CITIZEN'S CHARTER CITY GOVERNMENT OF IMUS 2024, 1st EDITION





I. Mandate:

By virtue of Republic Act 10161, the Municipality of Imus in the Province of Cavite was converted into a component city to be known as the City of Imus.

II. Vision:

The model city in the region, with secured and healthy citizenry, living in a smart, green and sustainable environment in a technology-driven economy, governed with integrity and transparency.

III. Mission:

The City Government of Imus is committed to delivering a transparent, reliable, and efficient public service that is proactive to the needs of its people while actively pursuing development for a dynamic and unified Imus.

IV. Service Pledge:

- The City Government of Imus, with the aid of advanced communicational and technological competencies, is inspired to create and adopt new ideas to better serve its present constituents and to secure the lives of the future generation.
- Highly driven and enthused to serve, the City Government of Imus is motivated to look for strategies and ways to improve its performance in order to fulfill its potential as a catalyst of change and development.
- The City Government of Imus, as a unified government body, is dedicated to realizing its mission and vision through harmonious working relationship among its employees and active participation of its people in nation-building.
- The City Government of Imus is committed to consistently deliver excellent customer experiences imbedded on quality and accessible services to its constituents. It is constantly looking for better ways of doing things through learning and improvement.





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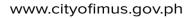




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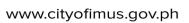
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CITY TREASURER'S OFFICE

EXTERNAL SERVICES







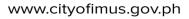
1. ASSESSMENT OF REAL PROPERTY TAX

Real Property Tax is an ad valorem tax imposed on all types of Real Properties including Lands, Buildings, Improvements, and Machinery. It is collected every thirty-first (31^{st)} of January each year. However, taxpayers can also pay in quarterly installment every March 31, June 30, September 30 and December 31.

		, ,	<i>i i i</i>	
OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Imus City Real Property Owners			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Latest Real Property Tax Official Receip	t (Original/Photocopy) <u>or</u>	Provided by the client		
Latest Tax Declaration (1 Original/Ph	notocopy) <u>or</u>	City Assessor's Office		
Notice of Delinquency (Original/Phot	ocopy)	City Treasurers Office	 Land Tax Division 	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Get ticket number from the Queue Management System	1. Call next number in Queue Management System	None	2 minutes (if under normal circumstances)	Luisito Ramirez Moises Jordan Jr.
1.2 Wait for your number to be called		None		
2. Present/submit the requirement/s to the assigned counter for initial assessment and verification	2.1 Receive the requirement/s and check for completeness2.2 Issue Statement of Account if all requirements were given	None	2 minutes (if under normal circumstances)	Mitchie Fae dela Cruz Clark Costa Riva Dolor Alamo Irene Camilon Russel Gloria
				Josephine Aragon Junen Baja Jonathan Sampot Catherine Castillo Madel Fina Base Medalyn Saulog Ramil Pascual Rizza May Camia Nikki Satsatin
	Fill-out the Client Satisfa			
	TOTAL	None	4 minutes	<u> </u>







2. PAYMENT OF REAL PROPERTY TAX

Real Property Tax is an ad valorem tax imposed on all types of Real Properties including Lands, Buildings, Improvements and Machinery. It is collected every thirty-first (31^{st)} of January each year. However, taxpayers can also pay in quarterly installment every March 31, June 30, September 30 and December 31.

	nowever, taxpayers can also pay in quarter	ij motaliment every mai		
OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Gov	ernment to Business, G	2G – Government to Gov	rernment
WHO MAY AVAIL THE SERVICE	Imus City Real Property Owners			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECU	RE
Statement of Account or		City Treasurers Office	– Windows 23 to 25	
Latest Real Property Tax Official Receip	t (Original/Photocopy) or	Provided by the client		
Latest Tax Declaration (1 Original/Ph				
Notice of Delinquency (Original/Phot		City Assessor's Office		
		City Treasurers Office	 Land Tax Division 	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Get ticket number from the	1. Call next number in Queue	None	2 minutes	Luisito Ramirez
Queue Management System	Management System		(if under normal	Moises Jordan Jr.
			circumstances)	
1.2 Wait for your number to be		None		
called				
2. Pay the assessed/ required fee(s)	2. Receive the payment and Issue O.R.	For Basic & SEF:	3 minutes	Irene Camilon
		Property Assessed	(if under normal	Russel Gloria
		Value X 2.1% +	circumstances)	Riva Alamo
		Penalty (if		Jonathan Sampot
		applicable) +		Josephine Aragon
		Garbage Fee (if		Junen Baja
		applicable)		Clark Costa
		- Discount (if		Madel Fina Base
		applicable)		Ramil Pascual
				Jess Frederick Berco
				Medalyn Saulog
				Lor Annmae Mendoza
				Catherine Castillo
				Nikki Satsatin
				Rizza May Camia
	Fill-out the Client Sati	staction Pating Form		The armay Carnia

Fill-out the Client Satisfaction Rating Form

CITIZEN'S CHARTER

TOTAL	Based on	7 minutes	
	computation		

3. ISSUANCE OF REAL PROPERTY TAX CLEARANCE

Real Property Clearance is issued to all real property owners certifying that the properties have no outstanding real property tax due.

OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Imus City Real Property Owners			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
If you are the owner				
Latest Real Property Tax Official Rec	ceipt (Original/Photocopy) <u>or</u>	Provided by the client		
Latest Tax Declaration (1 Original/Ph		City Assessor's Office		
Government Issued Identification Ca	rd (1 Original/Photocopy)	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
If you are a representative – For Tr	ransfer			
Latest Real Property Tax Official Rec	ceipt (Original/Photocopy) <u>or</u>	Provided by the client		
Latest Tax Declaration (1 Original/Ph	otocopy)	City Assessor's Office		
Special Power of Attorney – If the ow	ner is in the Philippines			
(1 Original) or Secretary's Certificate or		Person/Company being Represented		
Consulate Issued Special Power of Attorney Red Ribbon/Seal - If the owner is				
abroad (1 Original)				
Deed of Sale/Contract to Sell/Extra J		Provided by the client		
Government Issued Identification Ca	rd of Corporate Secretary/ Signatory/Attorney-	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
in-Fact/Owner (1 Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		
Government Issued Identification Ca	rd of the Representative	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
(1 Original and 1 Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		
If you are a representative – For Reference/Record Purposes				
Latest Real Property Tax Official Receipt (Original/Photocopy) or		Provided by the client		
Latest Tax Declaration (1 Original/Photocopy)		City Assessor's Office		
Authorization Letter or Special Power of Attorney or				
	lution specifying the Authorized Representative	Provided by the client		
(1 Original)				
	rd of Corporate Secretary/ Signatory/Attorney-	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
in-Fact/Owner (1 Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		



Government Issued Identification Ca	rd of the Representative	BIR, Post Office, D	FA, PSA, SSS, GSIS,	Pag-IBIG, LTO, PhilHealth,
(1 Original and 1 Photocopy)		Comelec, PRC, IBP,	MARINA, OSCA	
If you are a representative – For D	evelopers/Service Provider			
Latest Real Property Tax Official Red		Provided by the clien		
Latest Tax Declaration (1 Original/Ph	notocopy)	City Assessor's Office	8	
Secretary's Certificate (1 Original) or				
Board Resolution specifying the Auth		Person/Company bei		
Government Issued Identification	Card of Corporate Secretary/ Signatory (1			Pag-IBIG, LTO, PhilHealth,
Photocopy)		Comelec, PRC, IBP,		
Government Issued Identification Ca	rd of the Representative			Pag-IBIG, LTO, PhilHealth,
(1 Original and 1 Photocopy)		Comelec, PRC, IBP,		
	f Sale/Contract to Sell together with the above	Provided by the clien	t	
specified requirements (1 Photocopy				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1. Call next number in Queue Management	None	2 minutes	Luisito Ramirez
Queue Management System	System		(if under normal	
			circumstances)	
1.2 Wait for your number to be		None		
called				
2. Present/submit the requirement/s	•	None	2 minutes	Mitchie Fae dela Cruz
to the assigned counter for	completeness		(if under normal	Rizza May Camia
initial assessment and			circumstances)	Nikki Satsatin
verification				
3. Pay the assessed/ required fee(s)	3.1 Receive the payment and Issue O.R.	P50.00 + P30.00	2 minutes	Mitchie Fae dela Cruz
		(Documentary		Rizza May Camia
	3.2 Release the Tax Clearance	Stamp Tax)		Madelfina Base
				Nikki Satsatin
				Lor Annemae Mendoza
	Fill-out the Client Satisfac	tion Rating Form		
	TOTAL	Php 80.00	6 minutes	





4. ISSUANCE OF REAL PROPERTY TAX PAYMENT HISTORY

Real Property Tax Payment History is issued to all real property owners providing the payment records of the property.

	story is issued to all real property owners pr	oviding the payment recon	us of the property.	
OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Imus City Real Property Owners			
	F REQUIREMENTS		WHERE TO SECURE	
If you are the owner				
Statement of Account or		City Treasurers Office – V	Windows 23 to 25	
Latest Real Property Tax Receipt (Or	iginal/Photocopy) <u>or</u>	Provided by the client		
Latest Tax Declaration (1 Original/Ph	otocopy)	City Assessor's Office		
If you are a representative				
Latest Real Property Tax Official Rec		Provided by the client		
Latest Tax Declaration (1 Original/Ph	otocopy)	City Assessor's Office		
Authorization Letter or Special Power				
Secretary's Certificate <u>or</u> Board	Resolution specifying the Authorized	Provided by the client		
Representative (1 Original)				
Government Issued Identification	on Card of Corporate Secretary/	BIR, Post Office, DFA, PS	SA, SSS, GSIS, Pag-IBIG, L	TO, PhilHealth, Comelec,
Signatory/Attorney-in-Fact/Owner (1		PRC, IBP, MARINA, OSC		
Government Issued Identification Ca	rd of the Representative(1 Original and 1	BIR, Post Office, DFA, PS	SA, SSS, GSIS, Pag-IBIG, L	TO, PhilHealth, Comelec,
Photocopy)		PRC, IBP, MARINA, OSC		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON
				RESPONSIBLE
1.1 Get ticket number from the	1. Call next number in Queue	None	2 minutes	Luisito Ramirez
Queue Management System	Management System		(if under normal	
			circumstances)	
1.2 Wait for your number to be				
called		None		
2. Present/submit the requirement/s	2. Receive the requirement/s and check	None	2 minutes	Mitchie Fae dela Cruz
to the assigned counter for initial	for completeness			Clark Costa
assessment and verification				Riva Dolor Alamo
				Irene Camilon
				Josephine Aragon
				Junen Baja
1				Junch Daja

CITIZEN'S CHARTER



	TOTAL	Php 80.00	9 minutes	
	Fill-out the Client Satisf	faction Rating Form		
4. Present the Official Receipt 4.	Release the Tax Payment History	None	2 minutes	Leonida Tapawan
3. Pay the assessed/ required 3. R fee(s)	Receive the payment and Issue O.R.	P50.00 + P30. 00 (Documentary Stamp Tax)	3 minutes (if under normal circumstances)	Medalyn Saulog Jonathan Sampot Catherine Castillo Ramil Pascual Rizza May Camia Lor Annmae Mendoza Marietta Esguerra Evelyn Miranda Gillianne Villafuerte Charmaine Joy Saringayat Pee Chee Fauni Mary Ann Franco Alvin Topacio Gilbert de Jesus





5. ASSESSMENT AND PAYMENT OF LOCAL TRANSFER TAX

Local Transfer Tax is imposed on the sale, donation, barter, or any other mode of transferring ownership or title of real property. Payment is due sixty (60) days from the date of execution of the deed or the date of the decedent's death.

