legal Office.	None	3 days	HRMO IV (CHRMO)

3. Attend the conference if necessary.	3. Perform due process as specified in the 2017 Rules on Revised Cases in the Civil Service	None	PAUSED CLOCK	City Legal Officer (City Legal Office)
4. Request for a copy of decision.	4. Make a decision on the case.	None	PAUSED CLOCK	Disciplining Authority (City Mayor's Office)
	TOTAL:	None	The time of completion of the whole process shall depend on the guidelines written in the 2017 Rules on Administrative Cases in the Civil Service (RACCS)	



City Tourism and Investment Promotion Office (Tourism Office)

External Services

1. REQUESTING FOR A CERTIFICATE OF CONFORMITY BASED ON CSFP HERITAGE ORDINANCE

The Office of the City Tourism ensures the issuance of the Certificate of Conformity prior to securing building permits for new structures, renovations, restorations, and reconstruction within the heritage district as stated on heritage ordinance of the City of San Fernando, Pampanga.

Office or Division:	City Tourism Office (CTO), Paskuhan Village, San Jose, City of San Fernando, Pampanga			
Classification:	Complex			
Type of Transaction:	Government to Citizen			
Who may avail:	All owners or contractors securing building permits for new structures, renovations, restorations, and reconstruction within the heritage district as stated in the heritage ordinance of the City of San Fernando, Pampanga.			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	ECURE
1. Fully accomplish	ned SRF	City Tourisr	m Office	
,	eçade) signed by ngineer, Contractor	Client/s requesting for a certificate of conform		ificate of conformity
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE		
1. Inquire for certificate of conformity and accomplish the service request form	1. Issue Service Request Form (SRF) to the client/s	None	5 minutes	Administrative Aide (City Tourism Office)
2. Submit the filled- out service request form and submit all the necessary documents	2. Receive and review the filled-out request form and assess the documents and notify the client on the process to be undertaken	None	5 minutes	Administrative Aide (City Tourism Office)

3. Wait for any update	3.1 Site inspection	None	4 days	Tourism Operations Officer (Engineer, Architect, Contractor) (City Tourism Office)
	3.2 Prepare the certificate of inspection	None	15 minutes	Tourism Operations Officer (City Tourism Office)
	3.3 Approval of the certificate of inspection	None	3 minutes	City Tourism Officer Heritage Consultant/ NCCA (City Tourism Office)
	3.4 Prepare certificate of conformity	None	15 minutes	Tourism Operations Officer (City Tourism Office)
	3.5 Approval of the certificate of conformity	None	2 days	City Tourism Officer (City Tourism Office) City Administrator Officer (City Administrator Office)
	3.6 Notify the client of the approval and date to claim the approved certificate of conformity	None	2 minutes	Tourism Operations Officer (City Tourism Office)
4. Claim the certificate of conformity	4.Release the certificate of conformity	None	2 minutes	Tourism Operations Officer (City Tourism Office)
	TOTAL:	None	6 days and 47 minutes	



City Tourism and Investment Promotion Office (Investment Promotion Office)

External Services



1. APPLYING FOR AN INVESTMENT INCENTIVE

The City Investment Promotion Office (CIPO) ensures the granting of the Investment Incentive under Ordinance No. 2023-014 also known as the Investment Incentives Code of the City of San Fernando, Pampanga.

Office or Division:	City Investment Promotion Office- Located at the Left Wing, Ground Floor, Heroes Hall, San Juan, City of San Fernando,			
Classification:	Pampanga Highly Tachnical			
Type of Transaction:	Highly Technical G2B			
Who may avail:	Single Proprietorship, Corporation and Cooperative operating			
vino may avam.	•	jurisdiction of the City of San		
	Fernando, Pampano	•		
CHECKLIST OF F		WHERE TO SECURE		
1. Three (3) copies of (2017-01	SFP-IPD Form	Investment Promotion Office, Heroes Hall,		
2. Two (2) photo	copies of project			
feasibility study/report	of the proposed	Client		
investment indicating	g the financial			
viabillity and socio-				
economic impact of the	project			
3. One (1) Certified True Copy of the				
Original Business Nam	e Registration	Department of Trade and Industry		
Certificate (for				
Single Proprietorship)				
One (1) Certified True Copy of the				
Original of the Certificate of Registration				
and One (1) Certified	True Copy of the	Cooperative Development Authority		
Original of the comp	pany's Articles of			
Partnership/Incorporation	on and By-Laws			
(for Cooperative)				
One (1) Certified T	rue Copy of the			
Original of the Certific	ate of Registration			
and One (1) Certified	True Copy of the	Security and Exchange Commission		
Original of the comp	pany's Articles of	Cooking and Exchange Commission		
Partnership/Incorporation	on and By-Laws			
(for Partnership or Corp				
4. One (1) Certified True Copy of the Original Of Mayor's Permit for Business and Brgy Clearance for Business		Building License and Permit Division, Atrium, City Hall		
Partnership/Incorporation and By-Laws (for <i>Cooperative</i>) One (1) Certified True Copy of the Original of the Certificate of Registration and One (1) Certified True Copy of the Original of the company's Articles of Partnership/Incorporation and By-Laws (for Partnership or Corporation) 4. One (1) Certified True Copy of the Original Of Mayor's Permit for		Building License and Permit Division, Atrium,		

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E
1. Duly accomplish the CSFP-IPD Form 2023-01 forms and submit together with requirements	1. Receive the application form, assess completenes s of submitted requirement s and release Billing Statement for Filing fee	None	10 minutes	Project Development Assistant, (Investment Services Section)
2. Proceed to the City Treasurer's Office at the City Hall for the payment of non- refundable filing fees	2. Accept payment and issue Official Receipt	Capitalizatio n Classificatio n <i>Small</i> 30,000,001 - 50,000,000 Php. 10,000.00 <i>Medium</i> 50,000,001 – 100,000,000 Php. 15,000.00 <i>Large</i> 100,000,00 1 – ABOVE Php. 20,000.00	15 minutes	Collecting Officer, (City Treasurer's Office)
3. Wait for notification regarding the result of evaluation and validation of submitted requirements to the IPO for acceptance	3. Evaluate and validate authenticity of submitted requirements	None	5 working days	Project Development Officer, (Investment Services Section)

4. Wait for the Issuance of Letter of Acceptance and endorsement to the Board for evaluation and approval	4. Prepare and release Letter of Acceptance to the applicant and facilitate the endorsement of the application to the Board for evaluation and approval	None	5 working days	Project Development Officer, (Investment Services Section)
5. Wait for the result of the consultation with and evaluation by the Board for the granting of incentive	5. Facilitate conduct of Investment Incentive Board Meetings and Inspections. (including preparation of Notice of Approval, position paper and Board Resolution)	None	63 workin g days	IPO Secretariat and Investment Incentive Board
6. Wait for Issuance of Notice of Approval from the Secretariat	Release of Notice of Approval	None	10 minutes	Project Development Officer, (Investment Services Section)
7. Proceed to the City Treasurer's Office for the Payment of Registration fee	Accept payment and issue the Official Receipt	1/20 of the 1% of the total capitalizati on	15 minutes	Collecting Officer, (City Treasurer's Office)
8. Present OR and wait for the Issuance of Certificate of Registration	Release of Certificate of Registration	None	5 minutes	Project Development Officer IV, (Investment Promotion Division)

	1		
	Capitalizati		
	on	76 working	
TOTAL:		days and	
	n Small	55	
	30,000,001	minute	
	30,000,001	S	
	50,000,000	J	
	Php.		
	10,000.00		
	10,000.00		
	Medium		
	50,000,001 -		
	100,000,000		
	Php.		
	15,000.00		
	Large		
	100,000,001		
	– ABOVE		
	Php.		
	20,000.00		
	1/20 of the		
	1% of the		
	total		
	capitalizatio		
	n '		

Legal Basis: RA 7160 Local Government code of 1991 (Book 1, Title VI, Section 109 & Book 2, Chapter V, Section 192) & Ordinance No. 2017-024 CSFP 2017 Local Investment Incentives Code (Chapter VIII, Section 3)



2. APPLYING FOR PERMIT TO PARTICIPATE (TRADE FAIR)

The City Investment Promotion Office (CIPO) ensures the issuance of PERMIT to PARTICIPATE for the Trade Fairs organized by the City Government of San Fernando, Pampanga to all Fernandino Micro and Small Entrepreneurs.

Office or Division:	City Investment Promotion Office- Located at the Left Wing, Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C & G2B				
Who may avail:	Micro and Small Entrepreneurs operating within the territorial jurisdiction of the City of San Fernando, Pampanga				
CHECKLIST OF RI	EQUIREMENTS		WHERE TO SE	CURE	
A A substant server of a	fully an analysis and	O'tra larra ata	t D	Minn I of Minn	
1. 1 original copy of a	•	1 -	City Investment Promotion Office, Left Wing,		
IPO Profile Form v2		Ground Flo	or, Heroes Hall,		
Original copy of Lis Products	t/Pictures of the	Client			
Certificate (orig	If New, Business Opportunity Seminar Certificate (original copy		DTI/Negosyo Center		
For Food, FDA Certification or Good Manufacturing Practices Certification (GMP) if available		FDA/DOST/CHO			
5. Photocopy of Business Name Registration Certificate		Department of Trade and Industry			
6. Photocopy of Business Permit if already registered or Temporary Permit if start Up Business		Business License and Permit Division, Atrium CityHall			
7. Company profile		Client			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Duly accomplish the required forms	1. Issue application form	None	10 minutes	Project Development Assistant, (Business Dev't Section)	
Submit required documents along with the accomplished form 2. Review, evaluate and validate submitted requirements/ documents		None	5 minutes	Project Development Officer, (Business Dev't Section)	

3. Undergo validation thru an Owner/Entrepr eneur Interview	3. Conduct validation Interview	None	10 minutes	Project Development Officer, (Business Dev't Section)
4. Wait for the Approval Permit to Participate	4. Sign the Conformity slipand prepare approval permit to participate	None	3 minutes	Project Development Officer IV, (Investment Promotion Division)
5. Claim Permit to Participate	5. Release Permit to Participate	None	2 minutes	Project Development Assistant, (Business Dev't Section)
	TOTAL:	None	30 minutes	



3. APPLYING FOR TRAINING/SEMINAR PARTICIPATION

The City Investment Promotion Office (CIPO) ensures the proper registration of the Fernandino Constituents for Training/Seminar organized by the City Government of San Fernando, Pampanga to all existing or startup business.

Office or Division:	City Investment Promotion Office- Located at the Left Wing, Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga			~		
		San Juan, C	ity of San Fernar	ndo, Pampanga		
Classification:	Simple					
Type of Transaction:	G2C					
Who may avail:	All Citizens of the C	City Governm				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	:CURE		
Fully accomplished IPO Profile Form v2018.2		Investment Promotion Office, Heroes Hall				
Any of the follow Government Iss	•		A# : 5: : :			
Fernandino Acc		Gate,City F		2 nd Floor,2 nd		
Philippine Pass		<u> </u>	egional Office			
Driver's License	e LTO					
UMID Card	SSS or GSIS					
 Philhealth ID 	Philhealth ID			Philhealth Local Insurance Office		
 TIN Card 		BIR				
 Postal ID 		PhilPost				
Voter's ID		COMELEC				
 Professional Re 	gulations	DDC				
Commission ID		PRC				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Accomplish forms with submit requirements	1. Issue application form	None	5 minutes	Project Development Assistant, (Business Dev't Section)		
2. Wait while submitted requirements are evaluated and validated	2. Review the submitted documents	None	5 minutes	Project Development Officer, (Business Dev't Section)		
3. Undergo validation thru an Interview	3.Conduct Interview	None	5 minutes	Project Development Officer, (Business Dev't Section)		

2. Claim	4.Prepare and			Project Development Assistant,
Training/Semi nar Schedule Slip	Release Training/ Seminar Schedule Slip	None	2 minutes	(Business Dev't Section)
	TOTAL:	None	17 minutes	



Internal Control Division

External Services

1. COMPLAINTS HANDLING OF ISO-CERTIFIED OFFICES

Feedback forms are distributed to clients of frontline offices involved in the implementation of Quality Management System (QMS). These feedback forms are being dropped at the designated suggestion boxes in each focal office and are being evaluated to further improve the quality of services being rendered or delivered.

Office or Division:	Internal Control Division (ICD) - Located at the 2nd floor, Right				
	Wing, City Hall, A. Co	onsunji St. S	to. Rosario, City c	of San	
	Fernando, Pampanga	Fernando, Pampanga			
Classification:	Highly Technical				
Type of Transaction:	G2C – Government t	o Citizen			
Who may avail:	Clients of ISO-certifie	ed processes	}		
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE		
1. Client's Feedbac	ck Form (1 original)	Focal Office processes	es of ISO-certified	scope of	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Drop the feedback form at designated suggestion box located at the Focal Offices.	1. Gather and sort the feedback forms. Endorse form with complaint for assessment and validation.	None	2 hours	Overall Document Controller/ Personnel-in- Charge (ICD)	
2. Provide the necessary information to the Overall Document Controller for the clarification of the incident that caused the client's dissatisfaction.	2. Conduct validation of the complaint and review corrective actions, if applicable. 2.1 Validate the complaint to the client and erring personnel. *During validation, the client is informed that his/ her complaint is being	None	3.75 working days	Overall Document Controller/ Personnel-in- charge (ICD)	

2.2 mem Corr Repo	essed/ ressed. Issue norandum and ective Action ort if the plaint is valid.	None	5 working days	Overall Document Controller/ Personnel-in- charge, Internal Monitoring Team (IMT) Head, Quality Management Representative (QMR)/ Overall Deputy QMR, City Mayor (ICD, CAdminO, CMO)
key per the correction of the	Conduct a ting with the personnel of erring office for discussion on cause ysis, review agree with the ective actions mitted by g personnel.	None	5 working days	Overall Document Controller, IMT Head, and key personnel of erring office (ICD, Concerned Office)
	TOTAL:	None	15 working days	



Internal Control Division

Internal Services



1. REVISION OF THE DOCUMENTED INFORMATION

All documents relevant to the effectiveness and efficient implementation of the Quality Management System (QMS) shall be controlled. Control of documented information is required to ensure that documents are approved prior to issuance or use and to identify the current revision status or latest versions of documents to prevent unintended use of obsolete copies.

Office or Division:	Internal Control Division- Located at the 2 nd floor, Right Wing, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga			
Classification:	Highly Technical			
Type of Transaction:	G2G – Government to	o Government		
Who may avail:	Internal Monitoring Te ISO-certified processe	` ' '	entatives/ Process	S Owners of
CHECKLIST OF REC	QUIREMENTS	WHE	RE TO SECURE	
Document Approval (1 original and 1 pho	Request Form (DARF) tocopy)	Provided to IMT	representatives	of offices
Proposed document	draft (2 original) To be prepared by the concerned IMT representatives/ process owners			I IMT
Obsolete form, if app	licable (2 original)	To be provided by the IMT representat		sentatives/
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE DEOCESSING DEDS		
1. Submit the DARF and required attachments to the Overall Document Controller.	1. Receive the documents submitted by the IMT representative/ process owner and endorse to the assigned personnel who shall conduct document review.	None	4 hours	Overall Docume nt Controlle r (ICD)

	Г <u> </u>			 1
2. Provide necessary information to the personnel-incharge relative to	Review and approve the document draft. 2.1 Conduct review and			
the review and possible clarifications of the document draft.	verification of the proposed document and effect the revisions in the documents.	None	In working days per category: Simple-3 Complex A-10 Complex B-25	Personnel-in- charge (ICD)
	2.2 Conduct Initial Review of the document draft.	None	lo working dovo	
	2.3Conduct further review	none	In working days per category: Simple-1	Quality Monitoring (QM) Section
	and recommend approval of the		Complex A-5 Complex B-15	Head (ICD)
	document draft.	None	In working days per category: Simple-1	
	2.4 Approve the document draft.		Complex A-5 Complex B-15	IMT Head (ICD)
		None	3 working days	
	2.5 Update the affected			Quality Manageme
	sections of the QMS manual	None	1 working day	nt Representa tive (QMR) / Overall Deputy QMR (CAdminO/ CLO)
				Overall Document Controller (ICD)

3. Agree with the approved document and revision of forms, provide final copies of the documents	3. Finalize the QMS manual sections affected by the revision. 3.1 Prepare the draft of the affected sections of the QMS manual for review		7 working days	Overall Document
to the personnel-in-charge.	and approval.	None	7 Working days	Controller / QM Section Head / IMT Head / QMR/DQMR (ICD, CAdminO, CLO)
	3.2Convert the soft copies per document code into PDF file and update the QMS E-manual. Simultaneous with the updating of the QMS E-Manual, prepare the Retrieval Form for Obsolete Documents, Transmittal for QMS Documents, and Transmittal and Retrieval Forms Monitoring of Submission, as well as the memorandum for changes and Backup Transmittal for review and approval. 3.3Review the updated QMS Manual.	None	1 working day	Overall Documen t Controller / Personne I-in- charge/ QM Section Head/ IMT Head (ICD)
		None	3 hours	
				QM Section Head (ICD)

3.4Print and stamp the Final Documents of offices.	None	4 hours	Personnel-in- charge (ICD)
3.5Perform backup of the QMS E- Manual and its supporting documents. Transmit the QMS E-Manual for uploading in the city's website.	None	2 hours	Overall Document Controller/ Personnel-in- charge (ICD)
4. Conduct distribution and retrieval activities.			
4.1Retrieve the obsolete copies of documents and distribute the approved document and the backup copy of	None	6 hours	Overall Document Controller/ Personnel-in- Charge (ICD)
QMS E-Manual. 4.2Upload the memorandum for changes and its attachments in the online platform.	None	4 hours	Overall Document Controller/ Personnel-in- Charge (ICD)
TOTAL:	None	In working days per Category: Simple-20 Complex A-35	
	the Final Documents of offices. 3.5Perform backup of the QMS E- Manual and its supporting documents. Transmit the QMS E-Manual for uploading in the city's website. 4. Conduct distribution and retrieval activities. 4.1Retrieve the obsolete copies of documents and distribute the approved document and the backup copy of QMS E-Manual. 4.2Upload the memorandum for changes and its attachments in the online platform.	the Final Documents of offices. 3.5Perform backup of the QMS E- Manual and its supporting documents. Transmit the QMS E-Manual for uploading in the city's website. 4. Conduct distribution and retrieval activities. 4.1Retrieve the obsolete copies of documents and distribute the approved document and the backup copy of QMS E-Manual. 4.2Upload the memorandum for changes and its attachments in the online platform.	the Final Documents of offices. 3.5Perform backup of the QMS E-Manual and its supporting documents. Transmit the QMS E-Manual for uploading in the city's website. 4. Conduct distribution and retrieval activities. 4.1Retrieve the obsolete copies of documents and distribute the approved document and the backup copy of QMS E-Manual. 4.2Upload the memorandum for changes and its attachments in the online platform. None 4 hours A hours In working days per Category: Simple-20

Note: Processing Time per category are based on the approved timeliness targets for the review of ISO documents as documented in the City Government's Quality Management System Manual (QM-RI-01).



