

APPLICATION FOR LOCATIONAL CLEARANCE
COMPLIANCE annex A of HRSC Memorandum Cir. No. 03 series of 1986

APPLICATION NO. : **2021** - _____

DATE :

1. NAME OF APPLICANT:

√

ADDRESS:

√

2. NAME OF CORPORATION:

ADDRESS

3. NAME OF AUTHORIZED REPRESENTATIVE:

ADDRESS:

5. PROJECT TYPE:

√

4. PROJECT TYPE:

New Development

Improvement

Specify : (___)

6. PROJECT LOCATION (NO. /ST. BRGY./CITY/ MUNICIPALITY/ PROVINCE)

7. PROJECT AREA (IN SQUARE METERS)/ BUILDING(S)/ IMPROVEMENT

√

Lot Area: _____ .sq.m

Floor Area.: _____ sq.m.

8. RIGHT OVER LAND

√

Owner

Other, please specify

Lessees

9. PROJECT TENURE

Permanent

Temporary (specify year)

10. EXISTING LAND USES OF PROJECT SITE

√

Residential

Industrial

Institutional

Others (please specify)

Commercial

Vacant/ Idle

Agricultural (specify crop)

11. PROJECT COST/ CAPITALIZATION (IN PESO, WRITE IN WORDS AND FIGURES)

√

12. IS THE PROJECT APPLIED FOR THE SUBJECT SIMILAR APPLICATION WITH OTHER OFFICES OF THE COMMISSION AND OR DEPUTIZED ZONING ADMINISTRATOR TO THE EFFECT REQUIRING FOR PRESENTATION OF LOCATIONAL CLEARANCE OF ZONING COMPLIANCE (LC/ CZC) OR TO APPLY LC/ CZC?

Yes No, if Yes please answer the ff.

12.a. Name of HLURB Officer or Zoning Administrator who issued the notice(s)

12.b. Date(s) of notice

13. IS THE PROJECT APPLIED FOR THE SUBJECT SIMILAR APPLICATION WITH OTHER OFFICES OF THE COMMISSION AND OR DEPUTIZED ZONING ADMINISTRATOR? Yes No

13.a. Other

13.b. Dates Filed

13.c. Action(s) taken by Office(s) mentioned in 12.a.

14. PREFERRED MODE OF RELEASE OF DECISION

Pick-up

By mail address

Applicant

Authorized Representative

15. SIGNATURE OF APPLICANT

16. SIGNATURE OF AUTHORIZED REPRESENTATIVE

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