	City Treasurer's Office				
	Simple				
	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government				
WHO MAY AVAIL THE	Imus City Real Property Owners				
SERVICE					
	T OF REQUIREMENTS	WHERE TO SECURE			
If you are the buyer/seller					
Deed of Absolute Sale <u>or</u>		Provided by the client			
Deed of Conveyance <u>or</u>					
Deed of Reconveyance (1 Photoco					
Deed of Donation (1 Photocopy) <u>or</u>					
Extrajudicial Settlement of Estate (
Certificate of Sale (1 Photocopy) <u>or</u>	<u>r</u>				
Court Order					
Certificate Authorizing Registration					
Withholding Tax Remittance Re	eturn and Official Receipt/Deposit Slip (1				
Photocopy) and					
Capital Gains Tax Return and Official Receipt/Deposit Slip (1 Photocopy) and		Bureau of Internal Revenue			
Documentary Stamp Tax Declaration					
Transfer Certificate of Title (1 Phote	осору)	Register of Deeds			
Tax Declaration (1 Photocopy)		City Assessor's Office			
Tax Clearance (1 Photocopy)		City Treasurers Office – Window 23 to 25			
Government Issued Identification C	Card (1 Original/Photocopy)	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA			
If you are a representative					
Deed of Absolute Sale or					
Deed of Conveyance or					
Deed of Reconveyance (1 Photoco	or (vad				
Deed of Donation (1 Photocopy) or		Provided by the client			
Extrajudicial Settlement of Estate (
Certificate of Sale (1 Photocopy) or					
	-				
Court Order					

CITIZEN'S CHARTER

Photocopy) and	Return and Official Receipt/Deposit Slip (1 cial Receipt/Deposit Slip (1 Photocopy) and ion/Return (1 Photocopy)	Bureau of Internal Reve	enue		
Transfer Certificate of Title (1 Pho	tocopy)	Register of Deeds			
Tax Declaration (1 Photocopy)		City Assessor's Office			
Tax Clearance (1 Photocopy)		City Treasurers Office -	– Window 1 to 3		
Secretary's Certificate (1 Original)					
Special Power of Attorney (1 Origi		Person/Company being	g Represented		
Government Issued Identification	Card (1 Original/Photocopy)			g-IBIG, LTO, PhilHealth,	
		Comelec, PRC, IBP, M			
Government Issued Identification (1 Original and 1 Photocopy)	Card of the Representative		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present/submit the requirement/s to the assigned counter for initial assessment and verification	1. Receive the requirement/s and check for completeness	None	12 minutes (if under normal circumstances)	Jess Frederick Berco Cynthia Hernandez Madel Fina Base	
2. Pay the assessed/ required fee(s)	2. Receive the payment and Issue O.R.	75% of 1% (.0075) of acquisition cost/fair market value/zonal value whichever is higher	3 minutes (if under normal circumstances)	Jess Frederick Berco Cynthia Hernandez Madel Fina Base	
	Fill-out the Client Satisfa	action Rating Form Based on	15 minutes		
	TOTAL				







6. ISSUANCE OF LOCAL TRANSFER TAX CERTIFICATE

Local Transfer Tax Certificate is issued to all real property owners certifying the transfer tax payment of the property.

	is issued to all real property owners certifying t	ine transier tax payment	or the property.	
OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Govern	ment to Business, G2G	- Government to Gov	ernment
WHO MAY AVAIL THE SERVICE	Imus City Real Property Owners			
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	JRE
If you are the owner				
Latest Tax Declaration (1 Photocopy)		City Assessor's Office		
Transfer Certificate of Title (1 Photoc	сору)	Registry of Deeds		
Government Issued Identification Ca	rd	BIR, Post Office, DFA,	PSA, SSS, GSIS, Pag	J-IBIG, LTO, PhilHealth,
(1 Original/Photocopy)		Comelec, PRC, IBP, M		
If you are a representative				
Latest Tax Declaration (1 Photocopy)		City Assessor's Office		
Transfer Certificate of Title (1 Photoc	сору)	Registry of Deeds		
Secretary's Certificate (1 Original) or	Special Power of Attorney (1 Original)	Person/Company being		
Government Issued Identification Car	d of Corporate Secretary/ Signatory/Attorney-	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
in-Fact/Owner (1 Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		
Government Issued Identification Cal	rd of the Representative	BIR, Post Office, DFA,	PSA, SSS, GSIS, Pag	J-IBIG, LTO, PhilHealth,
(1 Original and 1 Photocopy)		Comelec, PRC, IBP, M	ARINA, OSCA	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s for initial assessment and verification	1. Receive the requirement/s and check for completeness	None	2 minutes	Jess Frederick Berco Cynthia Hernandez Madel Fina Base
2. Pay the assessed/ required fee(s)	2. Receive the payment and Issue O.R.	P50.00 + P30.00 (Documentary Stamp Tax)	3 minutes (if under normal circumstances)	Marietta Esguerra Evelyn Miranda Gillianne Villafuerte Charmaine Joy Saringayat Pee Chee Fauni Mary Ann Franco Alvin Topacio Gilbert de Jesus
3. Present O.R. and claim the Certification	3. Release the Certificate	None	5 minutes	Jess Frederick Berco Cynthia Hernandez

CITIZEN'S CHARTER

			Madel Fina Base	
Fill-out the Client Satisfaction Rating Form				
TOTAL Php 80.00 10 minutes				

7. ISSUANCE OF COMMUNITY TAX CERTIFICATE

Community Tax Certificate is imposed on all the inhabitants of the city who are eighteen years old and above, as well as juridical persons doing business in the city or whose office or establishment is located in the city. It shall accrue on the first (1st) day of January each year and shall be paid not later than the last day of February of each year.

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OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Go	overnment to Business, G2G – Government to Government		
WHO MAY AVAIL THE SERVICE	Residents of City of Imus (must be eight	een years old and above)		
	Residents and non-residents engaged in business or occupation in the City of Imus			
	Real Property owner in City of Imus			
	Individuals who are required to file an inc			
CHECKLIST OI	F REQUIREMENTS	WHERE TO SECURE		
If you are the applicant				
Latest community tax certificate (Orig		Provided by the client		
Government Issued Identification Card of the Applicant (Original)or		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
If you are a representative				
Latest community tax certificate (Orig	inal/Photocopy) <u>or</u>	Provided by the client		
Government Issued Identification Car	d of the Applicant (Original/Photocopy)	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
Special Power of Attorney (1 Original)		Person being Represented		
Government Issued Identification Car	d of the Representative	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec,		
(1 Original and 1 Photocopy)		PRC, IBP, MARINA, OSCA		
For BIR Filing				
Latest community tax certificate (Orig		Provided by the client		
Government Issued Identification Card of the Applicant (Original)		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
Certificate of Compensation Payment	- BIR Form 2316 (1 Original/Photocopy)	Client's Employer		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s	1. Receive the requirement/s and check	None	2 minutes	Lea Ilagan
to the assigned counter for initial	for completeness		(if under normal	Marietta Esguerra
assessment and verification			circumstances)	Evelyn Miranda
				Gillianne Villafuerte
				Charmaine Joy Saringayat
				Pee Chee Fauni
				Mary Ann Franco
				Alvin Topacio
		E e a las elle si de se la	0 minutes	Gilbert de Jesus
2. Pay the assessed/ required fee(s)	2. Receive the payment and Issue O.R.	For Individual:	3 minutes	Lea Ilagan
		P5.00 + (P1.00 for	(if under normal	Marietta Esguerra
		every P1,000.00 of	circumstances)	Evelyn Miranda
		income/property)		Gillianne Villafuerte
				Charmaine Joy Saringayat
		For Corporation:		Pee Chee Fauni
		P500.00 + (P2.00		Mary Ann Franco
		for every		Alvin Topacio
		P5,000.00 of		Gilbert de Jesus
		income/property)		
	Fill-out the Client Sat	isfaction Rating Form		
	TOTAL	Based on	5 minutes	
		computation		







8. PAYMENT OF PROFESSIONAL TAX

Professional Tax is imposed on each person engaged in the exercise or practice of his profession requiring government examination. Payment is due on or before the thirty-first (31st) of January each year.

City Treasurer's Office			
Simple			
G2C – Government to Citizen, G2B – Govern	ment to Business, G2G	- Government to Goverr	nment
Licensed Professionals			
OF REQUIREMENTS		WHERE TO SECUR	E
eceipt (Original/Photocopy) <u>or</u>	Provided by the client		
License (Original/Photocopy)	-		
	Professional Regulation	n Commission	
pines Identification Card/Roll Number	Integrated Bar of the P	hilippines	
rd/Certification	Philippine Regulation C	Commission/Insurance Co	ommission
	Bureau of Internal Revenue		
AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Receive the requirement/s and check for	None	5 minutes	Jess Frederick Berco
completeness		(if under normal	Cynthia Hernandez
		circumstances)	Madel Fina Base
Receive the payment and Issue O.R.	P300.00 + Penalty (if	3 minutes	Jess Frederick Berco
	applicable)	(if under normal	Cynthia Hernandez
		circumstances)	Madel Fina Base
Fill-out the Client Satisfa	action Rating Form		
TOTAL	Based on	8 minutes	
	computation		
	City Treasurer's Office Simple G2C – Government to Citizen, G2B – Govern Licensed Professionals OF REQUIREMENTS eccipt (Original/Photocopy) or a License (Original/Photocopy) or b License (Original/Photocopy) or b License (Original/Photocopy) or c License (Original/Photocopy) or b License (Original/Photocopy) or o License (Original/Photocopy) o License (Origin	City Treasurer's Office Simple G2C – Government to Citizen, G2B – Government to Business, G2G Licensed Professionals OF REQUIREMENTS exceipt (Original/Photocopy) or License (Original/Photocopy) Provided by the client License (Original/Photocopy) Professional Regulation pines Identification Card/Certification Card/Roll Number Integrated Bar of the Plane ard/Certification Philippine Regulation C Bureau of Internal Reve AGENCY ACTION FEES TO BE PAID 1. Receive the requirement/s and check for completeness None 2. Receive the payment and Issue O.R. P300.00 + Penalty (if applicable) Fill-out the Client Satisfaction Rating Form TOTAL	Simple G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Govern Licensed Professionals WHERE TO SECUR OF REQUIREMENTS WHERE TO SECUR Provided by the client License (Original/Photocopy) Provided by the client Professional Regulation Commission Professional Regulation Commission pines Identification Card/Roll Number Integrated Bar of the Philippines Integrated Bar of the Philippines Integrated Bar of the Philippines ard/Certification AGENCY ACTION FEES TO BE PAID PROCESSING TIME 1. Receive the requirement/s and check for completeness None 5 minutes (if under normal circumstances) 2. Receive the payment and Issue O.R. P300.00 + Penalty (if applicable) 3 minutes (if under normal circumstances) Fill-out the Client Satisfaction Rating Form TOTAL Based on 8 minutes





9. BUSINESS RETIREMENT ASSESSMENT AND ISSUANCE OF BUSINESS CLOSURE CERTIFICATE

A business subject to tax, upon closure/cessation of operation, shall inform LGU for the assessment of any tax due to be paid before its full termination. Business Closure Certificate is issued to all business tax owners certifying that the business filed for business retirement.