Office of the Sangguniang Panlungsod

External Services

1. CERTIFICATE OF POSTING

The Office of the Sangguniang Panlungsod ensures that all hearings, orders, or decisions of various government agencies (such as the National Water Resources Board, Energy Regulatory Commission, etc.) are posted on the Bulletin Board of the Sangguniang Panlungsod for public information. This posting includes a **certification of posting**.

Office or Division:	Office of the Sangguniang Panlungsod (OSP) - Located at the 2 nd Floor, Back Entrance, Heroes Hall, Magdalena Subdivision, San Juan, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2B –Government	G2B –Government 2 Business Entity			
Who may avail:	Business Entities				
CHECKLIST OF R	EQUIREMENTS		WHERE TO	SECURE	
Copy of Notice of Ord Decision	der, Hearing or	Concerned	Government Age	ency	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a copy of the Notice of Order, Hearing or Decision to the Office of Sangguniang Panlungsod	1. Receive the copy of Notice of Order, Hearing or Decision	None	2 minutes	Admin Officer / Records Officer / Admin Assistant / (Office of Sangguniang Panlungsod)	
2. Wait for the posting of the Notice of Order, Hearing or Decision	2. Post a copy of the Notice of Order, Hearing or Decision to the OSP's Bulletin Board 2.1 Prepare a Certificate of posting	None	1 day	Local Legislative Staff Admin Officer (Office of Sangguniang Panlungsod)	
3. Proceed to the Office of the Sangguniang Panlungsod to Request the Certificate of Posting	3. Receive the request and prepare the Certificate of Posting to be signed by the SP Secretary.	None	5 minutes	SP Secretary and Admin Officer / Records Officer (Office of Sangguniang Panlungsod)	

4. Sign the receiving copy and Receive the Certificate of Posting	4. Stamp the Certificate of Posting with the Office of the Sangguniang Panlungsod's seal 4.1 Release the Certificate to the proponent	None	3 minutes	Admin Officer / Records Officer / Admin Assistant (Office of Sangguniang Panlungsod)
	TOTAL:	None	1 day and 10 minutes	

2. CERTIFICATE OF ACCREDITATION



The Office of the Sangguniang Panlungsod grants accreditation to a Civil Society Organization (CSO) prior to the completion of their requirements.

Office or Division:	Office of the Sangguniang Panlungsod (OSP) - Located at the 2 nd Floor, Back Entrance, Heroes Hall, Magdalena Subdivision, San Juan, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	Civil Society Organ	nizations			
CHECKLIST OF F	, -		WHERE TO SE		
Duly Accomplish Form for Accredi	• •	Office of the	e Sangguniang Panl	ungsod	
2. Board Resolution	า	Self Produc	ed		
3. Certificate of Reg	gistration	Registering	Agency		
List of Current O Members	fficers and	Self Produced			
5. Annual Accompl (Calendar Year)	ishment Report	Self Produced			
6. Financial Statem Year)	ent (Calendar	Self Produced			
7. Profile indicating objectives of the		Self Produced			
8. Copy of the Minuthe organization	_	Self Produced			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Accomplish and Submit the Application Form for Accreditation together with an application letter addressed to the City Vice Mayor thru the SP Secretary at OSP Office	Receive the application letter 1.1 Endorse the same to the City Vice Mayor / Presiding Officer	None	10 minutes	SP Secretary and Admin Officer / Records Officer (Office of Sangguniang Panlungsod)	

2. Submit the complete requirements	2. Check all the requirements of the applicant	None	5 minutes	Admin Officer / Records Officer (Office of Sangguniang Panlungsod)
3. Wait while the request is being processed	3. Prepare the certificate, make a duplicate copy of the certificate as a receiving copy	None	10 minutes	Admin Officer / Records Officer / (Office of Sangguniang Panlungsod)
4. Wait while the request is being processed	4. Endorse the certificates to the City Vice Mayor / Presiding Officer for signature	None	1 day	City Vice Mayor and Admin Officer / Records Officer / (Office of Sangguniang Panlungsod)
5. Wait while the request is being processed	5. Stamp the certificates with the Office of the Sangguniang Panlungsod's seal	None	1 minute	Admin Officer / Records Officer (Office of Sangguniang Panlungsod)
6. Receive the certificate and sign the receiving copy	6. Release the certificate 6.1 Ask the client to also sign the receiving copy	None	1 minute	Admin Officer / Records Officer (Office of Sangguniang Panlungsod)
	TOTAL:	None	1 day and 27 minutes (The duration for completing the accreditation process may vary, depending on the availability of the signatories, which can result in either a shorter or longer timeframe.)	



3. ISSUANCE OF COPIES OF ORDINANCES AND RESOLUTIONS

The Office of the Sangguniang Panlungsod ensures that copies of records of Ordinances and Resolutions are readily available to all citizens of the city at all times.

Office or	Office of the Sangguniang Panlungsod (OSP)- Located at the 2 nd Floor,			
Division:	Back Entrance, Heroes Hall, Magdalena Subdivision, San Juan, City of			
	San Fernando, Pampanga			
Classification:	Simple			
Type of	G2C, G2B, G2G -	Governmen	t to Citizen, Busir	ness Entity and
Transaction:	Government			
Who may avail:	All			
CHECKLIST OF	REQUIREMENTS	,	WHERE TO	SECURE
None.		n/a		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request or inquire for a copy of an Ordinance or Resolution; providing the complete details regarding the intent such as law on smoking, traffic, permit, etc; or its year of enactment, author, title, etc. or if certain Ordinance/Resolution has been enacted or in existence	1. Upon receipt of inquiry /request, check the records through DMAS (Document Management Application System) for the availability of the Ordinance/ Resolution. *The records search is dependent on details that the client shall provide. Accurate and comprehensive details provided relative to the intent of the client may result to faster retrieval of the requested copy Ordinance/ Resolution. Advise the client	None	15 minutes *If the client's details are insufficient, it may take 1 day to thoroughly check all the office records	Admin Officer or Records Officer/ Researcher (Office of Sangguniang Panlungsod)

	accordingly.			
2. Wait while the request is being processed	2. Ask the approval of the SP Secretary regarding the requested copy of the ordinance	None	1 minute	Admin Officer or Records Officer/ Researcher (Office of Sangguniang Panlungsod)
3.Wait while the request is being processed	3. Print a copy of the requested Ordinance/ Resolution, stamp it with the Sangguniang Panlungsod's Seal as a certified true copy (if needed)	None	2 minutes	Admin Officer or Records Officer/ Researcher (Office of Sangguniang Panlungsod)
4. Sign the receiving logbook *signature over printed name including date of receiving	4. Ask the client to sign the receiving logbook along with the details of the Ordinance/Resolution requested and the details of the client.	None	1 minute	Admin Officer or Records Officer/ Researcher (Office of Sangguniang Panlungsod)
5. Receive the requested copy of Ordinance/ Resolution	5. Release the copy of Ordinance/ Resolution	None	1 minute	Admin Officer or Records Officer/ Researcher (Office of Sangguniang Panlungsod)
	TOTAL:	None	20 minutes or more	



City College of San Fernando Pampanga

External Services

1. ADMINISTRATION OF COLLEGE ENTRANCE TEST

The CET is a tool used to measure the learning capacity of student applicants in CCFP. The applicant must meet the College Stanine requirement to be able to secure one of the requirements of the College for admission. This is taken by all applicants.

Office or Division:	Guidance Office- City College of San Fernando, Pampanga- Located at the Back of the Heroes Hall, Brgy. San Juan, City of San					
DIVISION.	Fernando, Pampanga					
Classification:	Simple					
Type of Transaction:	G2C – Governme	nt to Citizen				
Who may avail:	Student Applicant	S				
CHECKLIST OF REC	UIREMENTS	W	HERE TO SECUE	RE		
CET Permit		Office of the Reg	gistrar			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PROCESSING RESPONS				
Report on the day of examination	1. Check CET permit	None	Psychometrician (CCSF)			
2. Take the examination	2. Administer the examination (IQ and Aptitude Test)	ation None 2 hours				
	TOTAL:	None	2 hours and 2 minutes			

2. ADMINISTRATION OF PRE-EMPLOYMENT EXAMINATION



Pre-employment examination is being conducted by the Psychometrician to evaluate Faculty Applicant's cognitive ability and personality

Office or Division: Classification: Type of Transaction:	Guidance Office – City College of San Fernando Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga Simple G2C – Government to Citizen				
Who may avail:	Teacher Applicants		WHERE TO SECU	DE	
CHECKLIST OF RE Endorsement President, original co	from the	WHERE TO SECURE President's Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID PROCESSING TIME PERSON RESPONSIBLE			
Report for examination	Assist applicant for testing	None 5 mins Psychometricia (CCSF)			
2. Take the examination	2. Administer the examination	None 1 hour and 30 Psychometrician (CCSF)			
TOTAL: None 1 hour and 35 mins					



3. ORIENTATION AND ISSUANCE OF STUDENT MANUAL

Information and Orientation Services

This service is created and implemented primarily to provide updated and pertinent data which may be useful in designing programs to answer the developmental needs of the students. It is meant to gather and relay relevant facts needed for their education, personal, career, social and spiritual advancement. This service includes the following: career education programs, orientation programs, and guidance informational/educational materials.

Office or Division:	Guidance Office – City College of San Fernando, Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga				
Classification :	Simple				
Type of Transaction:	G2C – Governmen	t to Citizen			
Who may avail:	Students				
CHECKLIST OF R	EQUIREMENTS		WHERE TO	SECURE	
Registration original	form or ID,	Office of the	e Registrar		
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON RESPO			
1.Attend orientation	1. Inform and assist in the orientation	None	1 hour	Guidance Officer (CCSF)	
Present Registrat ion form or ID	2.Check presented identification	None	1 min	Guidance Officer (CCSF)	
3. Secure copy of the Student manual and sign in logbook	3.Issue student manual and log information of the student	None 3 mins Guidance Officer (CCSF)			
	TOTAL: None 1 hour, 5 minutes				



4. ISSUANCE OF GOOD MORAL CERTIFICATE

Good moral character is an ideal state of a person's beliefs and values that is considered most valuable. A good moral character certificate can be assessed through the requirement of virtuous acts or by principally evaluating a student's character formed by one's actions, habits, and emotional responses directed toward the moral and the good.

The certificate of good moral character is typically requested for the purpose of job application, scholarship application. Transferring to another school and other legal purposes.

Office or Division:	Guidance Office – City College of San Fernando Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Governmer	nt to Citizen			
Who may avail:	Outgoing Applican	ts			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE	
Exit interview form,	original copy	Guidance C	Office	·	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID PROCESSING TIME PERSON RESPONSIBLE			
1.Submit accomplished the exit interview form	1.Receive form	None	2 mins	Guidance Officer	
2.Attend the interview	2.Conduct the exit interview	None	10 mins	Guidance Officer	
3.Secure Good Moral Certificate and sign logbook.	3.Prepare certificate, logs information of client in the logbook and issue the certificate	None	5 mins	Guidance Officer	
TOTAL: None 17 mins					

5. ADMINISTRATION OF FACULTY EVALUATION

The Guidance Office facilitates Faculty Evaluation to faculty members in all departments to identify the faculty member's areas of strength and improvement.

Office or Division:	Guidance Office – City College of San Fernando Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga
Classification:	Simple
Type of Transaction:	G2C – Government to Citizen
Who may avail:	Students

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Faculty Evaluation For	ms	Guidance Of	fice		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Wait for the Schedule of Faculty Evaluation.	1.Schedule Faculty Evaluation.	None	30 mins	Psychometricia n (CCSF)	
2.Accomplish Faculty Evaluation Forms	2.Distribute Faculty Evaluation Forms	None	15 mins	Psychometricia n(CCSF)	
3.Submit Accomplished Faculty Evaluation	3.Collect Accomplished Faculty Evaluation Forms	None	5 mins	Psychometricia n (CCSF)	
	4.Tally data and consolidate comments based on the accomplished faculty evaluation form.	None		Psychometricia n (CCSF)	
4.Sign summary of Faculty Evaluation ratings.	5.Prepare a summary of Faculty Evaluation ratings and have it signed by the program head and the college president	None	5 mins	Psychometricia n/Guidance Officer (CCSF)	

5.Receive the Summary of Faculty Evaluation Ratings	6.Submit the Summary of Faculty Evaluation ratings at the Human Resources Department	None	5 mins	Psychometricia n (CCSF)
6.Receive Certificate of Evaluation	7.Issue Certificate of Evaluation to Faculty.	None	5 mins	Psychometricia n (CCSF)
	TOTAL:	None	1 hour and 5 mins	

6. CONDUCT OF GROUP OR INDIVIDUAL COUNSELING

Counseling is the heart of the guidance services. This service establishes a professional relationship between a counselor and a client in which the counselor makes efforts to assist the counselee to adjust to his/her aspects of life affecting his/her optimal development in academics, social, physical, emotional, psychological, mental, career, and spiritual.

	0.11 0.00	0 11			
Office or Division:		Guidance Office – City College of San Fernando Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San			
			Hall, Brgy. San J	uan, City of San	
Classification:	Fernando, Pampanga				
	Simple	Simple			
Type of Transaction:	G2C – Government to	Citizen			
Who may avail:	Students				
-	REQUIREMENTS		WHERE TO SE	CURF	
Cumulative Form	ILL CONCENTENTO			OOKE	
Cumulative i Omi		Guidance C			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1.The student goes to the Guidance Office for initial interview.	1.The Guidance Counselor conducts the filing of Cumulative Folder.	None	10 mins	Guidance Counselor (CCSF)	
2.The student attends the Initial Interview	2.The Guidance Counselor establishes rapport for relationship building	None	15 mins	Guidance Counselor (CCSF)	
3.The student relays information about one self and seek counseling.	3.The Counselor conducts an in depth exploration for problem assessment.	None	30 mins	Guidance Counselor (CCSF)	
4.The student willingly shares his/her concerns and seek professional advise to the guidance counselor	4. Conduct Counseling Intervention (depending on the behavioral approaches suited for the case).	None	1 hour	Guidance Counselor	
5.The student logs at the counseling logbook before leaving the Guidance Office.	5.The counselor records the counseling session in the counseling form.	None	15 mins	Guidance Counselor (CCSF)	
	TOTAL:	None	2 hours and 10 mins		

7. CONSULTATION/REFERRAL

Consultation/Referral provides personal counseling for enrolled City College students free of charge. This is important for the students to maintain and enhance their psychological and emotional well-being so they can successfully achieve their academic goals.

Office or Division:	Guidance Office – City College of San Fernando Pampanga - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga					
Classification :	Simple					
Type of Transaction:	G2C – Government	t to Citizen				
Who may avail:	Students					
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE		
Counseling Referra	al Slip	Guidance (Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID PROCESSING TIME PERSON RESPONSIBLE				
1.The subject teacher refers a student to the Guidance Counselor.	1.The Guidance counselor gives a referral form to the subject teacher.	None	10 mins	Guidance Counselor (CCSF)		
2.The teacher fills out the referral form.	2.The Guidance counselor receives the form.	None 2 mins Guidance Counselor				
3.The student gets a call from the Guidance Counselor	3.The Guidance counselor calls for the student.					
4.The student reports to the Guidance office.	4.The Guidance Counselor conducts counseling sessions to the referred students. A.The Guidance Guidance Counselor (CCSF)					
	TOTAL: None 1 hour and 17 mins					

8. ENROLLMENT

The first process of any institution to accommodate students and signifying the continuing service of the LGU to qualified students is the enrolment. The Registrar's office is tasked to admit students into the College and keep record of the progress of students.

A. 1st Semester of every Academic Year

Office or Division:	Office of the Registrar (City College of San Fernando Pampanga) - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San				
	Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2C – Government	to Citizen			
Who may avail:	Students				
CHECKLIST OF REC	QUIREMENTS	WHERE T	O SECURE		
New Students: 1. Form 137/138 2. Certificate of Good Character 3. Original PSA Birth 4. 4 pcs, 1.5 x 1.5 wit Background Old Students: 1. Copy of grades of semester 2. Fully accomplished previous semester	Certificate h White the previous	School last attended School last attended PSA Office of the Registrar			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Submit the following: New Student: 1. Form 137/138 2. Certificate of Good Moral Character 3. Original PSA Birth Certificate 4. 4 pcs, 1.5 x 1.5 with White Background Old Student: 1. Copy of grades of the previous	1.Check and evaluate the records if qualified to enroll.	None	1 min	Registrar I (CCSF)	

semester 2. Fully accomplished clearance from previous semester				
2.Secure and fill out Registration Form and Personal Data Form	2.Provide 2 copies of Registration Form and Personal Data Form (CCSF-Form-RO- 1 and RO-2)	None	1 min	Registrar I (CCSF)
3.Submit accomplished Registration Form and Personal Data Form and secure a copy of Registration Form.	6.Check and verify fully accomplished forms. Once verified, stamp Registration Form as enrolled. Give a copy of the Registration Form to the student	None	2 mins	Registrar I (CCSF)
4.Fill out an ID slip and secure an official ID for the Academic Year.	7.Print and issue Identification Card	None	10 mins	IT Coordinator (CCSF)
TOTAL:			14 mins	

B. 2nd Semester of every Academic Year

Office or Division:	Office of the Registrar (City College of San Fernando Pampanga) - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Students			
CHECKLIST OF RE	EQUIREMENTS WHERE TO SECURE			
Copy of grades of the previous semester Office of the Registrar				

2. Fully accomprom previous seme	olished clearance ster			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the following: 1. Copy of grades of the previous semester 2. Fully accomplished clearance from previous semester	1.Check and evaluate the records if qualified to enroll.	None	1 min	Registrar I (CCSF)
2.Secure and fill out Registration Form and Personal Data Form	2.Provide 2 copies of Registration Form and Personal Data Form (CCSF-Form- RO-1 and RO- 2)	None	1 min	Registrar I (CCSF)
3.Submit accomplished Registration Form and Personal Data Form and secures a copy of Registration Form.	6.Check and verify fully accomplished forms. Once verified, stamp Registration Form as enrolled. Give a copy of the Registration Form to the student	None	2 mins	Registrar I (CCSF)
4.Present ID	7.Sign 2 nd			D' /

None

None

2 mins

6 mins

Registrar I

(CCSF)

semester box

at the back of

ID Card

Card for

updating

TOTAL:

9. DISTRIBUTION OF COPY OF GRADES

The copy of grades are issued to on-going students or to those who dropped from the ranks. For ongoing students, this is a requirement for enrolment the following semester.

Office or Division:	Office of the Registrar (City College of San Fernando Pampanga) - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga						
Classification :	Simple						
Type of Transaction:	G2C – Government to C	itizen					
Who may avail:	Students						
CHECKLIST OF R	REQUIREMENTS	WHERE	TO SECURE				
Original copy of cle	earance	Office of t	he Registrar				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1.Present I.D. duly accomplished and signed clearance	1.Check and verify I.D. clearance	None	1 min	Registrar I (CCSF)			
2.Receive copy of final grades	2.Release copy of grades	None 1 min Registrar I (CCSF)					
TOTAL:	1	None	2 mins				

10. ISSUANCE OF CERTIFICATIONS AND OTHER CREDENTIALS

The Office of the Registrar issues Transcript of Records (TOR), Diploma, Certificate of Enrolment, Honorable Dismissal and CAV to students who have successfully completed all academic requirements for a Bachelor's Degree or those who have dropped from the ranks.

Office or Division:	Office of the Registrar (City College of San Fernando Pampanga) - Located at the Back of the Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga						
Classification:	Simple						
Type of Transaction:	G2C – Government to Cit	izen					
Who may avail:	Students, Alumni, Non-co	entinuing Stude	ents				
CHECKLIST OF	REQUIREMENTS	N	HERE TO SECU	RE			
Request Slip (CCSF	F-Form-RO-3)	Office of the	Registrar				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1.Accomplish Request Slip (CCSF-Form-RO-3)	1.Receive and verify filled out form.	None	1 min	Registrar I (CCSF)			
2.Pay corresponding fees	2.Receive payment and issue official receipt: COE TOR COG CAV Diploma	50.00 100/pag e 50.00 50.00 300.00	1 min	Cashier (CCSF)			
3.Receive claim stub	3.Indicate release date and issue claim stub.	None	3 mins	Registrar I (CCSF)			
4.Wait until the release date as	4.Prepare the requested document	None					
indicated in the claim stub	1. COE 2. TOR		1 day	Dogistror I			
	3. COG 4. CAV		3 days	Registrar I			
	5. Diploma		1 day	(CCSF)			
	'		2 weeks				
	5.Check, verify and sign requested documents	None	1 mins	Registrar III (CCSF)			
5.Present claim stub and official receipt	6.Release the requested documents	None	1 mins	Program Head (CCSF)			
TOTAL:		None	7 mins + N days				





The library card is a requirement for all bonafide students of CCSFP to be able to avail of the library services such as borrowing of books and internet usage.

Office or Division: Classification: Type of Transaction: Who may avail:	Library – City College of San Fernando Pampanga- Located at the 2 nd Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga Simple G2C – Government to Citizen				
CHECKLIST OF REQUIRE	Students MENTS		WHERE TO SE	CURE	
10. Registration form, sta enrolled, original	Student				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Present ID or Registration Form stamped enrolled to the librarian	1. Record details of the students	None	2 minute	Librarian III Library Assistant (CCSF)	
2. Keep Library Card	2. Issue library card	None	1 minute	Librarian III Library Assistant (CCSF)	
	TOTAL:	None	3 minutes		

12. BORROWING/RETURNING OF BOOKS



The CCSFP Library provides the students with reading materials that can be borrowed then dutifully returned to the Library on its due date.

Office or Division:	Library – City College of San Fernando Pampanga - Located at the 2 nd Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga				
Classification :	Simple				
Type of Transaction:	G2C – Governme	nt to Citizen			
Who may avail:	Students				
CHECKLI REQUIRE			WHERE TO S	ECURE	
1. Book to be borro	owed/returned	Library(borro	owed)/student (ret	urned)	
2. ID		Student(Bor	rowing)		
3. Library Card		Student(born	owing)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Hand over the book and library card to the librarian	1. Check and update book card and library card/ update library card and return book card to the book	None	2 minute	Librarian III Library Assistant	
2. Write book details on the library card/wait while librarian updates library card and book card	2. Keep book card/ return library card	None	1 minute	Librarian III Library Assistant	
	TOTAL:	None	3 minutes		

13. ISSUANCE OF REFERRAL LETTER



With the number of library holdings the CCSFP currently have, students can visit other libraries of their choice for additional references which are not available in the library.

Office or Division:	Library – City College of San Fernando Pampanga - Located at the 2 nd Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga					
Classification :	Simple					
Type of Transaction:	G2C – Governmen	t to Citizen				
Who may avail:	Students					
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	SECURE		
1. Requisition	slip	Library				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Fill-out requisition form	1. Check and verify information of the student	None	2 minutes	Library Assistant (CCSF)		
2. Wait for the referral letter	2. Prepare referral letter and Letter of Appearance	None	2 minutes	Library Assistant (CCSF)		
	TOTAL:	None	4 minutes			

14. ACCEPTANCE OF BOOK DONATIONS



Other sources of reading materials for the library can come from donations either from an individual or company.

Office or	Library – City College of San Fernando Pampanga - Located at the 2 nd					
Division:	Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of San					
	Fernando, Pampanga					
Classification	Cimple					
:	Simple					
Type of	G2C – citizen to Government					
Transaction:	G2C – Citizen to Government					
Who may						
avail:						

CHECKLIST OF REQUIREMENTS			WHERE TO S	ECURE
1. Acknowled	gement receipt	Library		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Donate books to library	Prepare the acknowledgem ent receipt	None	5 minutes	Librarian III (CCSF)
2. Sign the acknowledgem ent receipt	2. Accept books and record book details to log book	None	15 minutes	Librarian III (CCSF)
	TOTAL:	None	20 minutes	

15. MEDICAL CONSULTATION



The Clinic is one of the student services mandated by CHED. It provides dental and clinical consultation of students and administration.

	1						
Office or Division:	Clinic – City College of San Fernando Pampanga - Located at the 1st Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of San Fernando, Pampanga						
Classification :	Simple						
Type of Transaction:	G2C – Governmen	G2C – Government to Citizen					
Who may avail:	Students, Faculty,	Administratio	n and Staff				
CHECKLIST OF R	EQUIREMENTS		WHERE TO	SECURE			
Registration Form/	School ID	Office of the	e Registrar				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PERSON RESPONSIBLE				
1. Describe condition to the nurse	1.For students, retrieve record	None	2 minutes	Nurse I (CCSF)			
2. Wait while assessing	2.Assess and check vital signs	None	5 minutes	Nurse I (CCSF)			
	2.1 Administer first aid, if needed	None	5-15 minutes	Nurse I (CCSF)			
	2.2 If treatment is beyond the capacity of the Clinic, ask assistance of HEMS	None	5 minutes	Nurse I (CCSF)			
	2.3 Record incident	None	2 minutes	Nurse I (CCSF)			
3. Report to clinic for follow-up	3. Interview	None	5 minutes	Nurse I (CCSF)			
	TOTAL:	None	24-34 minutes				



16. DENTAL SERVICES

The City College Dental Unit provides free dental services to all bonafide students of City College of San Fernando, Pampanga.

	00.1					
Office or Division		Clinic – City College of San Fernando Pampanga - Located at the 1st Floor, Left wing, CCSFP Bldg, Heroes Hall, Brgy. San Juan, City of				
		•	ag, neroes naii, Bi	rgy. San Juan, City of		
Classification:	San Fernando	o, Pampanga				
Type of	Simple					
Transaction:	G2C – Gover	nment to Citiz	en			
Who may avail:	City CollegeS	tudents				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE		
Registration F	orm/ School ID		Office of the Re	egistrar		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Describes his/her condition	1.1 Prepares/ retrieves record	None	5 minutes	Dental Aide (CCSF)		
	1.2 Checks Vital signs	None	5 minutes	Dental Aide (CCSF)		
2. Sees the dentist	2.1 Assess the dental history and current condition	None	10 minutes	Dentist (CCSF)		
	2.2 Schedule dental procedure	None	2 minutes	Dental Aide (CCSF)		
3. Waits for the dental procedure to be completed	Perform necessary dental procedure	None	Oral Examination: 2 minutes Oral Prophylaxis: 30 minutes Tooth extraction: 15 minutes Tooth restoration:15 minutes Post-	Dentist (CCSF)		

			operative dental extraction: 2 minutes	
	Records procedure done	None	3 minutes	Dentist (CCSF)
Secures prescription if any	Clarifies instructions to students and update record	None	2 minutes	Dentist (CCSF)
	TOTAL:	None	27 minutes (time may vary depending on the dental services availed)	



City Accountant's Office

External Services

1. PROCESSING AND ISSUANCE OF BIR FORM NO. 2306 (CERTIFICATE OF FINAL TAX WITHHELD AT SOURCE) AND BIR FORM NO. 2307 (CERTIFICATE OF CREDITABLE TAX WITHHELD AT SOURCE)



This service certifies the correctness of the information requested pertaining to Final and Creditable Tax Withheld at Source

Office or Division:		City Accountant's Office/Payroll Section/2 [™] FIr. City Hall Building			
Classification:		Simple Transaction			
Type of Transaction	:		G2C		
Who may avail:		City	Government	Creditors	
CHECKLIST REQUIR	REMENTS	WHERE TO	SECURE		
1. Tax Certificate Rec	Tax Certificate Request Slip			s Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE	
Submit Tax Certificate Request Slip	Receive request slip, record date and time of receipt in logbook	None	3 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	1.1 Verify and prepare the requested certificate (BIR Form No. 2306/2307)	None	10 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	1.2 Print Certificate	None	3 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
2. Sign in the issuance logbook	2. Release certificate to requesting client/personnel	None	2 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	TOTAL	None	18 minutes		

2. PROCESSING AND ISSUANCE OF PHIC, HDMF, GSIS AND SSS CERTIFICATION

This service certifies the correctness of the information requested pertaining to PHIC, HDMF, GSIS and SSS Contributions

Office or Divisio	n:	City Accountant's Office/Payroll Section/2 rd Flr. City			
Classification:		Hall Building			
Type of Transac	tion:	Simple Transaction G2C/G2G			
	uon.	Current		d, Retired/Resigned City	
Who may avail:		Odifolia		es, Job-Order	
CHECKLIST	REQUIREMENTS		WHERE	TO SECURE	
1. Employee Red	quest Form		City Accoun	ntant's Office or	
•	er is different from the		https://citvofs	sanfernando.gov.ph	
employee:			riceps.//cityons	amemanao.gov.pn	
*1 valid ID of th	•				
*Authorization					
*Birth Certificat					
*Marriage Cert					
	ate (if employee is				
deceased)	f. A.u /:f t				
	*Special Power of Attorney (if not immediate family member)				
ininiediate family			PROCES		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	SING TIME	PERSON RESPONSIBLE	
1. Submit Employee Request Form (Hardcopy or thru Google Forms)	Receive request slip, record date and time of receipt in logbook	None	3 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	1.1 Verify and prepare the requested certificate	None	1 day	Administrative Officer II (City Accountant's Office – Payroll Section)	
	1.2 Print Certificate	None	3 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	1.3 Approve and sign certificate by Head of Office	None	1 day	City Accountant (City Accountant's Office)	
2. Sign in the issuance logbook	2. Release certificate to requesting client/personnel	None	2 minutes	Administrative Officer II (City Accountant's Office – Payroll Section)	
	TOTAL	None	2 days, 8 minutes		



Office of the Senior Citizen Affairs

External Services

1. APPLYING FOR A NEW SENIOR CITIZEN'S CARD (ID)

The Office for Senior Citizen Affairs (OSCA) under the City Mayor's Office

ensures the issuance of the senior citizen identification card with purchase booklet slip to all persons sixty (60) years old and above.						
Office or Division:		Office of the Senior Citizen Affairs (OSCA) - Located at the 1st Flr., City Hall Building, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga				
Classification:		Simple				
Type of Transaction	on:	G2C – Government to Citizen				
Who may avail:		Senior Citizens				
CHECKLIST OF REQUIREMENTS					WHERE TO SE	CURE
1. Application Form (1 original)				OSCA		
2. Barangay Certific		(1 original)		Barangay Hall		
3. Any of the following: LCR/NSO/PSA Birth Certificate, Passport, Voter's ID, Driver's License, PRC ID and any Government Issued			LCR/ NSO/	PSA/ DFA/ COM	ELEC/ LTO/ PRC	
ID's (1 photocor	oy)				Г	
CLIENT STEPS		AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements to	requi	eceive the rements and		None	3 minutes	Administrative Aide II
avail the service	ISSUE	application	torm			(OSCA)
2. Accomplish the application form	2. subm	Review nitted docum	the ents	None	2 minutes	Administrative Aide II (OSCA)

requirements to avail the service	requirements and issue application form	None	3 minutes	Aide II (OSCA)	
2. Accomplish the application form	2. Review the submitted documents	None	2 minutes	Administrative Aide II (OSCA)	
3. Claim the Purchase Booklets	3. Release Purchase Booklets (Medicine, Grocery and Cinema) for the availing discounts	None	5 minutes	Administrative Aide II (OSCA)	
4. Give necessary information needed in the Senior Citizen ID	4. Capture data, photo and signature	None	2 minutes	Administrative Aide II (OSCA)	
5. Claim the Senior Citizen ID	5. Release Senior Citizen ID	None	1 minutes	Administrative Aide II (OSCA)	
	TOTAL:	None	13 minutes		



2. APPLYING FOR A REPLACEMENT OF LOST SENIOR CITIZEN'S CARD (ID)

The Office for Senior Citizen Affairs (OSCA) under the City Mayor's Office ensures the issuance of the senior citizen identification card. It can be used in availing basic services being provided by the City. The Office of the Senior Citizen Affairs ensures the issuance of replacement ID for lost Senior Citizen's Card.

Office or Division:	Office of the Senior Citizen Affairs (OSCA) - Located at the 1st Flr., City Hall Building, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga			
Classification:	Simple			
Type of Transaction:	G2C – Government	t to Citizen		
Who may avail:	Senior Citizen			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				CURE
Affidavit of Loss		City Legal O		
2. Any of the following: LCR/NSO/PSA Birth Certificate, Passport, Voter's ID, Driver's License, PRC ID and any Government Issued ID's (1 photocopy) LCR/NSO/PSA/DFA/COMELEC/LTO/PF			ELEC/ LTO/ PRC	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the requirements at the Office of the Senior Citizen Affairs	1. Review the submitted documents	None	3 minutes	Administrative Aide (Office of the Senior Citizen Affairs)
2. Give necessary information needed in the Senior Citizen ID	2. Capture data, photo and signature	None	2 minutes	Administrative Aide (Office of the Senior Citizen Affairs)
3. Claim the Senior Citizen ID	3. Release Senior Citizen ID	None	2 minutes	Administrative Aide (Office of the Senior Citizen Affairs)
	TOTAL:	None	7 minutes	



City Disaster Risk Reduction Management Division

External Services



1. RESPONSE FOR EMERGENCY CALL

The Operations and Warning section is responsible for the conduct of emergency rescue/medical services and other medical assistance. Under this section is the San Fernando Rescue Unit (SAFRU), which is the response arm of the CDRRMO. The SAFRU provides 24/7 emergency medical care and transportation of critical and injured patients. The SAFRU is also at the forefront in responding to emergencies/disasters brought about by natural calamities, i.e. search and rescue, evacuation and other humanitarian services.