	to an submote tax officior contriging that the s			
OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All Business Owners			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
For Sole/Single Proprietorship				
Completely Filled-out and Notarized	Application Form	City Treasurers Office – Business Tax Division		
Latest Original Business Permit (Orig	ginal)	Provided by the client		
Latest Official Receipt (1 Photocopy)	or	Provided by the client		
Certificate of Last Payment - If the re	eceipt is not available (Original)	Business Permit and L	icense Office	
Latest Community Tax Certificate (O	riginal/Photocopy)	Provided by the client		
Audited Financial Statement/Income	Tax Return (1 Photocopy)	Bureau of Internal Rev	enue	
Certificate of Gross Sales – If ITR/FS	S is consolidated (1 Original)	Company/Business Ac	countant	
For Partnership/Corporation				
Completely Filled-out and Notarized	Application Form	City Treasurers Office – Business Tax Division		
Latest Original Business Permit (Orig		Provided by the client		
Latest Official Receipt (1 Photocopy)	<u>or</u>	Provided by the client		
Certificate of Last Payment – If the re		Business Permit and L	icense Office	
Latest Community Tax Certificate (O		Provided by the client		
Audited Financial Statement/Income		Bureau of Internal Revenue		
Certificate of Gross Sales – If ITR/FS		Company/Business Accountant		
	Board Resolution (1 Original) specifying the	Person being Represented		
Date of Closure and Authorized Rep				
Government Issued Identification Card of Corporate Secretary/ Signatory (1		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		
Government Issued Identification Card of the Representative (1 Photocopy)		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
		Comelec, PRC, IBP, MARINA, OSCA		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s	1.1 Receive the requirement/s and check for	None	5 minutes	Bryan Ordoñez
for initial assessment and	completeness		(if under normal	Karl Erick Sapida
verification			circumstances)	Patrick George Mercene
Dennis Gaurino				





	1.2 Issue Order of Payment	None		Elvie Candalla Jean Mari Aveno
2. Pay the assessed/ required fee(s)	2. Receive the payment and Issue O.R.	Based on table below + penalty (if applicable) + P50.00 + P30 (Documentary Stamp Tax)	3 minutes (if under normal circumstances)	Lea Ilagan Marietta Esguerra Evelyn Miranda Gillianne Villafuerte Charmaine Joy Saringayat Mary Ann Franco Alvin Topacio Gilbert de Jesus
3.1 Present O.R.3.2 Claim the Certification	3.1 Verify O.R.3.2 Prepare and Release the Business	None	5 minutes (if under normal circumstances)	Bryan Ordoñez Karl Erick Sapida Patrick George Mercene Dennis Gaurino
	Closure Certificate			Elvie Candalla Jean Mari Aveno
4. Submit 1 Photocopy of Certification	4. Receive the Certification	None	2 minutes	Administrative Assistant V Business Permit and License Office
Fill-out the Client Satisfaction Rating Form				
	TOTAL	Based on computation	15 minutes	







(a) On manufacturers, assemblers, repackers, processors, brewers, distillers, rectifiers, and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature. In accordance with the following schedule:

Amount of Gross Sales/Receipts for the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,742.00
75,000.00 or more but less than 100,000.00	2,178.00
100,000.00 or more but less than 150,000.00	2,904.00
150,000.00 or more but less than 200,000.00	3,630.00
200,000.00 or more but less than 300,000.00	5,082.00
300,000.00 or more but less than 500,000.00	6,655.00
500,000.00 or more but less than 750,000.00	10,560.00
750,000.00 or more but less than 1,000,000.00	13,200.00
1,000,000.00 or more but less than 2,000,000.00	18,150.00
2,000,000.00 or more but less than 3,000,000.00	22,143.00
3,000,000.00 or more but less than 4,000,000.00	26,136.00
4,000,000.00 or more but less than 5,000,000.00	30,492.00
5,000,000.00 or more but less than 6,500,000.00	32,175.00
6,500,000.00 or more	P32,175.00 plus 49.5% of 1% over P6.5million

The preceding rates shall apply only to the amount of domestic sales of manufacturers, assemblers, repackers, processors, brewers, distillers, rectifiers and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature other than those enumerated under paragraph (c) of this Section.







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(b) On wholesalers, distributors, or dealers in any article of commerce of whatever kind or nature in accordance with the following schedules:

Gross Sales/Receipts for the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00
750,000.00 or more but less than 1,000,000.00	11,616.00
1,000,000.00 or more but less than 2,000,000.00	13,200.00
2,000,000.00 or more	P13,200.00 plus 66%
	of 1% over P2.0 million

The businesses enumerated in paragraph (a) above shall no longer be subject to the tax on wholesalers, distributors, or dealers herein provided for.

However, barangays shall have the exclusive power to levy taxes on stores whose gross sales or receipts of the preceding calendar year does not exceed Fifty Thousand Pesos (P50,000.00) subject to existing laws and regulations.

- (c) On exporters, and on manufacturers, millers, producers, wholesalers, distributors, dealers or retailers of essential commodities enumerated hereunder at a rate not exceeding one-half (1/2) of the rates prescribed under subsections (a), (b), and (d) the Ordinance;
 - 1. Rice and Corn;
 - 2. Wheat or cassava flour, meat, dairy products, locally manufactured, processed or preserved food, sugar, salt and agricultural marine, and fresh water products, whether in their original state or not;
 - 3. Cooking oil and cooking gas;
 - 4. Laundry soap, detergents, and medicine;
 - 5. Agricultural implements, equipment and post-harvest facilities, fertilizers, pesticides, insecticides, herbicides and other farm inputs;
 - 6. Poultry feeds and other animal feeds;
 - 7. School supplies; and
 - 8. Cement







(d) On exporters of all articles of commerce of whatever kind or nature not mentioned under subsection (c), in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
Less than 100,000.00	871.00
100,000.00 or more but less than 150,000.00	1,221.00
150,000.00 or more but less than 200,000.00	1,580.00
200,000.00 or more but less than 300,000.00	2,178.00
300,000.00 or more but less than 500,000.00	2,904.00
500,000.00 or more but less than 750,000.00	4,345.00
750,000.00 or more but less than 1,000,000.00	5,749.70
1,000,000.00 or more but less than 2,000,000.00	6,534.00
2,000,000.00 or more	P6,534.00 plus 32.45% of 1% over P2.0 million







(e) On contractors and other independent contractors in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,161.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00
400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	P15,180.00 plus 66% of 1% over P2.0 million

Provided that in no case shall the tax on gross receipts of P2,000,000.00 or more be less than P15,1800.00

(f) On banks and other financial institutions, at the rate of seven five percent of one percent (75% of 1%) of the gross receipts of the preceding calendar year derived from interest, commissions and discounts from lending activities, income from financial leasing, dividends, rentals on property, and profit from exchange or sale of property, insurance premium. All other income and receipts not herein enumerated shall be excluded in the computation of the tax.







(g) On operators of theaters and cinema houses, video-movie houses utilizing laser disc players, projectors and of similar apparatus, and other entertainment sites on the internet and other show houses which are open to public for a fee:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,560.00
75,000.00 or more but less than 100,000.00	2,335.00
100,000.00 or more but less than 150,000.00	3,269.00
150,000.00 or more but less than 200,000.00	4,295.00
200,000.00 or more but less than 250,000.00	5,493.00
250,000.00 or more but less than 300,000.00	7,296.00
300,000.00 or more but less than 400,000.00	9,837.00
400,000.00 or more but less than 500,000.00	10,175.00
500,000.00 or more but less than 750,000.00	11,275.00
750,000.00 or more but less than 1,000,000.00	12,650.00
1,000,000.00 or more but less than 2,000,000.00	13,915.00
2,000,000.00 or more	P13,915.00 plus 66% of 1% over P2.0 million

(h) On lessors of real estate including apartments and boarding houses:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 60,000.00	1,210.00
60,000.00 or more but less than 70,000.00	1,548.00
70,000.00 or more but less than 80,000.00	1,839.00
80,000.00 or more but less than 90,000.00	2,153.00
90,000.00 or more but less than 100,000.00	2,468.00
100,000.00 or more but less than 150,000.00	3,061.00
150,000.00 or more but less than 200,000.00	4,138.00
200,000.00 or more but less than 300,000.00	5,517.00
300,000.00 or more but less than 500,000.00	8,167.00
500,000.00 or more but less than 750,000.00	13,722.00
750,000.00 or more but less than 1,000,000.00	19,882.00
1,000,000.00 or more but less than 2,000,000.00	21,780.00
2,000,000.00 or more	P21,780.00 plus 66% of 1% over P2.0 million





(i) On the businesses hereunder enumerated:

- 1. Commission agents;
- 2. Lessors, dealers, brokers of real estate;
- 3. On travel agencies and travel agents;
- 4. On boarding houses, pension houses, motels, apartments, apartelles, and condominiums;
- 5. Subdivision owners/developers, Private Cemeteries and Memorial Parks owners/developers;
- 6. Privately-owned markets;
- 7. Hospitals, medical clinics, dental clinics, therapeutic clinics, medical laboratories, dental laboratories;
- 8. Operators of Cable Network System;
- 9. General consultancy services;
- 10. Warehouses;
- 11. On line businesses that offers services;
- 12. All other similar activities consisting essentially of the sales of services for a fee

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1.161.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00
400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	P15,180.00 plus 66% of 1% over P2.0 million

Provided, that in no case shall the tax on gross sales of P2,000,000.00 or more be less than P15,180.







(j) On retailers with gross sales or receipts for the preceding year in the amount of:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00
750,000.00 or more but less than 1,000,000.00	11,616.00
1,000,000.00 or more but less than 100,000,000.00	P11,616.00 plus 66% of 1% over P1.0 million but less than P100 million
100,000,000.00 or more but less than 500,000,000.00	P665,016.00 plus 1.10% over P100 million but less than P500 million
500,000,000.00 or more	P5,065,016.00 plus 82.5% of 1% over P500 million

(k) On retailers classified as sari-sari store with gross sales or receipts for the preceding year in the amount of:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,188.00
75,000.00 or more but less than 100,000.00	1,584.00
100,000.00 or more but less than 150,000.00	2,244.00
150,000.00 or more but less than 200,000.00	2,904.00
200,000.00 or more but less than 300,000.00	3,950.00
300,000.00 or more but less than 500,000.00	4,924.00
500,000.00 or more but less than 750,000.00	7,920.00
750,000.00 or more but less than 1,000,000.00	10,560.00
1,000,000.00 or more but less than 2,000,000.00	P10,560.00 plus 60% of 1% over P1.0 million





- (I) On Authorized Franchise Car Dealers engaged in business of selling brand new vehicles and genuine parts pursuant to a valid and existing Franchise Agreement with legitimate manufacturers and distributors shall be taxed at the rate of 50% of 1% of gross receipts up to P 2,000,000.00 and 45% of 1% of gross receipts in excess of P 2,000,000.00.
- (m) On restaurants and other eating establishments such as, but not limited to cafes, cafeterias, ice cream or refreshment parlors, carinderias, soda fountains, food caterers, fast food centers and snack counters shall be taxed at the rate of 1.75% of the gross receipts of the preceding calendar year.
- (n) On operators engaged in amusement devices and computer shop shall be taxed at the rate of Two Hundred Pesos (P200.00) per amusement device.
- (o) On peddlers engaged in the sale of any merchandise or article of commerce, at the rate of Sixty Six Pesos (P66.00) per peddler annually.

Delivery trucks, vans or vehicles used by manufacturers, producers, wholesalers, dealers or retailers enumerated under Section 141 of R.A. 7160 shall be exempt: from the peddlers' tax herein imposed.