Moreover, the Operations and Warning Section in coordination with the Administration and Training Section supervises the conduct of Fire and Earthquake Drill and assist in the conduct of Basic Disaster/Emergency Preparedness Orientations, Basic First Aid Trainings and other DRRM related activities.

Office or Division:	City Disaster Risk Reduction and Management Division (CDRRMD) Heroes Hall Compound, San Juan, CSFP			
Classification:	Technical			
Type of Transactio n:	G2C – Government to Citizen			
Who may avail:	All Citizen within the area of responsibility of the City of San Fernando, Pampanga			
	F REQUIREMENTS		WHERE TO SE	CURE
N/A		N/A		T
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Call via hotline to seek for assistance	1. Receive emergency call from radio room personnel, PNP, CPOSCO, COVID-19 City Hotline and/or concerned citizen	None	1 - 2 minutes	Radio Room Unit Personnel/ Command and Control Center/ Dispatcher on duty (SAFRU) Administrative Aide IV (Communication Equipment Operator I), LDRRMO I (CMO-CDRRMD)

2.Wait for the responders to arrive on the scene	2. Dispatch team onduty (ambulance with crew) *For COVID-related cases or confirmed case endorse to HEMS) *For Trauma case: SAFRU with regular PPE's (Face shield, Gloves, Surgical Mask and Surgical Mask and Surgical Gown) *For Medical case (non-COVID): SAFRU with full PPE's (Hazmat suit, Double Gloves, Face shield, N-95 Mask, Shan Cover	None	1-2 minutes	SAFRU/HEMS on duty LDRRMO III, LDRRMO I, Administrative Aide IV (Communication Equipment Operator I) (CDRRMD/HEMS Unit)
3.If conscious: Coordinate and follow instructions of the responder/ medical officer	Shoe Cover 3. Arrive at place of incident (Area of Responsibility - City of San Fernando)	None	5-10 minutes	SAFRU/HEMS on duty LDRRMO III,
4.Applicable for both conscious and unconscious patients, follow instructions of the responder/medical officer	4. Scene size-up. Team leader relays information to CSFP radio operator re status of the incident, need for additional assistance, and advance notification to receiving hospital (report to medical director if the need arises) a. Survey the Scene (Safety of the Scene, Number of Patient, By-Stander) b. Ask the patient or relatives if there is exposure to Covid patient or suspect In case the patient is trapped in confined	None	3-5 minutes	LDRRMO I, Administrative Aide IV (Communication Equipment Operator I) (CMO- CDRRMD/HEMS Unit)

5.Applicable for both conscious and unconscious patients, follow instructions of the responder/medical officer For unconscious patients	space, or inside the vehicle additional technical rescue will be dispatched (Rescue Tender Vehicle) 5. Execute on-scene care, i.e. airway management, rapid assessment, extrication, stabilization, first aid, treatment a. If conscious/ able to make sound judgment: hospital of choice depends upon the preference of the patient/significant other (SO) b. If unconscious/ unresponsive (no identification/ contact numbers): Team leader in coordination with the Medical Director will decide for the patient's definitive care If unconscious and (-) pulse and (-) breathing immediately perform CPR (due to COVID-19, perform with	None	Time may vary depending on the complexity of the situation	SAFRU/HEMS on duty LDRRMO III, LDRRMO I, Administrative Aide IV (Communication Equipment Operator I) (CMO- CDRRMD/HEMS Unit)
6.Applicable for both conscious and unconscious patients, follow instructions of the responder/medica I officer	HANDS ONLY CPR) 6. Care on transit (secondary assessment, vital signs monitoring, CPR, contact/communicate significant other in case patient is alone) and arrival at definitive care (time may vary depending on the hospital preference of the	None	5 - 30 minutes (time may vary depending on the hospital preference of the patient and traffic condition).	

7.Applicable for both conscious	patient and traffic condition) a. Monitor ABC, GCS and Vital signs a.1. Unstable patient- every 5 minutes a.2. Stable patient- every 15 minutes 7.Endorse to Resident on-	None	5-15 mins (time may vary	SAFRU/HEMS on duty
and unconscious patients, follow instructions of the responder/medical officer	duty/Emergency Room (ER) personnel (time may vary depending on hospital personnel availability)		depending on hospital personnel availability)	LDRRMO III, LDRRMO I, Administrative Aide IV (Communication Equipment Operator I) (CMO-
None	Report back to base (depends on the distance travelled)	None	5-15 mins	CDRRMD/HEMS Unit)
None	Draft Post Run/Response Report	None	30 mins	
	TOTAL:	None	Time may vary depending on the complexity of the situation	



2. REQUEST FOR MEDICAL ASSISTANCE/RESPONSE

The CDRRMD provides medical assistance/response to events and activities within the jurisdiction City of San Fernando, Pampanga requested through a formal letter from the requesting agency/organization and as approved by the City Administrator

Office or	City Disaster Risk Red	duction and M	lanagement Division	on (CDRRMD)
Division:	Heroes Hall Compound, San Juan, CSFP			
Classification:	Technical			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	All Citizen within the a		sibility of the City	of San
	Fernando, Pampanga		WILEDE TO SE	21105
	F REQUIREMENTS		WHERE TO SEC	JURE
and preferred date/ of event/ activity pa		Requesting	agency/organizatio	on
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit request	1. Receive	None	5 minutes	CRDDMD Chief
letter (preferably thru email)	request/letter from Records Section (with approval and instructions from Head of Office)			Admin Aide (CDRRMD)
2.Wait for the notification regarding the status of the request	2. Check for the feasibility of schedule, availability of personnel, vehicle and equipment	None	30 minutes	LDRRMO III, LDRRMO I, CDRRMD Chief (CDRRMD)
	2.1The office shall also consider if request is compliant to the prescribed infection control measures and minimum public health standards (e.g. size of event population, physical distancing) before			

	accommodating the request. Preferably, the assistance team shall be limited to on-call basis to avoid close contact and limit			
3.Wait for the notification regarding the status of the request	spread of infection. 3. Assign personnel and forward the request to concerned team leader 3.1 Notify client on the approval/ disapproval of the request	None	10 minutes	LDRRMO III, LDRRMO I, CDRRMD Chief (CDRRMD)
4.Coordinate with CDRRMD via phone/mobile call/email	4. Coordinate with the requesting agency re event details and requirements	None	5 - 10 minutes	LDRRMO III, LDRRMO I (CDRRMD)
5.Conduct activity	5. Conduct of actual activity 6.1. For face-to-face activity, personnel shall report physically at the venue 6.2 For on-call basis, team shall stationed at the CDRRM base and respond only during emergencies or as necessary	None	1 hour - 7 days maximum	LDRRMO III, LDRRMO I (CMO-CDRRMD)
None	Draft Post Activity Report	None	30 mins	LDRRMO III, LDRRMO I, CDRRMD Chief (CDRRMD)
	TOTAL:	None	7 days	



City Civil Registry Office

External Services

1. APPLYING FOR A MARRIAGE LICENSE

The City Civil Registry Office is responsible for the issuance of a Marriage License. Before getting married, each of the contracting parties must file joint sworn applications with the proper local civil registrar where either or both of the contracting parties reside.

A Marriage License will be valid in any part of the Philippines for a period of 120 days from date of issue. It will be automatically cancelled if the contracting parties have not yet been married within the given period.

Office or Division:	City Civil Registry Office (CCRO), Ground Floor, Left Gate, Jose M.		
	Valencia Bldg., City Hall		
Classification:	Highly Technical		
Type of	G2C – Government to	Citizen	
Transactio	OZO GOVORNINORIO I		
n:			
Who may avail:	Contracting parties (ma	lle and female), aged 18 and above where	
	either or both are reside	ents of San Fernando	
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE	
Personal appearance			
2.Accomplished Application	9	LCRO	
License (Municipal For	,		
3. Proof of Legal Age (2	of contracting parties - if	PSA or LCRO	
	esented, must be issued	T OA OI LONG	
	months from the time of		
application			
c. Baptismal Certificate		Church	
4.Community Tax Certificate a.k.a. Cedula (2		СТО	
photocopies)	I P ()	A 71 + 0 +	
5.2x2 picture (1 pc eac		Any Photo Center	
Any of the ffg. governmes CSFP Postal Address (
d. UMID	(2 priotocopies)	SSS or GSIS	
e. Voter's ID/Certification		Comelec	
f. Philhealth ID		Philhealth	
g. Driver's License		LTO BIR	
h. TIN ID		BIIX	
7.Certificate of No Marriage (CENOMAR) or			
Advisory on Marriages		PSA	
(2 photocopies each)	aling Cortificato	City Population Office	
8. Pre-Marriage Counseling Certificate (1 original copy)		City Population Office	
` ' '	cuments to be signed at I	CRO: If one or both of the contracting parties is	

Other Supporting Documents to be signed at LCRO: *If one or both of the contracting parties is between the ages of 18 and 25*

1. Consent of Marriage (Municipal Form No. 68), if Between ages of 18 and 21 years old - Personal appearance of father, mother, surviving parent or guardian or persons having legal charge of them (in the order mentioned)

2. Advice of Intended Marriage (Municipal Form No. 92), if between ages of 21 and 25 -Personal appearance of parents or quardian Other Supporting Documents: if one or both of the contracting parties were previously married, whichever applies: 1. Widow or Widower - Death Certificate of the deceased spouse, (2 photocopies) PSA Copy or Certified True Copy for PSA/LCRO LCR Copy 1. Annulled— annulment papers **Branch Court** (2 certified photocopies) 1.1 Certificate of Finality 1.2 Court Decision **Note:** Filipinos who were divorced abroad must seek Judicial Recognition of Foreign Judgment in a Phil. court Other Supporting Documents: for foreign applicants: (2 photocopies) 1. Certificate of Legal Capacity Diplomatic or Consular Officials in the Philippines to Contract Marriage 2. Divorce papers **Issuing Country Note:** Please bring original copies for cross checking **FEES TO BE PROCESSING PERSON CLIENT STEPS AGENCY ACTIONS PAID** TIME **RESPONSIBLE** 1. Review the None 5 minutes Assistant 1. Request for required Registration Officer Application for documents and Marriage License (CCRO) issue order of (AML) Form payment. 2. Pay the 1 set of AML 2 minutes Revenue Collection 2. Issue Official required fee at Receipt Form (PHP Clerk CTO 100.00) (CCRO) Processing Fee for Marriage License (PHP 300.00) Pre-Marriage Counseling

(PHP 50.00) ====== Total Fee PHP 450.00

3. Submit accomplished AML Form and complete requirements	3. Type and log information to CCRO-AML program, then release 3 computerized copy of AML	None	10 minutes	Assistant Registration Officer CCRO
4. Recheck and sign the AML form. Submit back to processor	4.1 Instruct the client to secure Pre-Marriage Counseling Certificate (PMC) at City Health Office and to return after 11 days to get the marriage license	None	5 minutes	Assistant Registration Officer CCRO
	4.2.Prepare Notice of Posting and comply the Ten (10) days mandatory posting period	None	10 days	Assistant Registration Officer (CCRO)
	4.3 Check and pre- approve AML 4.4 Prepare	None		Registration Officer (CCRO) Assistant Registration
	Marriage License	None	1 day	Officer (CCRO)
	4.5 Approve and Sign Marriage License	None		City Civil Registrar (CCRO)
5. Return after 11 days and submit PMC. Then, receive approved marriage license	5.Release approved Marriage License to applicants	Marriage License (PHP 2.00)	5 minutes	Assistant Registration Officer (CCRO)
Note: If the releasing date falls on a weekend or holiday, issuance of document will be on the next working day.				
	TOTAL:	PHP 452.00	11 days and 27 minutes	



2. REGISTRATION OF BIRTH, MARRIAGE AND DEATH

Republic Act No. 3753 mandates the establishment of a civil register in the Philippines where acts, events, legal instruments and court decrees concerning the civil status of persons shall be recorded. Civil registration is carried out primarily for the purpose of establishing the legal documents provided by law.

- a. Birth record or birth certificate or foundling certificate is a source of vital information and provides legal proof of the identity of an individual. It should be registered within 30 days from the time of birth.
- b. Marriage record or marriage certificate is a special contract of permanent union between man and woman entered into in accordance with conjugal and family life. For ordinary marriages, the time for submission of certificate of marriage is within 15 days following the solemnization of marriage while in marriages exempt from the license requirement, the prescribed period is 30 days.
- c. Death record or death certificate is issued for a permanent disappearance of all evidence of life at any time after live birth has taken place. It is a requisite for burial in the Philippines. Timely registration is within 30 days from the date of the event.

Office or Division:	City Civil Registry Office (CCRO), Ground Floor, Left Gate, Jose	
	M. Valencia Bldg., City Hall	
Classification:	Highly Technical	
Type of	G2C – Government to Citizen	
Transaction:	O20 - Government to onizen	
Who may avail:	For Birth and Foundling Registration:	
	1.1 Attendant-at- Birth	
	1.2 Either or both parents of child	
	1.3 Foundling Finder	
	1.4 DWSD Worker	
	1.5 Document Owner, aged 18 and above	
	2. For Marriage Registration	
	2.1 Solemnizing Officer	
	2.2 Contracting Parties 3. For Death Registration	
]	
	3.1 Attendant-at-Death	
	3.2 Nearest relative	
	3.3 Nearest person who has knowledge of the death	
	3.4 DSWD Worker	
	Note: Vital event must occur within the jurisdiction of San Fernando	
	except for events in moving vehicle or vessel or airplane that place	
	of occurrence cannot be ascertained, thus, IRR of Act No. 3753	
	under AO no. 1 series of 1993 shall be	
	applied.	

MARRIAGE
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or police authority regarding the	
report made by the finder, as the	
case maybe (1 original copy)	
3. Certification stating that the child was	Secretary of the Department of Social Welfare
legally available for adoption (4	and Development (DSWD)
certified photocopies)	, ,
4. Child Profile (4 certified photocopies)	DSWD
OTHER SUPPORTING DOCUMENTS: For re	gistration of marriage
A Affidential Degree of facilities and should be	Anna Mariana Dalata
Affidavit of Request for the celebration	Any Notary Public
of marriage in a place other than	
authorized by law – if marriage is	
solemnized in a place other than	
authorized by law. (2 original copies)	.
Affidavit of Solemnizing Officer, for	Notarized to any Notary Public
marriages exempt from the license	
requirement – included at the back of	
the Certificate of Marriage (4 original	
copies)	
3. Affidavit of Cohabitation – for marriages	Any Notary Public
under Rule 45 of Administrative Order	
No. 1 Series of 1993 (4 original copies)	
OTHER SUPPORTING DOCUMENTS: For de	elayed registration of Birth, Death and Marriage
Affidavit of Delayed Registration signed	Included at the back of the form, notarized to any
by:	Notary Public/ Civil Registrar
1.1 For birth – executed by the father,	, °
mother, or guardian, or the child himself, if	
he has the capacity to do so	
1.2 For foundling – executed by the DSWD	
1.3 For death – executed by attendant-at-	
death or in default the nearest relative of the	
deceased or by any person having legal	
charge of the deceased	
1.4 For marriage – executed by solemnizing	
officer or person reporting the marriage	
chiest of person reporting the marriage	
2. Certificate of No Record of Birth or Death	
or Marriage, as the case may be	
2.1 LCR certification (1 photocopy)	
2.2 PSA certification, for registration after	LCRO
one (1) year preceding the date of birth. (1	PSA
photocopy)	
3. Affidavit of Two (2) Disinterested Persons	
who have witnessed or have known about	Any Notary Public
the birth of the child.	
(1 original copy)	

4. Affidavit of Out-of-Town Late	Any Notary Public/Civil Registrar
Registration – for registration	
request received outside San	
Fernando,	
Pampanga (1 original copy)	
OTHER SUPPORTING DOCUMENTS: F	or delayed registration of Birth
1. Any two (2) applicable	
documentary evidences which reflect	
the name of the child, date and place of	
birth and names of the parents: (1	
photocopy)	
1.1 Baptismal Certificate	Churches
1.2 School Records	Schools BIR
1.3 Income Tax Return of	Insurance Company
parent/s	PSA / LCR COMELEC
1.4 Insurance Policy	Hospitals/Clinics/Birthing Stations
1.5 Marriage Certificates	
1.6 Voter's Record/Registration	Barangay Hall
1.7 Medical Records	
1.8 Others, such as: (1 original copy)	Any Notary Public
1.8.1 Barangay Captain's	
Certification	
1.8.2 Affidavit of Explanation	
OTHER SUPPORTING DOCUMENTS: F	or delayed registration of Death
1. Any two (2) applicable documentary	
evidences which reflect name, date and	
place of death of deceased person:	
1.1 Authenticated copy of the certificate	O a mare A a dissiplication de anti-
of burial, cremation, or any other means	Cemetery Administrator's Office
of corpse disposal	
1.2 Medical Records, if hospital/clinic	
death (1 photocopy)	Hamital/Oliaia
1.3 Certification from embalmer, if	Hospital/Clinic
applicable (1 photocopy)	Funeral Parler
1.4 2 original photos of gravestone with	Funeral Parlor
inscription placed on a clean sheet of	Photo Center
paper	FIIOIO Center
1.5 Others such as: (1 original copy)	
1.5.1 Barangay Captain's Certification	
1.5.2 Affidavit of Explanation with circumstances why the death was not	Barangay Hall Any
	Notary Public
registered within thirty (30) days after death	
dealii	
OTHER SUPPORTING DOCUMENTS: F	or delayed registration of Marriage
1. Any two (2) applicable documentary	
evidences which reflect date and place	
of marriage of contracting parties:	

1.1 Copy of the application for marriage	Issuing LCR
license bearing the date when the marriage	
license was issued, whenever applicable. (1	
certified copy)	
1.2 Old copy of marriage certificate (1	Document Owner
photocopy)	
1.3 Certification from Church (1 photocopy)	Church
1.4 Birth certificate of offspring (1	
photocopy)	LCR/PSA/Document Owner
1.5 Old wedding photos with date inscription	
(1 photocopy)	Document Owner
1.6 Others such as Affidavit of Explanation	
with circumstances why the marriage was	Any Notary Public
not registered within fifteen (15) days	
after the wedding.	