The tax herein imposed shall be payable within the first twenty (20) days of January. An individual who will start to peddle merchandise or articles of commerce after January 20 shall pay the full amount of the tax before engaging in such activity.

(p) On any business, not otherwise specified in the preceding paragraphs, which the Sanggunian concerned may deem proper to tax: Provided, That on any business subject to the excise, value-added or percentage tax under the National Internal Revenue Code, as amended, the rate of tax shall not exceed two percent (2%) of gross sales or receipts of the preceding calendar year.







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10. PAYMENT OF CONTRACTORS TAX

Contractors Tax is a business tax imposed on contractors and other independent contractors such as, but not limited to, general engineering, general building, and specialty contractors.

OFFICE OR DIVISION	City Traceuror's Office			
CLASSIFICATION	City Treasurer's Office			
	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All Business Owners			
	FREQUIREMENTS	WHERE TO SECURE		
Application for Building Permit (1 Pho		Office of the Building Officia		
Duly Signed Transmittal (1 Original/1		Office of the Building Officia	al	
	PRC & PTR License of the Architect or	Provided by client		
Engineer (1 Photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s		None	4 minutes	Bryan Ordoñez
for initial assessment and	check for completeness		(if under normal	Karl Erick Sapida
verification			circumstances)	Patrick George Mercene
	1.2 Issue Statement of Account	None		Dennis Gaurino
				Elvie Candalla
2. Pay the assessed/required fee(s)	2. Receive the payment and Issue O.R.	Based on the table below	3 minutes	Lea Ilagan
			(if under normal	Marietta Esguerra
			circumstances)	Evelyn Miranda
				Gillianne Villafuerte
				Charmaine Joy Saringayat
3. Submit 1 Photocopy of Official	3. Receive the Photocopy of Official	None	1 minute	Bryan Ordoñez
Receipt	Receipt			Karl Erick Sapida
	•			Patrick George Mercene
				Dennis Gaurino
				Elvie Candalla
	Fill-out the Client Sa	atisfaction Rating Form		
	TOTAL	Based on computation	8 minutes	





Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
Less than 5,000.00	32.75
5,000.00 or more but less than 10,000.00	73.65
10,000.00 or more but less than 15,000.00	125.45
15,000.00 or more but less than 20,000.00	198.00
20,000.00 or more but less than 30,000.00	330.00
30,000.00 or more but less than 40,000.00	462.00
40,000.00 or more but less than 50,000.00	660.00
50,000.00 or more but less than 75,000.00	1,056.00
75,000.00 or more but less than 100,000.00	1,584.00
100,000.00 or more but less than 150,000.00	2,376.00
150,000.00 or more but less than 200,000.00	3,168.00
200,000.00 or more but less than 250,000.00	4,356.00
250,000.00 or more but less than 300,000.00	5,544.00
300,000.00 or more but less than 400,000.00	7,392.00
400,000.00 or more but less than 500,000.00	9,900.00
500,000.00 or more but less than 750,000.00	11,100.00
750,000.00 or more but less than 1,000,000.00	12,300.00
1,000,000.00 or more but less than	13,800.00
2,000,000.00	
2,000,000.00 or more	At a rate not exceeding fifty percent (55%) of one percent (1%)







OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Order of Payment or Statement of Ac	ccount or Assessment of Taxes and Fees	Respective Imus City	Department/Offices	
Government Issued Identification Ca	rd	BIR, Post Office, DF Comelec, PRC, IBP, M		Pag-IBIG, LTO, PhilHealth,
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s to the assigned counter for initial assessment and verification	1. Receive the requirement/s and check for completeness	None	2 minutes (if under normal circumstances)	Lea Ilagan Marietta Esguerra Evelyn Miranda Gillianne Villafuerte Charmaine Joy Saringayat Pee Chee Fauni Mary Ann Franco Alvin Topacio Gilbert de Jesus
2. Pay the assessed/required fee(s) 2. Receive the payment and Issue O.R.		Based on the table below	3 minutes (if under normal circumstances)	Lea Ilagan Marietta Esguerra Evelyn Miranda Gillianne Villafuerte Charmaine Joy Saringayat Pee Chee Fauni Mary Ann Franco Alvin Topacio Gilbert de Jesus
	Fill-out the Client Satisfa			
	TOTAL	Based on computation	5 minutes	

11. PAYMENT OF VARIOUS LOCAL TAXES, FEES, AND REGULATORY CHARGES

Payment of various local taxes, fees, and regulatory charges payable to City Government of Imus.







NATURE OF TAX / FEE	AMOUNT CHARGED
Amusement Tax	as assessed by BPLO
Anti-Rabies Fee	Php 100.00
Business Tax	as assessed by BPLO and City Treasurer
Building Fee	as assessed by City Building Office
Burial Fee	as assessed by BPLO
Business Delinquency Fee	as assessed by Permits and Licensing Office and City Treasurer
Business Retirement Tax	as assessed by the City Treasurer
Cemetery Fee	as assessed by BPLO
Civil Registrar Fee	as assessed by City Civil Registrar
Engineering and Electrical Fees	as assessed by City Engineer's Office
Facilities Fee	as assessed by City Administrator's Office
Franchise Renewal	as assessed by Tricycle Regulatory Unit
Health Fee	Php 100.00 + Php 30.00 Documentary Stamp Tax

NATURE OF TAX / FEE	AMOUNT CHARGED
Local Franchise Tax	50% of 1% of Gross Sales
Mayor's Clearance	Php 50.00
No-Plastic Ordinance Fee	as assessed by CENRO
Other City Fees	as assessed by offices concerned
Pedicycle Registration	as assessed by Tricycle Regulatory Unit
Permit to Construct	Php 250.00
Personnel Certification	Php 50.00
Special Permit Fee	Php 785.00
Traffic Violation Fee	as assessed by CTMO / Violation Ticket
Tricycle Registration	as assessed by Tricycle Regulatory Unit
Working Permit Fee	as assessed by PESO
Zoning Fee	as assessed by City Planning & Development Office
Others	Refer to Order of Payment/Statement of Account







12. CHECK RELEASE OF FINANCIAL ASSISTANCE, CITY UTILITY EXPENDITURES, EMPLOYEE BENEFITS, AND OTHER CLAIMS

Release of checks for financial assistance, utility expenditures, employee benefits, and other claims.

OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All			
	OF REQUIREMENTS		WHERE TO SEC	URE
Official Receipt – If the claim is financ providers/creditors (Original)	ial assistance/scholarship/contractors/service	Provided by client		
	r of Attorney <u>or</u> Secretary Certificate <u>or</u> Board Representative (1 Original)	Person being Represer	nted	
Government Issued Identification Car in-Fact/Creditor (1 Photocopy)	d of Corporate Secretary/ Signatory/Attorney-	Comelec, PRC, IBP, M	ARINA, OSCA	, Pag-IBIG, LTO, PhilHealth,
Government Issued Identification Card of the Representative (1 Original and 1 Photocopy)		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth Comelec, PRC, IBP, MARINA, OSCA		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
 Present/submit the requirement/s for initial assessment and verification 	 Receive the requirement/s and check for completeness 	None	2 minutes (if under normal circumstances)	Luisa Tan Val Abad Pee Chee Fauni Kenneth Figueroa
0.0. Receive the check 0.1. Sign the disbursement and check voucher/s		None	4 minutes (if under normal circumstances)	Luisa Tan Val Abad Pee Chee Fauni Kenneth Figueroa
	Fill-out the Client Satisfa	action Rating Form		
	TOTAL	None	6 minutes	







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13. RELEASE OF SENIOR CITIZEN SUBSIDY

All registered senior citizens of the City of Imus are entitled to receive senior citizen subsidy semi-annually.

OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All Senior Citizens of the City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
If you are the recipient				
Government Issued Identification Ca	rd (1 Original/1 Photocopy)	BIR, Post Office, DF Comelec, PRC, IBP, M		Pag-IBIG, LTO, PhilHealth,
If you are a representative				
OSCA Authorization Letter (1 Origina	al)	Senior Citizen Presider	nt of the Barangay	
Government Issued Identification Ca	rd of the recipient (1 Photocopy)	BIR, Post Office, DF Comelec, PRC, IBP, M		Pag-IBIG, LTO, PhilHealth,
Government Issued Identification Ca (1 Original and 1 Photocopy)	rd of the Representative	BIR, Post Office, DF Comelec, PRC, IBP, M		Pag-IBIG, LTO, PhilHealth,
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present/submit the requirement/s	1. Receive the requirement/s and check for	None	5 minutes	Gencil Ramos
for initial assessment and	completeness		(if under normal	
verification			circumstances)	
2. Receive the pay envelope	2. Release the pay envelope	None	2 minutes	Luisa Tan
				Annaliza Racasa
	Fill-out the Client Satisfa	action Rating Form		
	TOTAL	None	7 minutes	





14. DISBURSEMENT AND ISSUANCE OF CHECKS

Preparation and check issuance for all creditors of City Government of Imus and recipients of financial assistance/honorarium/allowances etc.

OFFICE OR DIVISION	City Treasurer's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C - Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All creditors of City Government of Imus and	recipients of financial as	sistance/honorarium/a	Illowances etc.
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE
Approved Disbursement Voucher a Checklist	nd all supporting documents in Accounting	From requesting depar	tment/agency	
Additional Requirements:				
Financial Assistance				
Official Receipt		provided by client		
Employee Benefit				
Photocopy of Identification Card		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth, Comelec, PRC, IBP, MARINA, OSCA		
Supplier				
Authorization Letter or Special Power of Attorney		Person being Represented		
Government Issued Identification Ca	rd of the owner	BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-IBIG, LTO, PhilHealth,		
(1 Original and 1 Photocopy)		Comelec, PRC, IBP, M		
Government Issued Identification Ca	rd of the Representative			g-IBIG, LTO, PhilHealth,
(1 Original and 1 Photocopy)		Comelec, PRC, IBP, MARINA, OSCA		
Official Receipt (Suppliers Tax)		City Treasurer's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit approved Disbursement Voucher and supporting documents	1.1Receive the requirement/s and check for completeness	None	5 minutes	Ruby Protacio
	1.2 Encode details of the disbursement voucher in Voucher Monitoring File	None	2 minutes	
	1.3 Route for City Treasurer's Approval	None	4 hours	
	1.4 Prepare Check	None	1 hour	







	1.5 Encode Check Details in Check			
	Monitoring File	None		
	1.6 Prepare Accountant's Advice	None	10 minutes	
	1.7 Accountant's Advice (Accounting)	None		
	1.8 Encode SRE			
	1.9 Route Check for Signature	None	4 hours	
		None	1 day	
2.1 Submit additional requirement	2.1 Check and verify additional requirements	None		
2.2 Receive check	2.2 Issue Check			
	TOTAL	None	2 days	

NOTE: This is on a normal circumstance.







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CITY TREASURER'S OFFICE INTERNAL SERVICES







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1. ISSUANCE OF ACCOUNTABLE FORMS

Issuance of Accountable forms to all bonded collectors and barangay captains/treasurers of the City Government of Imus.

OFFICE OR DIVISION	City Treasurer's Office	City Treasurer's Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All bonded collectors and barangay captains/	treasurers of the City Go	overnment of Imus	
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	JRE
For Barangay Captains/Treasurers	5			
Bond Confirmation (1 Photocopy)		Bureau of Treasury		
Oath (1 Photocopy)		Department of the Inter	rior and Local Governr	nent
Certificate of Appointment (1 Photoc	ору)	Barangay Captain		
Official Receipt (Proof of Purchase o	f Accountable Form 51)	City Treasurers Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE
			TIME	
1. Pay for Official Receipt	1. Receive the payment and Issue O.R.	P300.00 / booklet	3 minutes	Cristina Calvelo
			(if under normal	
			circumstances)	
2. Present/submit the requirement/s	2.1 Receive the requirement/s and check for	None	5 minutes	Cristina Calvelo
for initial assessment and	completeness		(if under normal	
verification			circumstances)	
	2.2 Prepare Requisition and Issue Voucher	None		
	2.2 Propers Asknowledgement Respire	Nono		
2 Dessive the Associated la Forma	2.3 Prepare Acknowledgement Receipt	None	2 minutos	Cristing Colucia
3. Receive the Accountable Forms	3. Issue Accountable Forms	None None	2 minutes	Cristina Calvelo
	Fill-out the Client Satisfa		10 minutes	
	TOTAL	Php 300.00/booklet	10 minutes	





BUSINESS PERMITS AND LICENSING OFFICE/BUSINESS ONE-STOP SHOP (BOSS) INTERNAL SERVICES







1. ISSUANCE OF NEW BUSINESS/MAYOR'S PERMIT (ON-SITE AND KIOSK) All enterprises are required to secure a Business License and Mayor's Permit, and pay business taxes before the start of commercial operations.

	e and Mayor's Ferrini, and pay business lakes before the start of commercial operations.		
	Business Permits and Licensing Office		
CLASSIFICATION Simple			
	G2B – Government to Business		
	All proprietors with new business in the City of Imus		
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE		
FOR ONSITE: Please fill-out the Business Permit Applicat			
Form/Unified Form (provided by BPLO) and submit togeth	ier		
with the following requirements to the Counter/Window:			
FOR KIOCK, Places fill out the Rusiness Permit Applicati	Publicase One Stan Shan (POSS) KIOSK		
FOR KIOSK: Please fill-out the Business Permit Application Form/Unified Form using the KIOSK and submit the follow			
requirements to the Counter/Window:			
Proof of Registration			
-DTI, if Sole Proprietorship	Business One-Stop Shop (BOSS), https://bnrs.dti.gov.ph/registration, Imus Satellite Office		
2 Copies - 1 Original, 1 Photocopy or	– The District Mall, City of Imus, Any DTI Office		
-SEC Registration, if Partnership or Corporation	https://crs.sec.gov.ph/; Secretariat Building, PICC Complex		
2 Copies COMPLETE SET - 1 Original, 1 Photocopy or	Roxas Boulevard, Metro Manila Philippines		
-CDA, if Cooperative	https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827		
2 Copies - 1 Original, 1 Photocopy	Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary		
Housing and Lond Llos Degulatory Roard (HILLIPP) Degistre	cooperatives, this power has been delegated to the Regional or Extension Offices		
 Housing and Land Use Regulatory Board (HLURB) Registration Department of Human Settlement and Urban Development 	https://dhsud.gov.ph/services/homeowners-association/;		
(DHSUD) Registration (for Homeowner's Association)	DHSUD Building, Kalayaan Avenue, corner Mayaman Street, Diliman, Quezon City, 1101		
Proof of right of applicant to use location as business add			
-Certified True Copy of Original Certificate Title (OCT)/ Certified			
True Copy of Transfer Certificate of Title (TCT) -1 Original			
-Notarized Deed of Sale (if owned)- Original and 1 Photocopy	·_ /		
complete set			
-Notarized Contract to Sell (if under amortization) -Original a	nd 1		
Photocopy-complete set			
-Notarized Contract of Lease and Lessor's Business Permit (if			
renting)- Original and 1 Photocopy-complete set			

CITIZEN'S CHARTER



-Notarized Memorandum of Agreement/ Notarized written consent of property owner (if not owned, not renting) -Original and 1	
Photocopy-complete set	
- Death Certificate, Extrajudicial Settlement/Last Will and	
Testament/Affidavit of Self-Adjudication, Affidavit of Heirship and	
Written Consent for one of the heirs to use the property for	
business (if the title owner is deceased)- Original and 1 Photocopy-	
complete set	
-Notarized Consent of other title owner (if the business owner is	
one of the title owner)-Original	
-Secretary's Certificate (if title is single owned-for Corporation)-	
Original,	
-Certificate of Award Notice from NHA (if without title but with	
Tax Declaration) Original and 1 Photocopy	
-Affidavit of Sworn Declaration of all real properties for rent with	
tenants listed therein- Original (if lessor)	
Location plan or sketch of the location with picture of	From the owner of the business
establishment (front, right, left side view including the road, and	
interior view)-1 Copy-complete set Certificate of Occupancy, if applicable -Original and 1	From the owner of the business/City Building Official Office
Photocopy	
OTHER REQUIREMENTS THAT MAY BE NEEDED:	I
Market Clearance - for business located in public market-	From the Economic Enterprise Management Office (EEMO) located at Imus Public Market
Original and 1 Photocopy	
Franchise Agreement and Consent	From the Franchisor of the business
for franchisee-Original and 1 Photocopy	
Clearance for meat retailer, poultry and pet supplies retailer -	From City Veterinary Office
Original	
Annual Report to DHSUD (received/stamped)	From DHSUD
for Homeowners' Association - Original and 1 Photocopy	
Written Authorization Letter/ SPA/ Secretary's	From the owner of the business
Certificate/Partnership Certificate with I.D.s from owner and	
authorized representative- (if Representative)1 Photocopy	France Office of the Othe Marrier
Letter of No Objection – Original	From Office of the City Mayor
Approval from the City Mayor – Original	From Office of the City Mayor
Barangay Resolution -1 Photocopy	From Barangay Hall where the business is located

CITIZEN'S CHARTER



Homeowner's Association Resolution (HOA) endorsing the project or business, if the location of the business is within a Residential Subdivision -Original and 1 Photocopy	From Homeowner's Association of the Subdivision where the business is located
-Tax declaration and Updated Tax Receipt - Original and 1 Photocopy	From the Land Tax Office - Official Receipt of Real Property Tax-Amilyar
Certificate of Attendance on Solid Waste Management Seminar (must attend seminar conducted by CENRO)	From City Environment and Natural Resources Office (CENRO)
Certificate of Non-Coverage (CNC) DENR-EMB (www.emb.gov.ph) - for WATER STATION, JUNKSHOPS, MEDICAL & DENTAL CLINIC, LABORATORIES, LAUNDRY, CARWASH - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Environmental Compliance Certificate (ECC) DENR-EMB (www.emb.gov.ph) - for INDUSTRY, HOSPITAL, GASOLINE STATION, FUNERAL HOMES, MALL, SUPERMARKET, MANUFACTURER, FACTORY, POULTRY, PIGGERY, OTHER BUSINESS POSES POTENTIAL RISK/IMPACT TO ENVIRONMENT - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Contract/MOA with Private Hauler - private hauler must have MOA with Sanitary Landfill and Certificate of Disposal for MALL, FASTFOOD CHAIN, RESTAURANT, SUPERMARKET, LARGE SCALE INDUSTRY, FACTORY (MANUFACTURING), WAREHOUSE, ET.AL- 2 Photocopies	From Private Hauler
Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal) for MEDICAL INFECTIOUS/TOXIC WASTE-2 Photocopies	From DENR accredited Hauler
Discharge Permit (Water Pollution) -FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE STATIONS, FUNERAL PARLOR, & OTHER ESTABLISHMENTS THAT USE WATER & DISCHARGE IT EVENTUALLY - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Hazardous Waste Generators ID & Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal)- FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE	From Private Infectious/Hazardous Waste Hauler

CITIZEN'S CHARTER



	Order of Payment (Assessment Form)			Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez;	
1. Submit the complete requirements	1. Assess the requirements and issue the Business Tax	None	20 minutes	Mary Grace Basa; Regina Camaclang;	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Pest/Vermin Control for food establ supermarket – Original	ishiment, Tast-1000 Chain,	From any legitimate Pest Control estat	DISTIMENTS		
Drug Test (1-year validity) – Origina		From Department of Health (DOH)Accredited Laboratory From any legitimate Pest Control establishments			
Chest X-Ray (6 months validity) – (From Department of Health (DOH)Accredited Laboratory			
Fecalysis (1-month validity) – Origi		From Department of Health (DOH)Accredited Laboratory			
Urinalysis (1-month validity) – Orig		From Department of Health (DOH)Accredited Laboratory			
salon, and spa – Original					
Health Certificate of Staff - for food	establishment, water station,	From City Health Office			
for food establishment & water station					
Latest Result of Physico-Chemical	0	From Water Testing Laboratory			
Latest Result of Microbiological Ex ESTABLISHMENT & WATER STAT		From Water Testing Laboratory			
WATER REFILLING STATION, CAR Photocopy	. ,				
(nwrb.gov.ph) if source of water is	•				
Water Permit from National Water	Resources Board	From National Water Resources Board	d (NWRB) (nwrb.gov.ph)		
CARINDERIA - 1 Photocopy					
Picture of Grease Trap FOR REST		From the owner of the business			
or any operation producing dust or pa					
Permit to Operate (Air Pollution) - MANUFACTURING/INDUSTRY with		From DENR-EMB (www.emb.gov.ph)			
SUBSTANCES - 1 Photocopy					
THAT USE CHEMICAL DISCHARGE	E/HAZARDOUS				
	OTHER ESTABLISHMENTS				



2. Pay the required fee(s)	2. Receive the payment. Pass the Business Tax Order of Payment (Assessment Form), O.R., CTC, to BFP personnel for Fire Inspection Fee payment, then to Sanitary Inspector for Sanitary Permit	 Mayor's Permit Fee Zoning Fee - Based on Type of Establishment Building Inspection Fee - Based on Type of Structure Garbage Fee -Based on Type of Establishment Environmental Protection Fee- Based on Type of Establishment Sanitary Inspection Fee - Based on Type of Establishment Fire Safety Inspection Fee - 15 % of total assessment excluding business tax Business Plate - ₱ 200.00 Security Seal Sticker - ₱ 80.00 Documentary Stamp Tax - ₱ 30.00 	10 minutes	City Treasurer's Office assigned personnel
3. Claim the Business Tax Order of Payment (Assessment Form) with Official Receipts, CTC, Business Plate, Mayor's Permit Certificate, and Sanitary Permit	Order of Payment	None	30 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa; Richard Villanueva; Zecel Secretario
	Fill-out th	e Client Satisfaction Rating Form		
	TOTAL	Based on computation	1 hour	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.







Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00
Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b). On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00

On Main Offices, one half (1/2) of the Permit Fee enumerated.

(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00







2. ISSUANCE OF NEW BUSINESS/MAYOR'S PERMIT (ONLINE)

All enterprises are required to secure a Business License and Mayor's Permit, and pay business taxes before the start of commercial operations.