Note: Please bring original copy of the photocopied documents for cross checking

CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
1.5	ACTIONS	BE PAID	TIME	RESPONSIBLE
Request for set of forms	1. Issue order of payment. Then release set of forms after payment	None	2 minutes	Assistant Registration Officer (CCRO)
2. Pay the required fee at the City Treasurer's Office	2. Issue Official Receipt	1 set of Forms (PHP 100.00)	2 minutes	Revenue Collection Clerk III (CCRO)
3.1 Submit the accomplished Municipal Forms for registration (Birth, Death or Marriage) with supporting documents, if applicable, 3.2 Fill up the feedback form then drop at the Suggestion box (recommended) 3.3 Wait for the evaluation and approval of the documents.	3.1 Receive the accomplished Municipal Forms for registration (Birth, Foundling, Death or Marriage) and check the requirements 3.2 Issue a feedback form/claim stub to registrant. If for delayed registration, instruct client to return after 11 days to get the copy 3.2.1 Pre	None	4 minutes 10 days	Assistant Registration Officer (CCRO)

	pare the Notice of Posting for Delayed Registration 3.4 Evaluate, Record and Assign Registry Number	None	10 minutes	Registration Officer (CCRO)
	3.5 Approve and sign the certificates	None	3 minutes	Registration Officer / City Civil Registrar (CCRO)
Receive the certificate For delayed registration only: 4.2 Return after 11 days and present claim stub/feedback form. 4.3 Fill up the feedback form then drop at the Suggestion Box (recommended) Note: Client may skip steps 1 and 2 if set of forms are already	4. Release copy to the registrant and feedback form, if applicable	None	3 minutes	Assistant Registration Officer (CCRO)
available.	TOTAL:	PHP 100.00	11 days and 24 minutes	

LIST OF VALID IDS/IDENTITY DOCUMENTS

- Philippine Passport issued by the (DFA)
- Driver's License issued by the (LTO)
- 3. PRC ID
- 4. IBP ID
- GSIS Unified Multi-Purpose ID/eCard
- 6. SSS Unified Multi-Purpose ID
- PAG-IBIG Transaction/Loyalty Card
- 8. Voter's ID issued by COMELEC
- 9. Postal ID (PhilPost)
- 10. Senior Citizen's ID card issued by (OSCA) and/or (LGUs).
- 11. OFW ID issued by the DOLE.
- 12. OWWA ID.
- 13. Seaman's/Seawoman's Book issued by MARINA.
- 14. Diplomat/Consular ID issued by the Philippine Embassy
- 15. NBI Clearance
- 16. PNP ID/Police Clearance
- 17. DSWD Certification/4Ps ID
- 18. Barangay ID/Certification with picture and signature
- 19. PWD ID issued by NCDA or its regional counterpart, Office of the Mayor, Office of the Barangay Captain, DSWD office, and other participating organization with Memorandum of Agreement with the DOH.
- PhilSys ID issued by the Philippine Statistical Authority

- 21. IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including GOCCs
- IDs issued by the Offices of the Local Chief Executives (Governor, Vice-Governor, Mayor, and vice-Mayor)
- TIN with picture and signature issued by the Bureau of Internal Revenue.
- 24. School/Student ID for currentlyenrolled students, 18 years old and above, issued by reputable schools/colleges/universities recognized by the DepEd or CHED signed by the principal or head of the academic institution.
- 25. Company IDs issued by private entities or institutions registered with, supervised, or regulated by the BSP, SEC, or Insurance Commission (IC).
- 26. For foreign nationals, a passport issued by foreign governments AND any of the following
 - Alien Certification of Registration (ACR i-card)
 - b. Immigrant Certificate of Registattion
 - c. Special Resident Retiree
 Visa issued by the Bureau
 of Immigration through the
 Philippine Retirement
 Authority

LIST OF VALID IDS/IDENTITY DOCUMENTS

- Philippine Passport issued by the (DFA)
- Driver's License issued by the (LTO)
- 3. PRCID
- 4. IBP ID
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- SSS Unified Multi-Purpose ID
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- 9. Postal ID (PhilPost)
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3. REQUESTING CERTIFIED COPY OF BIRTH, DEATH, MARRIAGE AND OTHER CIVIL REGISTRY DOCUMENTS

Civil registry documents such as birth, death and marriage certificates may be availed of by securing a certified transcript or photocopy from the City Civil Registry Office. Any person/individual concerned or his/her duly authorized person can secure a copy of registered civil registry documents.

Valencia Bldg., City Hall Classification: Simple Type of Transaction: C2C – Government to Citizen	Office or Division:	City Civil Pogistry Office (CCPO) Cround Floor Loft Coto Loco M
Classification: Type of Transaction: Who may avail: As per Philippine Statistics Authority (PSA) Memorandum Circular No. 2019-15A – Amendment to Memorandum Circular No. 2019 – 15 dated June 11, 2019, regarding the Guidelines on the Issuance of the Civil Registry Documents/ Certifications including Authentication (Republic Act No. 10173 -Data Privacy Act of 2012) 1. Document owner or any person authorized by him, must be of legal age and mentally capacitated 2. Spouse, whose name is indicated in his/her marriage document with his/her partner 3. Parents of the document owner provided their name is indicated in the latter's birth document, either as a father or mother 4. Descendant of the document owner provided that he/she has sufficient documentation to support this case 5. A guardian appointed by the court or the person exercising substitute parental authority pursuant to Art. 216 of the Family Code of the Philippines 6. Institutions legally in charge of a minor 7. Court or proper public official 8. Government agencies that executed Data Sharing Agreement with PSA 9. Nearest kin of a deceased person	Office of Division:	City Civil Registry Office (CCRO), Ground Floor, Left Gate, Jose M.
Type of Transaction: G2C – Government to Citizen As per Philippine Statistics Authority (PSA) Memorandum Circular No. 2019-15A – Amendment to Memorandum Circular No. 2019-15 dated June 11, 2019, regarding the Guidelines on the Issuance of the Civil Registry Documents/ Certifications including Authentication (Republic Act No. 10173 -Data Privacy Act of 2012) 1. Document owner or any person authorized by him, must be of legal age and mentally capacitated 2. Spouse, whose name is indicated in his/her marriage document with his/her partner 3. Parents of the document owner provided their name is indicated in the latter's birth document, either as a father or mother 4. Descendant of the document owner provided that he/she has sufficient documentation to support this case 5. A guardian appointed by the court or the person exercising substitute parental authority pursuant to Art. 216 of the Family Code of the Philippines 6. Institutions legally in charge of a minor 7. Court or proper public official 8. Government agencies that executed Data Sharing Agreement with PSA 9. Nearest kin of a deceased person		
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CHECKLIST OF REQUIREMENTS WHERE TO SECURE	Who may avail:	 2019-15A – Amendment to Memorandum Circular No. 2019 – 15 dated June 11, 2019, regarding the Guidelines on the Issuance of the Civil Registry Documents/ Certifications including Authentication (Republic Act No. 10173 -Data Privacy Act of 2012) 1. Document owner or any person authorized by him, must be of legal age and mentally capacitated 2. Spouse, whose name is indicated in his/her marriage document with his/her partner 3. Parents of the document owner provided their name is indicated in the latter's birth document, either as a father or mother 4. Descendant of the document owner provided that he/she has sufficient documentation to support this case 5. A guardian appointed by the court or the person exercising substitute parental authority pursuant to Art. 216 of the Family Code of the Philippines 6. Institutions legally in charge of a minor 7. Court or proper public official 8. Government agencies that executed Data Sharing Agreement with PSA 9. Nearest kin of a deceased person
	CHECKLIST OF	REQUIREMENTS WHERE TO SECURE

Guidelines on the Issuance of Civil Registry Document (CRDs) (FM-CCRO-RMD-07; Revision No. 01; April 3, 2023)

- I. General Requirements:
- a. Completed Request form
- **b.** Requester's valid ID original and /or photocopy (please refer at the back for the list of valid IDs)
- c. Proof of filiation, if the requester is not the informant, whenever applicable (i.e. marriage certificate, birth certificate, baptismal etc.)

II. Authorized Persons to request:

Category 1: DO is living and of legal age	Category 2: DO is minor or incapacitated	Category 3: DO is deceased and of legal age
 Document Owner Legal Spouse Parent (birth only) Direct descendant (birth only) 	> Parent	 Legal spouse Marital Child or Acknowledged Non- Marital Child
	In default of parent: ➤ Judicially appointed guardian/institution legally in-charge ➤ Persons exercising substitute parental authority with notarized Affidavit of Guardianship, if DO is living or Affidavit of Kinship, if DO is deceased (in order of preference): (a)surviving grandparent, (b)capacitated brother or sister (over 21 years old), (c)actual custodian	In default of the above, the closest living relative (in order of preference) with notarized Affidavit of Kinship: Parent or ascendants Brother or sister Collateral relatives up to 5th degree of consanguinity
	If a non-marital unacknowledged, only the mother can request	

Category 4: Authorized Representative	(
with Authorization letter from DO and copy	
of his/her valid ID	

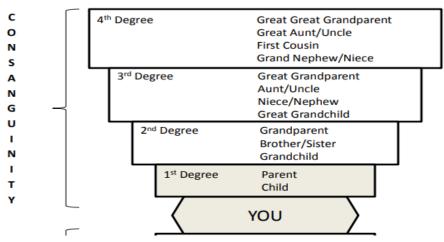
Category 5: Authorized Representative with Special Power of Attorney from legal guardian or lawful heir and copy of his/her valid ID

Note: Authorization letters or SPAs must satisfy the following requirements:

- State that the purpose is to SECURE civil registry documents (birth, death or marriage)
- Name and signature giving the authority must appear in the authorization letter or SPA
- Emailing or instant messaging of the authorization letter/ notarized SPA is permitted provided that the scanned copy has a matching signature with the Valid ID presented.

Legend: DO - Document Owner

IMMEDIATE FAMILY MEMBERS



LIST OF VALID IDS/IDENTITY DOCUMENTS

- Philippine Passport issued by the (DFA)
- Driver's License issued by the (LTO)
- 3. PRC ID
- 4. IBP ID
- GSIS Unified Multi-Purpose ID/eCard
- 6. SSS Unified Multi-Purpose ID
- 7. PAG-IBIG Transaction/Loyalty Card
- 8. Voter's ID issued by COMELEC
- 9. Postal ID (PhilPost)
- Senior Citizen's ID card issued by (OSCA) and/or (LGUs).
- 11. OFW ID issued by the DOLE.
- 12. OWWA ID.
- Seaman's/Seawoman's Book issued by MARINA.
- 14. Diplomat/Consular ID issued by the Philippine Embassy
- 15. NBI Clearance
- 16. PNP ID/Police Clearance
- 17. DSWD Certification/4Ps ID
- 18. Barangay ID/Certification with picture and signature
- 19. PWD ID issued by NCDA or its regional counterpart, Office of the Mayor, Office of the Barangay Captain, DSWD office, and other participating organization with Memorandum of Agreement with the DOH.
- 20. PhilSys ID issued by the Philippine Statistical Authority

- 21. IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including GOCCs
- 22. IDs issued by the Offices of the Local Chief Executives (Governor, Vice-Governor, Mayor, and vice-Mayor)
- TIN with picture and signature issued by the Bureau of Internal Revenue.
- 24. School/Student ID for currentlyenrolled students, 18 years old and above, issued by reputable schools/colleges/universities recognized by the DepEd or CHED signed by the principal or head of the academic institution.
- 25. Company IDs issued by private entities or institutions registered with, supervised, or regulated by the BSP, SEC, or Insurance Commission (IC).
- 26. For foreign nationals, a passport issued by foreign governments AND any of the following
 - Alien Certification of Registration (ACR i-card)
 - b. Immigrant Certificate of Registatti0n
 - c. Special Resident Retiree
 Visa issued by the Bureau
 of Immigration through the
 Philippine Retirement
 Authority

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Fill-up request form for civil registry documents	1.1 Receive and review request slip. 1.2 Issue an Order of Payment	None	3 minutes	Assistant Registration Office (CCRO)
2. Pay at the City Treasurer's Office	Issue Official Receipts	Certified True/Photoc opy and Transcription Copy of Registered Birth, Death and Marriage (PHP 50.00)	2 minutes	Revenue Collection Clerk II (CCRO)
3. Wait for the verification, preparation and approval of requested record	Verify and prepare the availability of requested certificate (electronic/	None		Assistant Registration Officer (CCRO)
	manual) 2 Approve and Sign/ prepared certificates	None	15 minutes 3 minutes	Registration Officer / City Civil Registrar (CCRO)
4. Receive the certificate	4. Release the requested certificates	None	2 minutes	Assistant Registration Officer (CCRO)
	TOTAL:	PHP 50.00	25 minutes	



4. REGISTRATION OF LEGAL INSTRUMENTS AND COURT ORDERS / DECREES / R.A. 9255

The City Civil Registry Office is also mandated to accept all registrable documents and judicial decrees / orders affecting the civil status of persons; and process the same in accordance to existing laws, rules and regulations provided for the purpose.

Office or Division:	City Civil Registry Office (CCRO), Ground Floor, Left Gate, Jose		
	M. Valencia Bldg., City Hall		
Classification:	<u> </u>		
	Highly Technical		
Type of	G2C – Government to Citizen		
Transaction:			
Who may avail:	For registration of R.A. 9255 and/or legitimation		
	1.1 Father and/or mother of child		
	1.2 A guardian appointed by court or the person		
	exercising substitute parental authority pursuant to		
	Art. 216 of the Family Code of the Philippines		
	1.3 Document owner, of legal age and mentally capacitated		
	2. For registration of Supplemental Report, Wrongly		
	registered, MC 2010-4 and court decree/order		
	2.1 Document owner, of legal age and mentally capacitated		
	2.2 Spouse, whose name is indicated in his/her		
	marriage document with his/her partner		
	2.3 Parents of the document owner provided their name		
	is indicated in the latter's birth document, either as a father or mother		
	2.4 Descendant of the document owner provided that		
	he/she has sufficient documentation to support this		
	case		
	2.5 A guardian appointed by court or the person		
	exercising substitute parental authority pursuant to		
	Art. 216 of the Family Code of the Philippines		
	2.6 Sibling of the document owner		
	2.7 Authorization or SPA, whichever is applicable, if		
	registrant is a representative. (For court order		
	registration only)		
CHECKLIST OF REQ			
Other supporting documents: If the registrant is a duly authorized representative. (For			
The supporting documents. If the registrations a duty authorized representative. (For			

[410]

court order registration only)

Original copy of the Authorization Letter/Special Power of Attorney (SPA) bearing fresh signature of the document owner: It shall specifically state that its purpose is to secure civil registry documents from LCRO. General statement as to the purpose is not acceptable. If it is multi-purpose, the intent to secure certificate from LCRO should be specifically indicated.	Document owner or any notary public or Phil. Consular Offices in abroad, whichever is applicable		
1.2 It should also indicate the type of document to be requested, the number of copies and specific details of the document to be requested.2. For special cases, captured/scanned image of the actual authorization letter/SPA from the			
document owner with signature that matches the accompanying valid ID is acceptable. If received from abroad, the document owner should provide copy of the passport as the valid ID. (1 printed copy)	Document Owner		
Legal Instruments:			
1. RA 9255:1.1 Registered Birth certificate of child (4 photocopies)	PSA or LCRO		
1.2 Admission of Paternity for birth not yet registered or previously registered under the surname of the mother but no admission of Paternity at the back of the Certificate of Live Birth thru: 1.2.1 Affidavit of Admission/Acknowledgement of Paternity (3 original copies and 1 photocopy of the registered legal instrument) 1.2.2 Any private handwritten instruments	Any Notary Public/Civil Registrar		
like, but not limited to: (4 photocopies) 1.2.2.1 Signature appearing			
on school's report card			
1.2.2.2 Declaration as	School		
dependent on BIR, Philhealth, SSS, HDMF, GSIS MDR	BIR, Philhealth, SSS, HDMF, GSIS		
1.2.2.3 Declaration as beneficiary/ dependent on Insurance Policy 1.3 Affidavit to Use the Surname of the Father for birth not yet registered under the surname of the mother	Insurance Company		
registered under the surname of the mother but with admission of Paternity at the back of the Certificate of Live Birth. (3 original copies and 1 photocopy of	Any Notary Public/Civil Registrar		

the venintered legal in structure and	T
the registered legal instrument)	
Note : Affidavit/s can also be executed before the Philippines Consul General of the foreign country where the affiant is based.	
2. Legitimation:2.1. Registered Birth Certificate of child (4 photocopies)	PSA or LCRO
2.2 Marriage Certificate (4 photocopies)	PSA or LCRO - must be certified copy
2.3 Certificate of No Marriage (CENOMAR) or Advisory on Marriages of parents (4 photocopies)	PSA
2.4 Joint Affidavit of Legitimation. If one or both parent/s is/are below 18 years old at the time of child's conception, minority should be stated otherwise. (3 original copies and 1 photocopy of the registered legal instrument)	Any Notary Public/Civil Registrar
2.5 Admission of Paternity for birth not yet registered or previously registered under the surname of the mother but no admission of Paternity at the back of the Certificate of Live Birth thru: 2.5.1 Affidavit of Admission/Acknowledgement of Paternity (3 original copies and 1 photocopy of the	Any Notary Public/Civil Registrar
registered legal instrument) 2.5.2 Private handwritten instrument like, but not limited to: (4 photocopies) 2.5.2.1 Signature appearing on school's report card (Form 138) 2.5.2.2 Declaration as dependent on BIR,	School
Philhealth, SSS, HDMF, GSIS MDR 2.5.2.3 Declaration as	BIR, Philhealth, SSS, HDMF, GSIS
beneficiary/dependent on Insurance Policy	Insurance Company
2.6 In case of deceased parent/s, death certificate is needed (4 photocopies)	PSA or LCRO – must be certified true copy
2.7 Any valid ID / Cedula (1 original copy)	
Note : If one or both parents are in a foreign country, affidavit should be executed before the Philippine Consul General of the foreign country and have it registered at the LCRO of Manila City Hall	CTO-Cedula/ List of Valid IDs can be found at the end page of charter