OFFICE OR DIVISION	Business Permits and Licensir	na Office	
CLASSIFICATION	Simple		
TYPE OF TRANSACTION	G2B – Government to Business		
WHO MAY AVAIL THE SERVICE	All proprietors with new business in the City of Imus		
CHECKLIST OF REC	QUIREMENTS	WHERE TO SECURE	
CHECKLIST OF REG Proof of Registration -DTI, if Sole Proprietorship 2 Copies - 1 Original, 1 Photocopy or -SEC Registration, if Partnership or C 2 Copies COMPLETE SET - 1 Original -CDA, if Cooperative 2 Copies - 1 Original, 1 Photocopy - Housing and Land Use Regulatory E Department of Human Settlement and (DHSUD) Registration (for Homeown Proof of right of applicant to use Io -Certified True Copy of Original Certifi True Copy of Transfer Certificate of T -Notarized Deed of Sale (if owned)- (complete set -Notarized Contract to Sell (if under a Photocopy-complete set -Notarized Contract of Lease and Less renting)- Original and 1 Photocopy-c -Notarized Memorandum of Agreeme of property owner (if not owned, not	Corporation al, 1 Photocopy or Board (HLURB) Registration / d Urban Development er's Association) ocation as business address ficate Title (OCT)/ Certified Title (TCT) -1 Original Original and 1 Photocopy- amortization) -Original and 1 ssor's Business Permit (if omplete set ent/ Notarized written consent	WHERE TO SECURE Business One-Stop Shop (BOSS), https://bnrs.dti.gov.ph/registration, Imus Satellite Office - The District Mall, City of Imus, Any DTI Office https://crs.sec.gov.ph/; Secretariat Building, PICC Complex Roxas Boulevard, Metro Manila Philippines https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827 Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary cooperatives, this power has been delegated to the Regional or Extension Offices https://dhsud.gov.ph/services/homeowners-association/; DHSUD Building, Kalayaan Avenue, corner Mayaman Street, Diliman, Quezon City, 1101 From the owner of the business place	

CITIZEN'S CHARTER





business (if the title owner is deceased)- Original and 1 Photocopy-	
complete set	
-Notarized Consent of other title owner (if the business owner is	
one of the title owner)-Original	
-Secretary's Certificate (if title is single owned-for Corporation)-	
Original,	
-Certificate of Award Notice from NHA (if without title but with	
Tax Declaration) Original and 1 Photocopy	
-Affidavit of Sworn Declaration of all real properties for rent with	
tenants listed therein- Original (if lessor)	
Location plan or sketch of the location with picture of	From the owner of the business
establishment (front, right, left side view including the road, and	
interior view)-1 Copy-complete set	
Certificate of Occupancy, if applicable -Original and 1	From the owner of the business/City Building Official Office
Photocopy	
OTHER REQUIREMENTS THAT MAY BE NEEDED:	
Market Clearance - for business located in public market-	From the Economic Enterprise Management Office (EEMO) located at Imus Public Market
Original and 1 Photocopy	
Franchise Agreement and Consent	From the Franchisor of the business
for franchisee-Original and 1 Photocopy	
Clearance for meat retailer, poultry and pet supplies retailer	From City Veterinary Office
Original	
Annual Report to DHSUD (received/stamped)	From DHSUD
for Homeowners' Association - Original and 1 Photocopy	
Written Authorization Letter/ SPA/ Secretary's	From the owner of the business
Certificate/Partnership Certificate with I.D.s from owner and	
authorized representative-(if Representative)1 Photocopy	
Letter of No Objection – Original	From Office of the City Mayor
Approval from the City Mayor – Original	From Office of the City Mayor
Barangay Resolution -1 Photocopy	From Barangay Hall where the business is located
Homeowner's Association Resolution (HOA) endorsing the	From Homeowner's Association of the Subdivision where the business is located
project or business, if the location of the business is within a	
Residential Subdivision -Original and 1 Photocopy	
-Tax declaration and Updated Tax Receipt - Original and 1	From the Land Tax Office - Official Receipt of Real Property Tax-Amilyar
Photocopy	





Certificate of Attendance on Solid Waste Management	From City Environment and Natural Resources Office (CENRO)
Seminar (must attend seminar conducted by CENRO)	
Certificate of Non-Coverage (CNC) DENR-EMB (www.emb.gov.ph) - for WATER STATION, JUNKSHOPS, MEDICAL & DENTAL CLINIC, LABORATORIES, LAUNDRY, CARWASH - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Environmental Compliance Certificate (ECC) DENR-EMB (www.emb.gov.ph) - for INDUSTRY, HOSPITAL, GASOLINE STATION, FUNERAL HOMES, MALL, SUPERMARKET, MANUFACTURER, FACTORY, POULTRY, PIGGERY, OTHER BUSINESS POSES POTENTIAL RISK/IMPACT TO ENVIRONMENT - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Contract/MOA with Private Hauler - private hauler must have MOA with Sanitary Landfill and Certificate of Disposal for MALL, FASTFOOD CHAIN, RESTAURANT, SUPERMARKET, LARGE SCALE INDUSTRY, FACTORY (MANUFACTURING), WAREHOUSE, ET.AL- 2 Photocopies	From Private Hauler
Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal) for MEDICAL INFECTIOUS/TOXIC WASTE - 2 Photocopies	From DENR accredited Hauler
Discharge Permit (Water Pollution) - FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE STATIONS, FUNERAL PARLOR, & OTHER ESTABLISHMENTS THAT USE WATER & DISCHARGE IT EVENTUALLY - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Hazardous Waste Generators ID & Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal)- FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE STATIONS, FUNERAL PARLOR, & OTHER ESTABLISHMENTS THAT USE CHEMICAL DISCHARGE/HAZARDOUS SUBSTANCES - 1 Photocopy	From Private Infectious/Hazardous Waste Hauler





		From DENR-EMB (www.emb.gov.ph)			
MANUFACTURING/INDUSTRY with furnaces, boilers, generators,					
or any operation producing dust or pa	articulate matter - 1 Photocopy				
Picture of Grease Trap FOR REST.	AURANT, EATERY,	From the owner of the business			
CARINDERIA - 1 Photocopy					
Water Permit from National Water		From National Water Resources Board	I (NWRB) (nwrb.gov.ph)		
(nwrb.gov.ph) if source of water is	•				
WATER REFILLING STATION, CAR	RWASH, LAUNDRY) - 1				
Photocopy					
Latest Result of Microbiological Ex		From Water Testing Laboratory			
ESTABLISHMENT & WATER STATI	0				
Latest Result of Physico-Chemical		From Water Testing Laboratory			
for food establishment & water statio	0				
Health Certificate of Staff for food e	establishment, water station,	From City Health Office			
salon, and spa – Original					
Urinalysis (1-month validity) – Orig		From Department of Health (DOH)Accredited Laboratory			
Fecalysis (1-month validity) - Origi		From Department of Health (DOH)Acc			
Chest X-Ray (6 months validity) – 0	<u> </u>	From Department of Health (DOH)Acc			
Drug Test (1-year validity) – Origina		From Department of Health (DOH)Acc			
Pest/Vermin Control for food estab	lishment, fast-food chain,	From any legitimate Pest Control estab	olishments		
supermarket – Original					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Register to	1. Assess the requirements	None	30 minutes	Mary Grace Basa;	
https://egovcityofimus.ph/bpl/	and issue the Business Tax		(time may vary on the	Regina Camaclang;	
1.1 Sign in using your email	Order of Payment		speed of the internet	Ruby Concepcion;	
address or mobile number	(Assessment Form)		connection)	Rolando Dela Cruz;	
1.2 Fill-out the Online Application				Ma. Elinor Laureles;	
Form			(stop time)	Roehl Mañago, Jr.;	
1.3 Attach the complete				Dianne Lois Marcial;	
requirements				Ruby Ordoñez;	
1.4 A notification will be sent to				Glenn Elmer Ramirez	
your mobile no./email for the					
Business Tax Order of Payment					
(Assessment Form)					





2. Pay the required fee(s) thru:	2. Receive the payment	Mayor's Permit Fee	2 days	City Treasurer's Office
 Link.bizPortal (<u>www.landbank.com</u> and click on Link.bizPortal) Starpay (<u>www.starpay.com.ph</u> or download the app Starpay) Gcash (<u>www.gcash.com</u> or download the app Gcash) 		 Zoning Fee - Based on Type of Establishment Building Inspection Fee - Based on Type of Structure Garbage Fee -Based on Type of Establishment Environmental Protection Fee- Based on Type of Establishment Sanitary Inspection Fee - Based on Type of Establishment Fire Safety Inspection Fee - 15 % of total assessment excluding business tax Business Plate - ₱ 200.00 Security Seal Sticker - ₱ 80.00 Documentary Stamp Tax - ₱ 30.00 	for posting of payment (3 rd party provider)	assigned personnel
3. Visit the Business One-Stop Shop (BOSS) to pay the Fire Inspection Fee and claim the Business Tax Order of Payment (Assessment Form) with Official Receipts, CTC, Business Plate, Mayor's Permit Certificate, and Sanitary Permit	Order of Payment (Assessment Form) with Official Receipts, CTC, Business Plate, Mayor's Permit Certificate, and Sanitary Permit	None	30 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa; Richard Villanueva; Zecel Secretario
		e Client Satisfaction Rating Form		
Noto	TOTAL	Based on computation	2 days and 1 hour	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.





Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00
Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b). On Banks

Rural Banks (Main or Branch)	Ρ	5,000.00
Thrift Banks (Main or Branch)		5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)		10,000.00
Universal Banks (Branch)		20,000.00

On Main Offices, one half (1/2) of the Permit Fee enumerated.

(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00







3. RENEWAL OF BUSINESS/MAYOR'S PERMIT (ON-SITE AND KIOSK)

Business Permit must be renewed from January 1 to 20, every year. Penalties are imposed after this period. Those for succeeding years are computed as a percentage of gross receipts/sales. Payments may be made annually, semi-annually or quarterly. Taxes are due on the first 20 days of each quarter.

	isiness Permits and Licensing Off	tice	
	Simple		
	G2B – Government to Business		
	proprietors with existing busines		
CHECKLIST OF REC	·	WHERE TO SECURE	
FOR ONSITE: Please fill-out the Business Permit Application Form/Unified Form (provided by BPLO) and submit together with the following requirements to the Counter/Window:		Business One-Stop Shop (BOSS), <u>https://cityofimus.gov.ph</u>	
FOR KIOSK: Please fill-out the Form/Unified Form using the KIOS requirements to the Counter/Window:			
Certificate or Sworn Declaration of /Financial Statements /Income Tax Ref 1 Copy – Original or Photocopy OTHER REQUIREMENTS THAT MAY	eturns	From the accountant of the business or from the owner of the business	
	BE NEEDED:		
Barangay Resolution -1 Photocopy		From Barangay Hall where the business is located	
Market Clearance for business is located in public market-Original and 1 Photocopy		From the Economic Enterprise Management Office (EEMO) located at Imus Public Market	
Clearance for meat retailer, poultry an Original	nd pet supplies retailer -	From City Veterinary Office	
Annual Report to DHSUD (received/st Association - Original	amped) for Homeowners'	From DHSUD	
Written Authorization Letter /Secretar Certificate with I.D.s from owner and Representative)1 Photocopy		From the owner of the business	
Approval from the City Mayor - Origin	al	From Office of the City Mayor	
Letter of No Objection – Original		From Office of the City Mayor	
Affidavit of Sworn Declaration of all r tenants listed therein FOR LESSOR- (

CITIZEN'S CHARTER



From Water Testing Laboratory
From Water Testing Laboratory
From City Health Office
From Department of Health (DOH)Accredited Laboratory
From any legitimate Pest Control establishments
https://bnrs.dti.gov.ph/registration, Imus Satellite Office – The District Mall, City of Imus,
Any DTI Office
https://crs.sec.gov.ph/; Secretariat Building, PICC Complex, Roxas Boulevard, Metro
Manila Philippines
https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827
Aurora Blvd., Immaculate Conception, Quezon City.