Supplemental: 3.1 Birth / Marriage / Death Certificate (1 original copy)		PSA or LCRO		
3.3 Affidavit Supplemental Report (3 original copies and 1 photocopy of the registered document)		Any Notary Public		
4. Wrongly Registered (MC 91-6) 4.1 Birth / Marriage / Death Certificate (1 original copy and 4 photocopies)		PSA or LCRO		
4.2 Certificate of 1 LCR (1 original cop	Fransfer from Other y and 4 photocopies)	Any Notary Public		
5. MC 2010-4	,			
5.1 Birth / Marriage / Death Certificate (4 photocopies)		PSA or LCRO		
5.2 Affidavit of Discrepancy or Affidavit of Explanation (3 original copies and 1 photocopy of the registered document)		Any Notary Public		
Court Order/Court Decree:				
 Four (4) sets of Certified True Copy of Court Order/Decree and Certificate of Finality For Adoption cases only: 		Branch Court		
2.1 certificate of foundling, if child is a		DSWD		
foundling (1 certified copy) 2.2 Certification of a Child Legally Available		0500		
for Adoption (1 certified copy)		DSWD		
	· · · · · · · · · · · · · · · · · · ·			
Certification, if adopting parents are foreigners or Filipino citizens permanently residing abroad (1 certified copy)		DSWD		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit requirements for Legal Instruments / Court Orders /Decrees	Review requirements and Issue Order of Payment	None	8 minutes	Assistant Registration Officer (CCRO)
For Court Order/Decree only: Return after 5 working days and present claim stub.	For Court Order/Decree only: Issue a claim stub and inform the client to return after 5 working		5 days	Assistant Registration Officer / City Civil Registrar

	days after the verification of court decision			(CCRO)
2. Pay at the City Treasurer 's Office	2. Issue Official Receipt	Legal Instrum ent (PHP 200.00) Court Order / Decree s (PHP 500.00)	2 minutes	Revenue Collection Clerk III (CCRO)
3. Wait for the preparation and approval of the documents	Log / Assign Registry Number to Legal Instruments, Court Orders / Decrees / RA 9255) and	None		Assistant Registration Officer (CCRO)
	Prepare certifications	None	20 minutes	Assistant Registration Officer (CCRO)
	Check and Pre- approve Legal Instruments, Court Orders/Decrees / RA 9255	None	5 minutes	Registration Officer (CCRO)
	Approve and Sign the documents	None	5 minutes	Registration Officer / City Civil Registrar (CCRO)
4. Receive the documents	Release registered documents	None	2 minutes	Assistant Registration Officer (CCRO)
		Legal Instrum ent (PHP 200.00)		
	TOTAL:	Court Order / Decree s (PHP 500.00)	5 days and 42 minutes	

LIST OF VALID IDS/IDENTITY DOCUMENTS

- Philippine Passport issued by the (DFA)
- Driver's License issued by the (LTO)
- 3. PRCID
- 4. IBP ID
- GSIS Unified Multi-Purpose ID/eCard
- 6. SSS Unified Multi-Purpose ID
- PAG-IBIG Transaction/Loyalty Card
- 8. Voter's ID issued by COMELEC
- Postal ID (PhilPost)
- Senior Citizen's ID card issued by (OSCA) and/or (LGUs).
- 11. OFW ID issued by the DOLE.
- 12. OWWA ID.
- Seaman's/Seawoman's Book issued by MARINA.
- Diplomat/Consular ID issued by the Philippine Embassy
- 15. NBI Clearance
- 16. PNP ID/Police Clearance
- DSWD Certification/4Ps ID
- Barangay ID/Certification with picture and signature
- 19. PWD ID issued by NCDA or its regional counterpart, Office of the Mayor, Office of the Barangay Captain, DSWD office, and other participating organization with Memorandum of Agreement with the DOH.
- PhilSys ID issued by the Philippine Statistical Authority

- 21. IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including GOCCs
- IDs issued by the Offices of the Local Chief Executives (Governor, Vice-Governor, Mayor, and vice-Mayor)
- 23. TIN with picture and signature issued by the Bureau of Internal Revenue.
- 24. School/Student ID for currentlyenrolled students, 18 years old and above, issued by reputable schools/colleges/universities recognized by the DepEd or CHED signed by the principal or head of the academic institution.
- 25. Company IDs issued by private entities or institutions registered with, supervised, or regulated by the BSP, SEC, or Insurance Commission (IC).
- 26. For foreign nationals, a passport issued by foreign governments AND any of the following
 - Alien Certification of Registration (ACR i-card)
 - b. Immigrant Certificate of Registatti0n
 - Special Resident Retiree
 Visa issued by the Bureau
 of Immigration through the
 Philippine Retirement
 Authority

5. PETITION FOR CORRECTION OF CLERICAL ERROR / CHANGE OF FIRST NAME / CHANGE OF SEX AND CORRECTION OF DAY AND MONTH OF BIRTH (R.A. 9048 and R.A. 10172)



- a.1 Republic Act 9048, authorizes all City or Municipal Civil Registrars or the Consul General to correct clerical or typographical error in an entry and/or change the first name or nickname in the civil register without need of a judicial order.
- a.2 Republic Act 10172, further authorizes all City of Municipal Civil Registrars or Consul Generals to correct clerical or typographical errors in the day and month in the date of birth or sex of a person appearing in civil register without need of a judicial order.

Office or Division:	City Civil Registry Office (CCRO), Ground Floor, Left Gate, Jose M. Valencia Bldg., City Hall			
Classification:	Highly Technical	,		
Type of	G2C – Governme	nt to Citizen		
Transaction:	G2G – Governme	nt to Government		
Who may avail: Petitioner, of legal age and have direct and personal interes the documents Owner of the record Owner of the record's spouse, children, parents, siblings, grandparents or guardian, whichever is applicable Any other person duly authorized by law or by the owner of record				
CHECKLIST OF REQUIP	REMENTS	WHERE TO SECURE		
2. Identification (ID) card 3. At least Two (2) public where correction or ch 3.1 Error is in the Fir 3.1.1 Birth, Death, Marriag whichever is applicate reference 3.1.2 Baptismal or Dedicate Confirmation Certificate 3.1.3 School Record 3.1.4 Identification (ID) Card Certifications 3.1.5 Affidavit of Discrepant	r Death Certificate, whichever is the error document – PSA card/certifications of Petitioner ublic or private documents showing the correct entry/entries or change shall be based. First Name of the document owner: riage Certificate, icable as Church School See complete list at the end of charter page ificates Any notary public Cards/ pancy			
3.2 Other supporting documents : if error is in the Middle and/or Last Names, or error is in the parent's information.				
3.2.1 Birth certificate of moth (whichever is applicable to the living or death certificate, if death cartificate, if death certificate, if death certificates of father and/or results.) Certificates of father and/or results.	ne petition), if still eceased n or Confirmation mother	PSA or LCR Church School		

	and/or mother	
3.2.4	Marriage	PSA or LCR
	Certificate of	
	parents, if married	See complete list at the end of charter page
3.2.5	Identification (ID)	
	Cards/ Certifications	
	of father and/or	PSA or LCR
	mother	
3.2.6	Birth Certificate of	Any notary public
	other child	,, , ,
3.2.7	Affidavit of Discrepancy	
		s: if error is in the birth order of child or total number
of	5	
child	ren born alive or number o	of children still living including this birth or
	ber of children born alive l	9
	Medical Certification	Physician or Hospital
	All birth certificate of	PSA or LCR
3.3.2	other child/children	1 O/COI LOIC
	before the erroneous	
	birth document	Any Notary Public
222	Affidavit of discrepancy	Arry Notary Fublic
		s: if error is in the type of birth, i.e. from single to twin
	er supporting document	s. If error is in the type of birth, i.e. from single to twill
Or triple	a ar athar multiple hirths	
	s or other multiple births	Church
3.4.1	Both or All Baptismal	Church
	or Dedication or	
	Confirmation	
0.40	Certificates	School
3.4.2	Both or All School	PSA or LCR
	Record	See complete list at the end of charter page
3.4.3	Both or All	School
	Marriage	Any notary public
	Certificate, if	
	married	
3.4.4	Both or All	
	Identification (ID)	
	Cards/ Certifications	
3.4.5	Both or All	
	School	
	Records	
3.4.6	Affidavit of Discrepancy	
	· · · · ·	s : if error is in the parents date and/or place of
marriage	9,	
provi	ded that the legitimacy sta	atus of the child will not be affected. Otherwise,
judici	ial order is necessary.	
3.5.1	Parent's	PSA or LCR
	marriage	

	certificate	PSA or LCR
3.5.2	Birth Certificate of	Any notary public
	Siblings	
3.5.3	Affidavit of Discrepancy	
		s: if error is in the relationship of informant to the child
or	3	, , , , , , , , , , , , , , , , , , ,
	ased person, provided the	at there was no misrepresentation at the
		judicial order is necessary.
	nt should be a	
mother or father of		
	rtificate of mother or	PSA or LCR
father or spouse		Church
	al certificate of child	
· •	e certificate, if	SA or LCR
applicable	s continuate, ii	
3.6.1.4 Affidavit	of	Any notary public
Discrepancy	Oi	
	r cupporting document	s: if error is for age and/or date of birth and/or place
of	r supporting document	is: If error is for age and/or date of birth and/or place
	provided that the arrar in	the marriage certificate will not rander one or both of
		the marriage certificate will not render one or both of
		at the time of marriage. Otherwise, judicial order is
	ssary.	DOA I OD
3.7.1	Birth or marriage or	PSA or LCR
	death certificate of	
	husband and/or	
	wife or deceased	
	person, whichever	
	is applicable	
3.7.2	•	Church
	Dedication or	
	Confirmation	
	Certificates	
3.7.3	School Record	School
3.7.4	` ,	See complete list at the end of charter page
	Cards/ Certifications	
3.7.5	Affidavit of	
	Discrepancy	
		Any notary public
3 8 0+1	er sunnorting docume	nts for: Change of First Name, Sex and Birth month
	l/or date	11.0 101. Ondrigo of Fliot Namo, Oox and Ditti Month
3.8.1	Valid NBI and	NBI / PNP
3.0.1	PNP Clearance	
200		Employer / Notory Bublic
3.8.2	Certificate of	Employer / Notary Public
	Employment, or	
	Affidavit of Non-	
	Employment, if	Nowananar publishar
	unemployed	Newspaper publisher
3.8.3	Affidavit of Publication	Newspaper publisher

ne	py of wspaper opings			
3.9 Other s only:	supporting docume	nts for: Change of B	Birth month and	or date and Sex
	rliest School record	School		
	ptismal	Church		
	edical Record with	Hospital, Clinic, Lab	oratory	
	te of birth		, , , , , ,	
3.10 Other s	upporting documer	nt for: Change of Se	x only:	
	edical Certificate	Government Hospit	als, Governme	nt Clinics
	m a government			
•	ysician			
	original copies)			
3.11 Other supporting documents: If the registrant is a duly authorized				
representative except for change of sex				
3.11.1 Sp	ecial Power of	Document owner o	r any notary pu	blic or
	orney (SPA) bearing	Phil. Consular Offices in abroad, whichever is		
	sh signature of the	applicable		
	cument owner			
Note: All requirement				DEDOON
CLIENT STEPS	AGENCY	FEES TO BE	PROCESSI	PERSON
	ACTIONS	PAID	NG TIME	RESPONSI BLE
1. Submit	Review and Issue	None	5 minutes	Administrative
requirements	Order of Payment	None	5 minutes	Assistant II
for RA 9048	Order or r ayment			(CCRO)
and/or RA				(001(0)
10172				
10112				
	Finality and			
	Certified Copy of			
	decided petition			
	pursuant to RA			
	9048 / RA 10172			
2. Pay at the City	Issue Official	RA 9048	2 minutes	Revenue
Treasurer's	Receipt	Fees: Correction of		Collection
l leasulei s	Lizeceibr			
Office	Receipt	Clerical Error (PHP		Clerk III
	Keceipt			Clerk III (CCRO)
	Neceipt	Clerical Error (PHP 1,000.00)		
	Neceipt	Clerical Error (PHP		
	Neceipt	Clerical Error (PHP 1,000.00) Change of First		

3. Recheck and sign the petition. Submit back to processor.	Type petition for RA 9048 and/or RA 10172. Release triplicate copy of petitions for client's signature. Instruct the client to	RA 10172 Fees: Correction of Day and Month of Birth and Change of Gender ,(PHP 3,000.00) None	5 minutes	Administrative Assistant II (CCRO)
Disclaimer: Return time is only an estimate based on historical data. Approval is dependent on the processing time of PSA-Legal Services Division	return after 3 or 4 months for the rendered decision of the Civil Registrar General and issue 1 copy of signed petition	None		
	Log and Assign petition number for RA 9048 /RA 10172	None	5 minutes	Administrative Assistant II (CCRO)
	Prepare Notice of Posting, Certificate of Posting and Record sheet	None	10 days and 12 minutes	
	Check and Pre- approve filed petitions	None	5 minutes	Registration Officer (CCRO)
	Approve and Sign the documents	None	3 minutes	City Civil Registrar (CCRO)
	Prepare annotated certificate, Certificate of	None	20 minutes	Administrative Assistant II (CCRO)



City Budget Office

Internal Services

1. PROCESSING OF OBLIGATION REQUESTS (OBR)/ CERTIFICATION ON APPROPRIATION, FUNDS AND OBLIGATION OF ALLOTMENT (CAFOA)

The City Budget Office ensures that all obligation requests/certification on appropriation, funds and obligation of allotment are properly processed and within the limits of the provided budget per office. This covers the receiving of obligation requests/certification on appropriation, funds and obligation of allotment from the end-user or General Services Office personnel up to the issuance of Certification of Availability of Appropriation or the certified OBR/CAFOA.

Office or Division:	Administrative and Budgeting Division - Located at the 2nd Flr., City Hall Building, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga				
Classification:	Simple				
Type of Transaction:	G2G – Governmer	nt to Government			
Who may avail:	Offices/Departmer	nts of City Government of San Fernando,			
	Pampanga				
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE			
1. Five (5) copies of OBR/CA	FOA	Provided by requesting office			
2. Three (3) copies of Purcha	se Requests	Provided by requesting office			
Copy of the Approved Annual Investment Program with reference number		Provided by requesting office			
4. Copy of Project Proposal		Provided by requesting office			
 5. Other documents as may necessary: a. Invitation Letter, approorders, and Itinerary of meetings, trainings, se conferences b. Request Letters appro Authorized Officers to transaction for financia c. Intake Sheets of Assis Individuals in Crisis Sit d. Application Form for S Assistance (SEA) e. Payroll for cash prizes hazard pay, subsistence etc. 	ved Travel f Travel for minars and ved by the proceed with the al assistance tance to cuation (AICS) epl-Employed , honoraria,	Provided by requesting office			

- f. Program of Works for infrastructure projects: Barangay Resolutions & Letter from CPDCO for Aid to Barangay Projects
- g. Designation as Official Signatory for temporary/new appointment
- h. other documentary requirements to validate transaction

validate	e transaction			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Receiving Receives and verifies documents presented	None	Within one (1) day	Budgeting Assistant (CBO)
None	1.2. Assigns OBR/CAFOA Number 1.3. Write on the OBR/ CAFOA Slip the following for the charging of transaction: Office, Account, Balance, Date of OBR/ CAFOA, Date and Time of Receipt, Originating Office and Check on the attachments.			
None	2. Posting of transactions the control sheets 2.1. Check allotment balance A. If there is an available allotment post transaction in the control sheets; B. If the transaction is overdraft, forward to initial review 2.2. If there is an ABC, assigns ABC Number 2.3. Encode details in the ABC Monitoring Sheet 2.4 Arrange OBR/CAFOA in series	None	Within one (1) day	Budget Officer I (CBO)

	3. Filling up of OBR/CAFOA and Printing of Transmittal 3.1. Write the assigned OBR/CAFOA number, stamp date. 3.2. Insert carbon paper to duplicate signature 3.3. Encode the transactions by batch to the transmittal sheet 3.4. Print the transmittal sheet 3.5. Arrange the OBR/CAFOA in series and forward for initial review	None	Within one (1) day	Budget Officer I (CBO)
None	CAFOA 4.1 Receives OBR/CAFOA in series with proper account charging together with the soft copy of control sheets, printed copy of transmittal and printed copy of ABC monitoring sheet, if there's any 4.2.Check OBR/ CAFOA's proper charging and completeness of documents attached >If incomplete documents, call end-user for concerns and forward to releasing 4.3. Check OBR's proper posting and charging in the control sheets > If the transaction is overdraft, call end-user for concerns and forward to releasing 4.4. Affix initials in the OBR/CAFOA	None	Within one (1) day	Budget Officer III (CBO)
	final review together with the soft copy of control sheets			

None 5. Final Review of OBR/CAFOA in series with proper account charging (together with the soft copy of control sheets for random checking & report preparation purposes) 5.2 Check OBR/CAFOA's proper charging and completeness of documents attached A. If incomplete documents, return to initial review for verification and releasing B. If the transaction is overdraft, return to initial review for verification and releasing 5.3 Affix initials in the OBR/CAFOA 5.4 Forward OBR/CAFOAs in series for review and approval of certification 5.5 For adjustment with attached Resolution, Forward for signature of City Budget Officer Otherwise, forward for	No ne	Within two (2) days	Budget Officer IV (CBO)
None 6. Approval of OBR/CAFOA 6.1 Review and certifies the OBR/CAFOA for the existence of available appropriation A. If incomplete documents, return to final review for verification and releasing	No ne	Within two (2) days	City Budget Officer (CBO)
B. If the transaction is overdraft, return to final review for verification and releasing None 7. Releasing of OBR/CAFOA 7.1 For Unobligated OBR/CAFOAs A. Log out to end-user once picked up 7.2 For Obligated	No ne	In two (2) days	Budgeting Assistant (CBO)

OBR/CAFOAs A. Get the approved OBR/CAFOAs from the CBO and retrieve 2 duplicate copies of OBR/CAFOAs Segregates documents per nature of transaction (GSO / Accounting) B. Transmits certified OBR/ CAFOAs to: > Accounting, if applicable. GSO for procurement related OBR/ CAFOAs will be picked up by GSO personnel. D. OBR/CAFOA processed by the end-user will be picked up by the end-user. E. Arrange retrieved copies in series. C. File 1 copy for CBO file. Forward 1 copy to Accounting Office on a weekly basis.	No	2 days	
	ne		



2. ADJUSTMENT AND CANCELLATION OF OBLIGATION REQUEST (OBR)/CERTIFICATION ON APPROPRIATIONS, FUNDS AND OBLIGATION OF ALLOTMENT(CAFOA)

The City Budget Office ensures that all obligation requests/certification on appropriations, funds and obligation of allotment are properly processed within the limits of the provided budget per office. This covers the receiving of obligation requests from the end-user or General Services personnel up to the issuance of Certification of Availability of Appropriation of the certified OBR/CAFOA.