Certificate of Registration/Accreditation/ License from NATIONAL AGENCY

-Original and 1 Photocopy

	LINE OF BUSINESS	PERMIT/CLEARANCE NEEDED	FROM NATIONAL GOVERNMENT AGENCY
1.	Animal Facilities	Certificate of Registration	Bureau of Animal Industry
2.	Cargo/Freight Forwarders Logistics	Accreditation	Philippine Shippers Bureau/Fair Trade Enforcement Bureau (FTEB)
3.	Customs Brokerage Business	License	Customs Brokerage Commission/ Bureau of Customs License
4.	Dealer of Rice, Corn, and Wheat	License	National Food Authority
5.	 Drugstores Household/Urban Pesticides 	License to Operate; Certificate of Product Registration;	Food and Drug Administration (FDA),
	 Medical Devices Processed Foods 	PRC License for Pharmacist (Drugstore)	Professional Regulation Commission (PRC)
	 Veterinary Products Cosmetic Products 	License to Operate	Bureau of Health Device & Technology-DOH

CITIZEN'S CHARTER

	Childcare ArticlesToys		
6.	 Electronic Repair Shop: Electrical Air-Conditioning Refrigeration Office Equipment Medical Equipment Dental Equipment Other Consumer Industrial Electromechanical, Chemical and Gaseous Equipment Machinery appliances or devices Motor Vehicle Repair Shop Heavy Equipment Engines Engineering Works 	Accreditation	Department of Trade & Industry (DTI)
7.	Funeral Homes/Parlor	Training Certificate and License of Undertaker and Embalmer	Department of Health
8.	General/Specialty and Engineering Contractor	Contractor's License	Philippine Contractors Accreditation Board
9.	Seller/Distributor of Forest Products Sash Factories Lumber Dealers Hardware Wood Processing Plants	Lumber Dealer Permit Certification from DENR of the Legal Source	DENR-PENRO DENR
10.	 Hotel Resort Apartment Hotel Tourist Inns Pension Houses Bed and Breakfast Home Stay 	Accreditation/ Registration	Department of Tourism





	 Travel and Tour Agency Travel Agency Tour Operator Online Travel Agency Tourist Transport Operators MICE (Meeting, Incentives, Conventions and Exhibitions) Organizer MICE Facility Venue Tour Guide Adventure/Sports and Ecotourism Facilities 		
11.	 Lending Institutions Pawnshops Remittance Centers Money Changers 	Certificate of Authority to Operate	Bangko Sentral ng Pilipinas
12.	LPG Dealer/Retailer	Standard Compliance Cert. (SCC)	Department of Energy
13.	 Manning and Crewing Services Employment/Recruitment/Manpower 	Registration/License	Phil. Overseas and Employment Agency (Overseas) Department of Labor and Employment (Local)
14.	Massage Parlor	Registration	TESDA, DOH Certificate
15.	Messengerial/Courier Services	Registration	Department of Transportation and Communication (DOTC)
16.	Pet Shop	Registration	Bureau of Animal Industry (BAI)
17.	Pest Control	License	Fertilizer and Pesticide Authority
18.	 Pre-School Elementary High School 	Permit to Operate	Department of Education Division Office and Regional Office
19.	Real Estate Broker	License	Department of Trade and Industry or Professional Regulatory Board
20.	Rent-a-CarTransportation Services	Franchise/Certificate of Public Conveyance	Land Transportation Franchising and Regulatory Board





Trucking					
21. • Security Agency		lational License, License to Operate	PCSL	JCIA, PNP (Campo Cram	ne)
22. • Spa • Massage Clinic		Certificate of Training of Therapis r Masseur/Masseuse	t Depai	rtment of Health and TES	SDA
23. • Telecommunication	ons Firm Lic	icense to Operate	Natior	nal Telecommunications	Commission (NTC)
24. • Water Station	Pe	Permit	Depai	rtment of Health (DOH)	
25. • Video Rental Serv	r ices Re	Registration/Permit	Optica	al Media Board	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PA	ID	PROCESSING TIME	PERSON RESPONSIBL
1. Submit the complete requirements . . 2. Pay the required fee(s) and tax (es) . .	1. Assess the requirements issue the Business Tax Orde Payment (Assessment Form) 2. Receive the payment. Pass Business Tax Order of Payn (Assessment Form), O.R., CT BFP personnel for Fire Inspe- Fee payment, then to San Inspector for Sanitary Permit	der of) ss the yment TC, to ection anitary Zoning Fee - Based of Establishment Building Inspection F Based on Type of St Garbage Fee -Based of Establishment Environmental	Receipts - Based on Type Fee - ructure	20 minutes 10 minutes	Mary Grace Basa; Regina Camaclang; Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez City Treasurer's Office assigned personnel

CITIZEN'S CHARTER

loto:	TOTAL	Based on computation	1 hour	
		lient Satisfaction Rating Form		
Certificate, and Sanitary Permit	Certificate, and Sanitary Permit			Richard Villanueva; Zecel Secretario
· · · · · · · · · · · · · · · · · · ·	Plate/Sticker, Mayor's Permit			Melani Unawa;
	Official Receipts, CTC, Business			Felizardo San Jose, Jr.;
Payment (Assessment Form) with	Payment (Assessment Form) with			Luisito Dominguez;
3. Claim the Business Tax Order of	3. Issue the Business Tax Order of	None	30 minutes	Norman Angeles;
		133 S. 2019)		
		(Refer to City Ordinance No. 04-		
		 Documentary Stamp Tax = ₱ 30.00 		
		 Documentary Stamp Tax – 		
		 Security Seal Sticker – ₱ 80.00 		
		Business Plate - ₱ 200.00		
		excluding business tax.		
		% of total assessment		
		• Fire Safety Inspection Fee - 15		
		Establishment		
		 Sanitary Inspection Fee - Based on Type of 		

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00
Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00







Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b.) On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00

(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00

Business Tax

A. On manufacturers, assemblers, re-packers, processors, brewers, distillers, rectifiers, and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature. In accordance with the following schedule:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,742.00
75,000.00 or more but less than 100,000.00	2,178.00
100,000.00 or more but less than 150,000.00	2,904.00
150,000.00 or more but less than 200,000.00	3,630.00
200,000.00 or more but less than 300,000.00	5,082.00
300,000.00 or more but less than 500,000.00	6,655.00
500,000.00 or more but less than 750,000.00	10,560.00

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750,000.00 or more but less than 1,000,000.00	13,200.00
1,000,000.00 or more but less than 2,000,000.00	18,150.00
2,000,000.00 or more but less than 3,000,000.00	22,143.00
3,000,000.00 or more but less than 4,000,000.00	26,136.00
4,000,000.00 or more but less than 5,000,000.00	30,492.00
5,000,000.00 or more but less than 6,500,000.00	32,175.00
6,500,000.00 or more	32,175.00 plus 49.5% of 1% over P6.5million

The preceding rates shall apply only to the amount of domestic sales of manufacturers, assemblers, re-packers, processors, brewers, distillers, rectifiers and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature other than those enumerated under paragraph (c) of this Section.

B. On wholesalers, distributors, or dealers in any article of commerce of whatever kind or nature in accordance with the following schedules:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00
750,000.00 or more but less than 1,000,000.00	11,616.00
1,000,000.00 or more but less than 2,000,000.00	13,200.00
2,000,000.00 or more	P13,200.00 plus 66% of 1% over P2.0 million

The businesses enumerated in paragraph (a) above shall no longer be subject to the tax on wholesalers, distributors, or dealers herein provided for.

However, barangays shall have the exclusive power to levy taxes on stores whose gross sales or receipts of the preceding calendar year does not exceed Fifty Thousand Pesos (P50,000.00) subject to existing laws and regulations

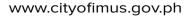
C. On exporters, and on manufacturers, millers, producers, wholesalers, distributors, dealers or retailers of essential commodities enumerated hereunder at a rate not exceeding one-half (1/2) of the rates prescribed under subsections (a), (b), and (d) of this Article;

1. Rice and Corn;

2. Wheat or cassava flour, meat, dairy products, locally manufactured, processed or preserved food, sugar, salt and agricultural marine, and fresh water products, whether in their Original state or not;



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- 3. Cooking oil and cooking gas;
- 4. Laundry soap, detergents, and medicine;
- 5. Agricultural implements, equipment and post-harvest facilities, fertilizers, pesticides, insecticides, herbicides and other farm inputs;
- 6. Poultry feeds and other animal feeds;
- 7. School supplies; and
- 8. Cement

D. On exporters of all articles of commerce of whatever kind or nature not mentioned under subsection (c), in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
Less than 100,000.00	871.00
100,000.00 or more but less than 150,000.00	1,221.00
150,000.00 or more but less than 200,000.00	1,580.00
200,000.00 or more but less than 300,000.00	2,178.00
300,000.00 or more but less than 500,000.00	2,904.00
500,000.00 or more but less than 750,000.00	4,345.00
750,000.00 or more but less than1,000,000.00	5,749.70
1,000,000.00 or more but less than 2,000,000.00	6,534.00
2,000,000.00 or more	P6,534.00 plus 32.45% of 1% over P2.0 million

For purposes of this provision, the term *exporters* shall refer to those who are principally engaged in the business of exporting goods and merchandise, as well as manufacturers and producers whose goods or products are both sold domestically and abroad. The amount of export sales shall be excluded from the total sales and shall be subject to the rates not exceeding one half (1/2) of the rates prescribed under paragraphs (a), (b), and (d) of this Article. E. On **contractors and other independent contractors** in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,161.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00





400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	15,180.00 plus 66% of 1% over P2.0 million

Provided that in no case shall the tax on gross receipts of P2, 000,000.00 or more be less than P15, 180.00.

F. On **banks and other financial institutions**, at the rate of seven five percent of one percent (75% of 1%) of the gross receipts of the preceding calendar year derived from interest, commissions and discounts from lending activities, income from financial leasing, dividends, rentals on property, and profit from exchange or sale of property, insurance premium. All other income and receipts not herein enumerated shall be excluded in the computation of the tax

G. On operators of theaters and cinema houses, video-movie houses utilizing laser disc players, projectors and of similar apparatus, and other entertainment sites in the internet and other show houses which are open to public for a fee:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,560.00
75,000.00 or more but less than 100,000.00	2,335.00
100,000.00 or more but less than 150,000.00	3,269.00
150,000.00 or more but less than 200,000.00	4,295.00
200,000.00 or more but less than 250,000.00	5,493.00
250,000.00 or more but less than 300,000.00	7,296.00
300,000.00 or more but less than 400,000.00	9,837.00
400,000.00 or more but less than 500,000.00	10,175.00
500,000.00 or more but less than 750,000.00	11,275.00
750,000.00 or more but less than 1,000,000.00	12,650.00
1,000,000.00 or more but less than 2,000,000.00	13,915.00
2,000,000.00 or more	P 13,915.00 plus 66% of 1% over P2.0 million

H. On lessors of real estate including apartments and boarding houses:

Gross Sales/Receipts For th Calendar Year	e Preceding		Tax Per Annum
50,000.00 or more but less than 6	0,000.00	1,210.00	
60,000.00 or more but less than 70	0,000.00	1,548.00	
70,000.00 or more but less than 8	0,000.00	1,839.00	

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80,000.00 or more but less than 90,000.00	2,153.00
90,000.00 or more but less than 100,000.00	2,468.00
100,000.00 or more but less than 150,000.00	3,061.00
150,000.00 or more but less than 200,000.00	4,138.00
200,000.00 or more but less than 300,000.00	5,517.00
300,000.00 or more but less than 500,000.00	8,167.00
500,000.00 or more but less than 750,000.00	13,722.00
750,000.00 or more but less than 1,000,000.00	19,882.00
1,000,000.00 or more but less than 2,000,000.00	21,780.00
2,000,000.00 or more	P21,780.00 plus 66% of 1% over P2.0 million

I. On the businesses hereunder enumerated:

- 1. Commission agents;
- 2. Lessors, dealers, brokers of real estate;
- 3. On travel agencies and travel agents;
- 4. On boarding houses, pension houses, motels, apartments, apartelles, and condominiums;
- 5. Subdivision owners/developers, Private Cemeteries and Memorial Parks owners/developers;
- 6. Privately-owned markets;
- 7. Hospitals, medical clinics, dental clinics, therapeutic clinics, medical laboratories, dental laboratories;
- 8. Operators of Cable Network System;
- 9. General consultancy services;
- 10. Warehouses
- 11. On line businesses that offers services
- 12. All other similar activities consisting essentially of the sales of services for a fee.