Office or Division:	Administrative and Budgeting Division - Located at the 2nd Flr., City					
	Hall Building, A. Consunji St., Brgy. Sto Rosario Poblacion, City of					
	San Fernando, Pampanga					
Classification:	Simple					
Type of		_				
Transaction:	G2G – Governmen	t to Governm	ent			
	Offices/Department	ts of City Gov	ernment of San	Fernando,		
Who may avail:	Pampanga					
CHECKLIST OF R	EQUIREMENTS		WHERE TO SI	ECURE		
1. Original copy of OB	BR/CAFOA					
and attachments in	ndicating the	Provided by	requesting office	9		
final amount for ac	ljustment					
and/or cancellation	า					
2. Two (2) photocopie	s of OBR/CAFOA	Drovided by	requesting office			
with final amount for a	adjustment	Provided by	requesting office	=		
3. Accomplished CBC						
Adjustment/Cance	llation Form					
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON		
OLILINI OILI O	ACTIONS	BE PAID	G TIME	RESPONSIBLE		
1. Submit the	1. 1 Receives the	None	Within two (2)	Budgeting Assistant		
obligation	OBR/CAFOA		days	(CBO)		
request for	for adjustment/					
adjustment/	cancellation					
cancellation	1.2 For					
attached with	adjustment of					
complete	OBR/CAFOAs A. If there is an					
requirements	attached					
	Abstract of					
	Bids and BAC					
	Resolution,					
	assigns					
	number. For					
	cancellation of					
	OBR/CAFOAs,					

	proceed to			
	next step			
	1.3 Proceed to			
	posting in control sheet			
None	2. Posting in	None	Within two (2)	Budgeting Assistant
	the control		days	(CBO)
	sheets			
	2.1 Check allotment			
	balance in			
	the control			
	sheet			
	A. If there is an available			
	allotment,			
	post			
	transaction			
	B. If the transaction is			
	overdraft forward			
	to initial review			
	for verification			
	and releasing 2.2. Stamp			
	date of			
	adjustment/			
	cancellation		11/11/11	5 1 2000
None	Encoding and Printing of	None	Within two (2)	Budget Officer I & Budget Officer III
	transmittal		days	(CBO)
	3.1 Encodes the			
	adjustment/			
	cancellation in the transmittal and the			
	ABC monitoring			
	sheet, if there is			
	any.			
	3.2. Printing of transmittal			
	sheet.			

None	4 Polossing	None	In two (2)	Budgeting Assistant
None	4. Releasing	none	In two (2)	
	4.1 For		days	(CBO)
	Adjustments			
	A. GSO or			
	procurement			
	related			
	adjustments will			
	be picked up by			
	the GSO			
	personnel.			
	B. Adjustments			
	processed by the			
	end-user will be			
	picked by the			
	end-user.			
	4.2 For			
	Cancellations			
	A. For file of CBO			
	TOTAL:	None	Two (2) Days	



3. REVIEW AND TRANSMITTAL OF BARANGAY BUDGETS

The City Budget Office ensures that the barangay budgets submitted for review complied with the budgetary requirements and limitations provided in the Local Government Code; the budget does not exceed the estimated receipts and/or income of the barangay; and the items of appropriations are not more than those provided by the existing laws.

Office or	Dorongov Budgeting on	ad City Cabaal	Division Locat	ad at the 2nd Els. City
Office or	Barangay Budgeting ar			
Division:	Hall Building, A. Consu Fernando, Pampanga	nıjı St., Digy. S	io Nosalio Fobl	acion, City of San
Classification:	Simple			
Type of	G2G – Government to	Government		
Transaction:	G2G = Government to	Government		
Who may avail:	35 Barangays in the Ci	ty of San Fern	ando Pampanga	<u> </u>
	OF REQUIREMENTS		WHERE TO S	
Annual Barang			WHERE TO C	LOGILE
	ce appropriating			
	approved by the			
Barangay (• •			
	Resolutions for the			
	on of funds duly			
	y barangay officials			
1.3 Barangay E	Budget Forms (BF1,	Provided by requesting office		
BF2, BF2A	, BF3, BF4, Annex G			
1.4 Annual Inv	1.4 Annual Investment Plan (AIP)			
	d Development			
Plan certifie				
1.6 Barangay (
	of Children Plan			
_	th the profile			
1.7 Barangay I				
	Management Plan			
	Barangay Budget			
	nance appropriating			
,	approved by barangay			
officials	Pagalutiana for tha	Drovided by	oguanting office	
	Resolutions for the on of funds duly	Frovided by I	equesting office	;
	y barangay officials			
2.3 Barangay E				
(Form 8, Fo	_			
	's certification for			
	us/Savings			
	AGENCY	FEES TO	PROCESSI	PERSON
CLIENT	ACTIONS	BE PAID	NG	RESPONSIBLE
STEPS	7.01.01.0			

			TIME	
1.Submit the Annual Budget or Supplement	Receives the duly approved barangay budget	None	Within one (1) day	Budgeting Assistant (CBO)
al Budget for review	2. Review as to the completeness of requirements and schedule of appropriation	None	Within thirty (30) days	Budget Officer III/ Budget Officer IV(SAO) & City Budget Officer (CBO)
	2.1 Personal Services 2.2 MOOE 2.3 20% Devt. Fund 2.4 10% SK Fund 2.5 5% Calamity Fund			
None	3. Prepare Transmittal & 1st Endorsement Letter to SP	None	Within thirty (30) days	Budget Officer III/ Budget Officer IV(SAO) (CBO)
None	4. Approve and sign transmittal & 1st Endorsement Letter to SP	None	Within thirty (30) days	City Budget Officer (CBO)
None	5. Transmit documents to SP	None	Within thirty (30) days	Budgeting Assistant (CBO)
	TOTAL:	None	Within thirty (30) days	



City Information and Communications Technology Office

Internal Services



1. REQUEST FOR IT SERVICES

The City Information and Communications Technology Office is the main contact for resolving IT issues and concerns to ensure efficient and effective government service.

Loc Brg		Located at Brgy. Sto F	City Information and Communications Technology Office Located at the 2nd FIr., City Hall Building, A. Consunji St., Brgy. Sto Rosario Poblacion, City of San Fernando, Pampanga			
Classification: Simple						
Type of Transaction:		G2G – Gov	ernment to Go	vernment		
Who may avail:		City Govern	nment of San F	ernando and	attached agencies	
CHECKLIST OF RE	QUIREME	NTS	W	HERE TO SE	CURE	
N/A	4			N/A		
CLIENT STEPS	_	ENCY FIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE	
Avail services through Service Request Queuing System.	1. Monitor all Reported Concerns to the Service Request Queuing System		None	5 minutes	Technical Staff (CICTO)	
2. Wait while the technical staff is checking the unit.	2.Assess and troubleshoot the reported unit		None	15 minutes	Technical Staff (CICTO)	
3. Wait while the technical staff perform service.	3. Conduct proper repair or restoration.		None	2 hours 50 minutes	Technical Staff (CICTO)	
4. Wait while the technical staff conduct testing.	4.Conduct testing and clear the request on the Service Request Queuing System		None	15 minutes	Technical Staff (CICTO)	
5. Fill out the service request form	5. Check service form and file		None	5 minutes	Administrative Aide (CICTO)	
	TOTAL:		None	3 hours and 30 minutes		



City Information Office

External Services



1. ADDRESSING PUBLIC CONCERNS

The City Information Office is mandated to address the concerns of the public delivered through a face-to-face set-up, or through its Facebook page, landline, and email address. Concerns conveyed through CIO's personnel (face-to-face, chats or SMS) by the employees should also be acknowledged.

Office or Division:	:	City Information Office- Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga			
Classification:		Complex			
Type of Transaction	on:	G2C – Gover	rnment to Cit	izen	
Who may avail:		All City Gove agencies	rnment of Sa	an Fernando office	s and attached
CHECKLIST OF R (any of the			WHERI	E TO SEND PUBL	LIC CONCERNS
1. A letter or any report (in narrative form) explaining the concern 2. A phone call to the CIO landline 3. A visit to the CIO These actions must be supported by a document/file/photo/video		1) https://www.facebook.com/CSFP.CIO 2) info.csfp@gmail.com 3) 649-8080 loc. 103 Physical Office			
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
		gularly check mmunication nels	N/A	Case-by-case basis	Administrative Aide (City Information Office)
1. Send or convey a narrative report through the aforementioned communication channels above	subm the re conve a pho face-t up, th should	view the itted report. If port was eyed through ne call or o-face set- e staff d create a	None	1 hour	Administrative Aide (City Information Office)
	report Admir	dorse the to a fellow histrative for sorting	None	30 minutes	Administrative Aide (City Information Office)

T		T	1
4. Transmit the report to the concerned offices	None	30 minutes	Administrative Aide (City Information Office)
5. Address the concern	None	Case-by-case basis	Concerned office
6. Inform the sender of the report's transmittal	None	5 minutes	Administrative Aide (City Information Office)
7. Close coordination about the status of the report	None	Case-by-case basis	CIO and concerned offices
8. Post activities (if any)	None	Case-by-case basis	Writer Cameramen (City Information Office)
TOTAL:	None	2 hours, 5 minutes for preliminary activities only	



City Information Office

Internal Services



1. PRODUCTION OF TARPAULINS

The City Information Office provides tarpaulin layout designs and copies for all offices of the City Government of San Fernando and its attached agencies to be used for their respective programs, projects, and activities.

Office or Division:	City Information Office - Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga				
Classification:	Simple	<u>, </u>	· ·		
Type of Transaction:	G2G – Government to G	overnment			
Who may avail:	All City Government of San Fernando offices and attached agencies				
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE	
Filled-out Servi	ce Request Form (SRF)	City Inform	nation Office – He	roes Hall	
Document/s cont proposed conten	aining the tarpaulin's t and design	City Inform	nation Office – He	roes Hall	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Request for a cop of SRF at the CIO	y 1. Issue SRF at the physical office	None	5 minutes	Administrative Aide (City Information Office)	
2. Fill out the Service Request Form (SRF		None	5 minutes	Administrative Aide (City Information Office)	
3. Submit the SRF to the City Information Office	3.1 Encode items on the SRF	None	5 minutes	Administrative Aide (City Information Office)	
	3.2 Endorse the SRF to the City Information Officer	None	5 minutes	Administrative Aide (City Information Office)	
	3.3 Review the filled- out SRF	None	30 minutes	City Information Officer (City Information Office)	
	3.4 Endorse the filled-out SRF to the Administrative Aide	None	5 minutes	City Information Officer (City Information Office)	
	3.5 Endorse the filled-out SRF to the	None	5 minutes	Administrative Aide (City Information	

	Graphic/Layout Artist			Office)
	3.6 Do the layout design of the tarpaulin	None	4-5 days	Graphic/Layout Artist
	3.7 Review the layout design	None	10 minutes	City Information Officer (City Information Office)
	3.8 Endorse the layout design to the printing shop via email/online transaction	None	10 minutes	Administrative Aide (City Information Office)
	3.9 Print and deliver the tarpaulin	None	1-2 days	Printing Shop personnel/staff
4. Pick up the tarpaulin at the CIO	4. Issue the tarpaulin to the requesting office	None	None	Administrative Aide (City Information Office)
	None	5-7 days, 1 hour, 20 minutes (depending on quantity)		

2. PRODUCTION OF STREAMERS



The City Information Office provides streamer designs for all offices of the City Government of San Fernando and its attached agencies to be used for their respective programs, projects, and activities.

Office or Division:	City Information Office - Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga					
Classification:	Simple	Simple				
Type of Transaction:	G2G – Governmen	G2G – Government to Government				
Who may avail:	All City Governmen	t of San Fer	nando offices and	attached agencies		
CHECKLIST OF RI			WHERE TO S	ECURE		
1. Filled-out Stream (SRF)	•	City Informa	ation Office – Her	oes Hall		
Document/s conta streamer's proposed design		City Informa	ation Office – Hero	oes Hall		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	ERSON RESPONSIBLE		
1. Request for a copy of SRF at the CIO	1. Issue SRF at the physical office	None	5 minutes	Administrative Aide (City Information Office)		
2. Fill out the Service Request Form (SRF)	2. Review the filled-out items	None	5 minutes	Administrative Aide (City Information Office)		
3. Submit the SRF to the City Information Office	3.1 Encode items on the SRF	None	5 minutes	Administrative Aide (City Information Office)		
	3.2 Endorse the SRF to the City Information Officer	None	5 minutes	Administrative Aide (City Information Office)		
	3.3 Review the filled-out SRF	None	30 minutes	City Information Officer (City Information Office)		
	3.4 Endorse the			City Information Officer		

	filled-out SRF to the Administrative Aide	None	5 minutes	(City Information Office)
	3.5 Endorse the filled out SRF to the Visual Artist	None	5 minutes	Administrative Aide (City Information Office)
	3.6 Do the layout/design of the streamer	None	2-3 days	Visual Artist (City Information Office)
4. Pick-up the streamer at the CIO-Visual Arts Unit (at the back of City College)	4. Issue the streamer to the requesting office	None	None	Visual Artist (City Information Office)
	TOTAL:	None	2-3 days, 1 hour, 10 minutes (depending on quantity)	

3. PRODUCTION OF T-SHIRT, POSTER, AND SOCIAL MEDIA CARD DESIGNS

The City Information Office provides layout designs of T-shirts, brochures, and social media cards for all offices of the City Government of San Fernando and its attached agencies to be used for their respective programs, projects, and activities

Office or Division:	City Information Office -Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga					
Classification:	Simple					
Type of Transaction:	G2G – Government to Government					
Who may avail:	All City Government of San Fernando offices and attached agencies					
CHECKLIST OF REC						
1. Filled-out Service R	equest Form (SRF)	City Informa	ation Office – Her	oes Hall		
2. Document/s contain proposed content and	•	City Informa	ation Office – Her	oes Hall		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	ERSON RESPONSIBLE		
Request for a copy of SRF at the CIO	1. Issue SRF at the physical office	None	5 minutes	Administrative Aide (City Information Office)		
2. Fill out the Service Request Form (SRF)	2. Review the filled-out items	None	5 minutes	Administrative Aide (City Information Office)		
3. Submit the SRF to the City Information Office	3.1 Encode items on the SRF	None	5 minutes	Administrative Aide (City Information Office)		
	3.2 Endorse the SRF to the City Information Officer	None	5 minutes	Administrative Aide (City Information Office)		
	3.3 Review the filled-out SRF	None	30 minutes	Administrative Aide (City Information Office)		
	3.4 Endorse the filled-out SRF to the Administrative Aide	None	5 minutes	Administrative Aide (City Information Office)		
	3.5 Endorse the filled-out SRF to			Administrative Aide (City Information Office)		

	the Graphic/Layout Artist	None	5 minutes	
	3.6 Do the layout design of the materials	None	5-7 days	Graphic/Layout Artist (City Information Office)
	3.7 Review the layout design	None	10 minutes	City Information Officer (City Information Officer)
	3.8 Endorse the layout design to the requesting office	None	30 minutes	Administrative Aide (City Information Officer)
4. Review the layout design for comments/approval	4. Apply the revisions (if any)	None	As the need arises	Administrative Aide (City Information Officer)
			5-7 days, 1 hour, 40 minutes	
	TOTAL:	None	(additional days will be applied if there are revisions)	



4. PRODUCTION OF BROCHURES, COFFEE TABLE BOOK, FLYER DESIGNS, MAGAZINES, AND NEWSPAPERS

The City Information Office provides layout designs of brochures, coffee table book, flyers, magazines, and newspapers for all offices of the City Government of San Fernando and its attached agencies to be used for their respective programs, projects, and activities

Office or Division:	City Information Office - Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga				
Classification:	Complex				
Type of Transaction:	G2	G – Government to (Government		
Who may avail:	All	City Government of	San Fernando	o offices and atta	ched agencies
CHECKLIST OF	REC	UIREMENTS	١	WHERE TO SEC	URE
1. Filled-out Servic		. ,	City Informa	ation Office – He	roes Hall
2. Document/s con proposed content a			City Informa	ation Office – He	roes Hall
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Request for a copy of SRF at the CIO		1. Issue SRF at the physical office	None	5 minutes	Administrative Aide (City Information Office)
2. Fill out the Service Request Form (SRF)		2. Review the filled-out items	None	5 minutes	Administrative Aide (City Information Office)
3. Submit the SRF to the City Information Office		3.1 Encode items on the SRF	None	5 minutes	Administrative Aide (City Information Office)
		3.2 Endorse the SRF to the City Information Officer	None	5 minutes	Administrative Aide (City Information Office)
		3.3 Review the filled-out SRF	None	30 minutes	City Information Officer (City Information Office)
fil th		3.4 Endorse the filled-out SRF to the Administrative Aide	None	5 minutes	City Information Officer (City Information Office)

	3.5 Endorse the filled-out SRF to the Graphic/Layout Artist	None	5 minutes	Administrative Aide (City Information Office)
	3.6 Do the layout design of the materials	None	15-28 days	Graphic/Layout Artist (City Information Office)
	3.7 Review the layout design	None	2 days	City Information Officer (City Information Office)
	3.8 Endorse the layout design to the requesting office	None	30 minutes	Administrative Aide (City Information Office)
4. Review the layout design for comments/approval	4. Apply the revisions (if any)	None	As the need arises	Administrative Aide (City Information Office)
			15-30 days, 1 hour, 30 minutes	
	TOTAL:	None	(additional days will be applied if there are revisions)	





The City Information Office produces Infomercials and Audio-Visual Presentations for all offices of the City Government of San Fernando and its attached agencies to be used for their respective programs, projects, and activities.

Office or Division:		City Information Office Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga					
Classification:		Highly Technical					
Type of Transaction:		G2G – Gov	ernment to G	Sovernment			
Who may avail:		All City Gov agencies	All City Government of San Fernando offices and attached agencies				
CHECKLIST	OF REQUIREME	ENTS					
1. Filled-out Serv	rice Request Forr	m (SRF)	n (SRF) City Information Office – Heroes Hall				
Document/s co proposed script,	•		· · · · · · · · · · · · · · · · · · ·				
CLIENT STEPS	CLIENT AGENCY ACTIO		FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE		
1. Request for a copy of SRF at the CIO	Issue SRF at the physical office		None	5 minutes	Administrative Aide (City Information Office)		
2. Fill out the Service Request Form (SRF)	2. Review the filled-out items		None	5 minutes	Administrative Aide (City Information Office)		
3. Submit the SRF to the City Information Office	3.1 Encode items on the SRF		None	5 minutes	Administrative Aide (City Information Office)		
	3.2 Endorse the SRF to the City Information Officer		None	5 minutes	Administrative Aide (City Information Office)		
	3.3 Review the filled-out SRF		None	30 minutes	City Information Officer		
					(City Information Office)		
	3.4 Endorse the filled-out SRF to the Administrative				City Information Officer		
	Aide		None	5 minutes	(City Information Office)		
	3.5 Endorse the filled-out SRF to the Writer		None	5 minutes	Administrative Aide (City Information Office)		

	1			1
4. Participate in the conduct of a brainstorming session	4.1 Conduct a brainstorming session with the concerned office/department requesting for an Infomercial/AVP	None	1 day	Writer (City Information Office)
	4.2 Do the script/necessary inputs to the script	None	3-5 days	Writer (City Information Office)
	4.3 Endorse the checked script to the writer	None	5 minutes	Writer (City Information Office)
	4.4 Shoot and collate all the needed visual elements	None	10 days	Writer Cameramen (City Information Office)
	4.5 Endorse the materials to the video editor	None	1 day	Writer Cameramen (City Information Office)
	4.6 Edit the infomercial/AVP	None	10 days	Video Editor (City Information Office)
	4.7 Endorse the edited infomercial/AVP to the City Information Officer for comments/approval	None	1 day	City Information Officer (City Information Office)
	4.8 Endorse the edited infomercial/AVP to the requesting office comments/approval	None	1 day	Administrative Aide (City Information Office)
5. Review the layout design for comments/ approval	5. Apply the revisions (if any)	None	Case-by- case basis	Administrative Aide (City Information Office)
			30 days, 1 hour, 20 minutes	
	TOTAL:	None	(additional days will be applied if there are revisions)	



6. COVERAGE OF CITY PROGRAMS, PROJECTS, ACTIVITIES, EVENTS

The City Information Office covers the PPAs and events of different offices of the City Government of San Fernando and its attached agencies, through the provision of a news piece, photographs, and video materials.

Office or Division:		City Information Office - Located at the 1st Flr.,Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga					
Classification:		Simple					
Type of Transaction:		G2G – Gov	ernment to C	Sovernment			
			vernment of San Fernando offices and attached				
CHECKLIST OF REQU	UIRE	MENTS	NTS WHERE TO SECURE				
1. Filled-out Service Ro (SRF)	eque	est Form	City Information Office – Heroes Hall				
2. Document/s contain event's background/bri	_	he PPA or	City Information Office – Heroes Hall				
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Request for a copy of SRF at the CIO		ssue SRF he physical ce	None	5 minutes	Administrative Aide (City Information Office)		
2. Fill out the Service Request Form (SRF)		Review the ed-out items	None	5 minutes	Administrative Aide (City Information Office)		
3. Submit the SRF to the City Information Office (this should be		Encode ns on the F	None	5 minutes	Administrative Aide (City Information Office)		
submitted at least a few hours or 1-3 days prior to the event)							
	the City Info	Endorse SRF to the y ormation icer	None	5 minutes	Administrative Aide (City Information Office)		

	3.3 Review the filled-out SRF	None	30 minutes	City Information Officer (City Information Office)
	3.4 Endorse the filled-out SRF to the Administrative Aide	None	5 minutes	Writer Cameramen (City Information Office)
	3.5 Endorse the filled-out SRF to the designating officer	None	5 minutes	Administrative Aide (City Information Office)
	3.6 Designate a coverage team	None	5 minutes	Writer Cameramen (City Information Office)
4. Provide further information about the PPA/event	4.1 Coverage of the event	None	Case-to-case basis	Writer Cameramen (City Information Office)
	4.2 Post- coverage activities	None	1 day	Writer Cameramen (City Information Office)
	TOTAL:	None	1 hour for preliminary activities only	



7. LIVESTREAMED COVERAGE OF CITY PROGRAMS, PROJECTS, ACTIVITIES, EVENTS

The City Information Office is providing livestreaming services for the PPAs and events of different offices of the City Government of San Fernando and its attached agencies.

Office or Division:		City Information Office - Located at the 1st Flr., Heroes Hall., Brgy. San Juan, City of San Fernando, Pampanga				
Classification:		Highly Technical				
Type of Transaction:				overnment		
Who may avail:		G2G – Government to Government All City Government of San Fernando offices and attached agencies				
	IECKLI QUIREI		WHERE TO SECURE			
1. Filled-out Service (SRF)	ce Req	uest Form	City Information Office – Heroes Hall			
2. Document/s cor event's backgroun	_		City Informa	ation Office – Hero	oes Hall	
CLIENT STEPS		GENCY CTIONS	FEES TO BE PAID	PROCESSING TIME	ERSON RESPONSIBLE	
1. Request for a copy of SRF at the CIO	Issue SRF at the physical office		None	5 minutes	Administrative Aide (City Information Office)	
2. Fill out the Service Request Form (SRF)	2. Review the filled-out items		None	5 minutes	Administrative Aide (City Information Office)	
3. Submit the SRF to the City Information Office	3.1 Encode items on the SRF		None	5 minutes	Administrative Aide (City Information Office)	
(this should be submitted at least 1-3 days prior to the event)						
			None	5 minutes	Administrative Aide (City Information Office)	

	3.3 Review the filled-out SRF	None	30 minutes	City Information Officer (City Information Office)
	3.4 Endorse the filled-out SRF to the Administrative Aide	None	5 minutes	City Information Officer (City Information Office)
	3.5 Endorse the filled-out SRF to the designating officer	None	5 minutes	Administrative Aide (City Information Office)
	3.6 Designate a coverage team	None	5 minutes	City Information Officer (City Information Office)
4. Provide further information about the PPA/event	4.1 Coverage of the event	None	se-to-case basis	Writer Cameramen Equipment Operators (City Information Office)
	4.2 Post- coverage activities	None	1 day	Writer Cameramen Equipment Operators (City Information Office)
	TOTAL:	None	1 hour for preliminary activities only	



VI. FEEDBACK AND COMPLAINTS

	FEEDBACK AND COMPLAINTS MECHANISM
How to send a feedback	Answer the Client Feedback Form and drop it at the designated box in front of the service office or at the Public Assistance and Complaints Desk or send a message through the City Human Resource Management Office (CHRMO) or CSFP CIO Facebook Page
	Other contact info: (045) 961-8640 / hr.csfp@gmail.com
How feedbacks are processed	Feedback forms received by PACD shall be collected every 1 st and 16 th of the month.
	Feedback from clients may be classified as Compliment, Suggestion and Complaint in which different actions shall apply.
	 A. Compliment If a simple compliment is received through the feedback form, a simple commendation letter from the CHRMO shall be sent to the office being complimented with a copy of the said feedback form. If a compliment received had a major impact to the City, a recognition and commendation shall be awarded to the office or the person being complimented during any of the City's events.
	 B. Complaint The complainant shall be contacted through the given contact details to check the validity of the complaint. If the complainant does not respond, the complaint shall be considered void. The facts or details surrounding the incident and the person being complained of shall also be checked to determine the veracity of the complaint. If the complaint is valid, a memorandum shall be issued by the CHRMO ordering the Head of Office to take actions on the said incident. If it is void, the feedback form shall only be kept for records purposes and for future reference.
	C. Suggestion1. The suggestion received through the feedback

	form shall be checked if realistic and useful; otherwise, it will be considered as invalid. 2. If the suggestion is realistic and useful, a memorandum shall be issued by the CHRMO to the concerned office, together with the feedback form. For inquiries and follow-ups, clients may contact the following telephone numbers: (045) 961-8640 or 961-6640 local 119
How to file a complaint	The person in charge of Disciplinary Action (CHRMO Staff) may receive complaints through walk-in or through a letter. Walk-in applicants may opt to file a simple or formal complaint.
	For inquiries and follow-ups, clients may contact the following telephone numbers: (045) 961-8640 or 961-6640 local 119
How complaints are processed	A. Simple (Unnotarized or Informal Written) 1. Receive complaints from external and internal client s. 2. Endorse the complaint to the department head of the person complained of and wait for response. 3. Based on investigation and validation, possible results may lead to verbal warning to the person being complained of, amicable settlement between two (2) opposing parties, endorsement of complaints to the City Legal Office or filing (if invalid or inessential). B. Formal (Written) Complaint 1. Receive complaints from external and internal clients through a complaint letter. 2. The complaint letter must be notarized and must bear the following details: • full name and address of the complainant • full name, address, position and office of the person being complained of • a narration of relevant facts which shows the
	 acts or omissions allegedly committed certified trues copies of documentary evidence and affidavits of his/her witnesses, if

	 certification or statement of nonforum shopping *The absence of any of the aforementioned requirements may cause the dismissal of the complaint without prejudice to its refilling upon compliance with the same. The notarized complaint letter must be submitted to the Mayor's Office and a copy furnished to CHRMO. Once received by the aforementioned offices, due process shall be done against the complaint based on Civil Service Law and Rules.
	For inquiries and follow-ups, clients may contact the following telephone numbers: (045) 961-8640 or 961-6640 local 119
Contact Information of CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph 1-ARTA (2782) PCC: 8888 CCB: 0908-881-6565 (SMS)

For ISO Offices:

FEEDBACK AND COMPLAINTS MECHANISM				
How to send a feedback	Drop the feedback form at the designated suggestion box located at the ISO Focal Offices.			
How feedbacks are processed	See below.			
How to file a complaint	Provide the necessary information to the Overall Document			
	Controller for the clarification of the incident that caused the client's dissatisfaction.			
How complaints are processed	ISO feedback forms are gathered and sorted daily.			
	Validation of the complaint and review of corrective actions, if applicable, are then conducted.			
	During validation, the client is informed that his/her complaint is being processed/ addressed.			
	A memorandum and Corrective Action Report is issued to the concerned office if the complaint is valid and a meeting is set for the conduct of Root Cause Analysis.			
	Finally, corrective actions shall be reviewed and agreed upon by erring personnel and the Quality Management Representative/ Internal Monitoring Team Head.			
	For inquiries and follow-ups, clients may contact the following telephone numbers: (045) 649-8540 local 140			
Contact Information of CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph 1-ARTA (2782) PCC: 8888			
	CCB: 0908-881-6565 (SMS)			



VI. LIST OF OFFICES

City Hall Offices

Trunk Line: 649-8540

Office	Address	Contact Information
City Treasurer's Office (CTO)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-5313 649-8540 Local 112 / 104 / 108
Land Tax Division (LTD)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 119
City Civil Registry Office (CCRO)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 Local 214 649-8540 Local 141 / 144
Office of the City Building Official (OCBO)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	963-5580 649-8540 Local 163
City General Services Office (UMSD)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424 649-8540 Local 127
City General Services Office (RCSS) Satellite	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 115
Business License & Permit Division (BLPD)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	455-0397 649-8540 Local 162

RHU I (CMU)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424 649-8540 Local 127
RHU I (EHSD)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424 649-8540 Local 123
COMELEC	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424
Bureau of Fire Protection (BFP)	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-2313 649-8540 Local 153 / 154 / 156
Public Employment Service Office	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 146
City Assessor's Office	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 142
City Legal Office	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 147
Public Assistance and Compliant Desk	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 133 / 161
CSFP – Multipurpose Cooperative	Ground Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 181

Radio Room	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	961-2424
	Fernando, Pampanga	649-8540 Local 100
City Mayor's Office (CMO)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	961-5022 / 963-3342 / 961-0381
Oity Mayor 3 Office (OMO)	Fernando, Pampanga	
		649-8540 Local 101 / 128 / 133 / 149
City Administrator's	2 nd Floor, City Hall, A. Consunji	961-2872
Office (CAdminO)	St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 112 / 124
City Accountant's Office	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	435-1037
(CACCO)	Fernando, Pampanga	649-8540 Local 117 / 166
City Human Resource Management Office	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	961-8640
(CHRMO)	Fernando, Pampanga	649-8540 Local 107 / 178
City Information and Communications	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	961-5468
Technology Office (CICTO)	Fernando, Pampanga	649-8540 Local 132
City Planning and Development Coordinator's	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	961-4054
Office (CPDCO)	Fernando, Pampanga	649-8540 Local 135
City Social Welfare and Development Office	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San	403-9365
(CSWDO)	Fernando, Pampanga	649-8540 Local 148 / 180

Internal Control Division (ICD)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424 649-8540 Local 140
Department of Interior and Local Government (DILG)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6640 / 961-2424 649-8540 Local 105
Commission on Audit (COA)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	402-6656 649-8540 Local 137
City Employment Services Division (CESD)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	961-6601 649-8540 Local 138
CMO – TF Office Space Utilization	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 102
Community Affairs Division (CAD)	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	403-9366 649-8540 Local 151
City Public Order and Safety Coordinating Office- Satellite	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 120
4P'S	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 116
Building Maintenance Unit	2 nd Floor, City Hall, A. Consunji St., Sto. Rosario, City of San Fernando, Pampanga	649-8540 Local 150

Heroes Hall Offices

Trunk Line: 649-8080

Office	Address	Contact Information
Operator	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 0
City Environment and Natural Resources Office (CENRO)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	963-0907
City Information Office (CIO)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	963-1887
CMO - City Investment Promotion Office (CIPO)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 110
Utility and Maintenance Services Division (UMSD)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 113
City Disaster Risk Reduction and Management Office (CDRRMO)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	09209226422
Office of the Sangguniang Panlungsod (OSP)- Satellite	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	961-3224 / 963-3422 / 961-1493
CMO-Executive Support Group (ESG)	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 104

Violence Against Women and Their Children	Ground Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	Trunk Line: 649-8080
Office of the City Vice Mayor (OCVM)	2 nd Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 102
City Mayor's Office (CMO)	2 nd Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 101
Executive House	2 nd Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 109
Local Housing and Settlement Division (LHSD)	2 nd Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	435-5728
Office of the Sangguniang Panlungsod (OSP)	2 nd Floor, Heroes Hall, San Juan, City of San Fernando, Pampanga	649-8080 Local 102
City College of San Fernando (CCSFP)	San Juan, City of San Fernando, Pampanga (At the back of Heroes Hall)	961-8957

Other Offices

Office	Address	Contact Information
City Tourism Office (CTIPO)	Paskuhan Village, Barangay San Jose, CSFP	Trunk Line: 649-8540
City Public Order and Safety Coordinating Office	CPOSCO Headquarters, Calulut, City of San Fernando, Pampanga	626-5065