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum	
50,000.00 or more but less than 75,000.00	1,161.00	
75,000.00 or more but less than 100,000.00	1,742.00	
100,000.00 or more but less than 150,000.00	2,613.00	
150,000.00 or more but less than 200,000.00	3,484.00	
200,000.00 or more but less than 250,000.00	4,791.00	
250,000.00 or more but less than 300,000.00	6,098.00	
300,000.00 or more but less than 400,000.00	8,131.00	
400,000.00 or more but less than 500,000.00	10,890.00	
500,000.00 or more but less than 750,000.00	12,210,00	

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750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	P15,180.00 plus 66% of 1% over P2.0 million
2,000,000.00 or more	

Provided, that in no case shall the tax on gross sales of P2, 000,000.00 or more be less than P15, 180.00.

J. On retailers with gross receipts or sales for the preceding year in the amount of:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum	
50,000.00 or more but less than 75,000.00	1,306.00	
75,000.00 or more but less than 100,000.00	1,742.00	
100,000.00 or more but less than 150,000.00	2,468.00	
150,000.00 or more but less than 200,000.00	3,194.00	
200,000.00 or more but less than 300,000.00	4,345.00	
300,000.00 or more but less than 500,000.00	5,416.00	
500,000.00 or more but less than 750,000.00	8,712.00	
750,000.00 or more but less than 1,000.000.00	11,616.00	
1,000,000.00 or more but less than 100,000,000.00	11,616.00 plus 66% of 1% over P1.0 million but less than P100 million	
100,000,000.00 or more but less than 500,000,000.00	665,016.00 plus 1.10% over P100 million but less than P500 million	
500,000,000.00 or more	P5,065,016.00 plus 82.5% of 1% over P500 million	

K. On retailers classified as sari-sari store with gross sales or receipts for the preceding year in the amount of:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,188.00
75,000.00 or more but less than 100,000.00	1,584.00
100,000.00 or more but less than 150,000.00	2,244.00
150,000.00 or more but less than 200,000.00	2,904.00
200,000.00 or more but less than 300,000.00	3,950.00
300,000.00 or more but less than 500,000.00	4,924.00
500,000.00 or more but less than 750,000.00	7,920.00
750,000.00 or more but less than 1,000.000.00	10,560.00
1,000,000.00 or more but less than 2,000,000.00	P10,560.00 plus 60% of 1% over P1.0 million







L. On **Authorized Franchise Car Dealers** engaged in business of selling brand new vehicles and genuine parts pursuant to a valid and existing Franchise Agreement with legitimate manufacturers and distributors shall be taxed at the rate of 50% of 1% of gross receipts up to P 2,000,000.00 and 45% of 1% of gross receipts in excess of P 2,000,000.00.

M. On **restaurants and other eating establishments** such as, but not limited to cafes, cafeterias, ice cream or refreshment parlors, carinderias, soda fountains, food caterers, fast food centers and snack counters shall be taxed at the rate of 1.75% of the gross receipts of the preceding calendar year.

N. On operators engaged in amusement devices and computer shop shall be taxed at the rate of Two Hundred Pesos (P200.00) per amusement device.

O. On peddlers engaged in the sale of any merchandise or article of commerce, at the rate of Sixty Six Pesos (P66.00) per peddler annually. Delivery trucks, vans or vehicles used by manufacturers, producers, wholesalers, dealers or retailers enumerated under Section 141 of R.A. 7160 shall be exempt: from the peddlers' tax herein imposed.

The tax herein imposed shall be payable within the first twenty (20) days of January. An individual who will start to peddle merchandise or articles of commerce after January 20 shall pay the full amount of the tax before engaging in such activity.

P. On operators of public utility vehicles maintaining booking office, terminal, or waiting station for the purpose of carrying passengers from this city under a certificate of public convenience and necessity or similar franchises:

Air-conditioned buses	P 6,000.00 per unit
Buses without air conditioning	5,000.00 per unit
"Mini" buses	4,000.00 per unit
Utility Vehicles/Vans/Fieras/Tamaraws	1,500.00 per unit
Taxis/Grab and the like	1,000.00 per unit
Jeepneys	800.00 per unit
Multi-Cabs	800.00 per unit
Tricycles (5 or more units)	100.00 per unit







4. RENEWAL OF BUSINESS/MAYOR'S PERMIT (ONLINE – ASSESSMENT)

Business Permit must be renewed from January 1 to 20, every year. Penalties are imposed after this period. Those for succeeding years are computed as a percentage of gross receipts/sales. Payments may be made annually, semi-annually or quarterly. Taxes are due on the first 20 days of each quarter.

	sis receipts/sales. I ayments may be made annually, semi-annually of quarterly. Taxes are due on the first 20 days of each quarter.		
	Business Permits and Licensing Office		
	Simple		
TYPE OF TRANSACTION	G2B – Government to Business		
	VAIL THE SERVICE All proprietors with existing business in the City of Imus		
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE	
	•	From the accountant of the business or from the owner of the business	
/Financial Statements /Income Tax	Returns		
1 Copy – Original or Photocopy			
OTHER REQUIREMENTS THAT MA	Y BE NEEDED:		
Barangay Resolution -1 Photocopy		From Barangay Hall where the business is located	
Market Clearance		From the Economic Enterprise Management Office (EEMO) located at Imus Public	
for business is located in public marke	et-Original and 1 Photocopy	Market	
Clearance for meat retailer, poultry	and pet supplies retailer -	From City Veterinary Office	
Original			
Annual Report to DHSUD (received	/stamped) for Homeowners'	From DHSUD	
Association - Original	· /		
Written Authorization Letter /Secretary's Certificate/Partnership		From the owner of the business	
Certificate with I.D.s from owner an			
Representative)1 Photocopy			
Approval from the City Mayor - Orig	ginal	From Office of the City Mayor	
Letter of No Objection – Original		From Office of the City Mayor	
Affidavit of Sworn Declaration of al			
tenants listed therein FOR LESSOF	R- Original		
Latest Result of Microbiological Ex		From Water Testing Laboratory	
ESTABLISHMENT & WATER STATI	0		
Latest Result of Physico-Chemical		From Water Testing Laboratory	
FOOD ESTABLISHMENT & WATER	0		
Health Certificate of Staff FOR FOOD ESTABLISHMENT, WATER		From City Health Office	
STATION, SALON, AND SPA – Origi			
Urinalysis (1-month validity) - Original Fecalysis (1-month validity) - Original		From Department of Health (DOH)Accredited Laboratory From Department of Health (DOH)Accredited Laboratory	
	•		

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Chest X-Ray (6 months validity) - Original	From Department of Health (DOH)Accredited Laboratory	
Drug Test (1-year validity) - Original	From Department of Health (DOH)Accredited Laboratory	
Pest/Vermin Control FOR FOOD ESTABLISHMENT, FASTFOOD	From any legitimate Pest Control establishments	
CHAIN, SUPERMARKET – Original		
DTI, if Sole Proprietorship (2 Copies - 1 Original, 1 Photocopy)	https://bnrs.dti.gov.ph/registration, Imus Satellite Office – The District Mall, City of Imus,	
IF EXPIRED	Any DTI Office	
SEC Registration, if Partnership or Corporation (2 Copies	https://crs.sec.gov.ph/; Secretariat Building, PICC Complex, Roxas Boulevard, Metro	
COMPLETE SET - 1 Original, 1 Photocopy) IF EXPIRED	Manila Philippines	
CDA, if Cooperative (2 Copies - 1 Original, 1 Photocopy)	https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827	
IF EXPIRED	Aurora Blvd., Immaculate Conception, Quezon City.	

Certificate of Registration/Accreditation/ License from NATIONAL AGENCY

-Original and 1 Photocopy

	LINE OF BUSINESS	PERMIT/CLEARANCE NEEDED	FROM NATIONAL GOVERNMENT AGENCY
1.	Animal Facilities	Certificate of Registration	Bureau of Animal Industry
2.	Cargo/Freight Forwarders Logistics	Accreditation	Philippine Shippers Bureau/Fair Trade Enforcement Bureau (FTEB)
3.	Customs Brokerage Business	License	Customs Brokerage Commission/ Bureau of Customs License
4.	Dealer of Rice, Corn, and Wheat	License	National Food Authority
5.	 Drugstores Household/Urban Pesticides Medical Devices Processed Foods Veterinary Products Cosmetic Products Childcare Articles Toys 	License to Operate; Certificate of Product Registration; PRC License for Pharmacist (Drugstore) License to Operate	Food and Drug Administration (FDA), Professional Regulation Commission (PRC) Bureau of Health Device & Technology-DOH
6.	Electronic Repair Shop: Electrical Air-Conditioning Refrigeration Office Equipment 	Accreditation	Department of Trade & Industry (DTI)

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	 Medical Equipment Dental Equipment Other Consumer Industrial Electromechanical, Chemical and Gaseous Equipment Machinery appliances or devices Motor Vehicle Repair Shop Heavy Equipment Engines Engineering Works 		
7.	Funeral Homes/Parlor	Training Certificate and License of Undertaker and Embalmer	Department of Health
8.	General/Specialty and Engineering Contractor	Contractor's License	Philippine Contractors Accreditation Board
9.	 Seller/Distributor of Forest Products Sash Factories Lumber Dealers Hardware Wood Processing Plants 	Lumber Dealer Permit Certification from DENR of the Legal Source	DENR-PENRO DENR
10.	 Hotel Resort Apartment Hotel Tourist Inns Pension Houses Bed and Breakfast Home Stay Travel and Tour Agency Travel Agency Tour Operator Online Travel Agency Tourist Transport Operators MICE (Meeting, Incentives, Conventions and Exhibitions) Organizer 	Accreditation/ Registration	Department of Tourism

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	 Tour Guide Adventure/Sports and Ecotourism Facilities 		
11.	 Lending Institutions Pawnshops Remittance Centers Money Changers 	Certificate of Authority to Operate	Bangko Sentral ng Pilipinas
12.	LPG Dealer/Retailer	Standard Compliance Cert. (SCC)	Department of Energy
13.	 Manning and Crewing Services Employment/Recruitment/Manpower 	Registration/License	Phil. Overseas and Employment Agency (Overseas) Department of Labor and Employment (Local)
14.	Massage Parlor	Registration	TESDA, DOH Certificate
15.	Messengerial/Courier Services	Registration	Department of Transportation and Communication (DOTC)
16.	Pet Shop	Registration	Bureau of Animal Industry (BAI)
17.	Pest Control	License	Fertilizer and Pesticide Authority
18.	 Pre-School Elementary High School 	Permit to Operate	Department of Education Division Office and Regional Office
19.	Real Estate Broker	License	Department of Trade and Industry or Professional Regulatory Board
20.	 Rent-a-Car Transportation Services Trucking 	Franchise/Certificate of Public Conveyance	Land Transportation Franchising and Regulatory Board
21.	Security Agency	National License, License to Operate	PCSUCIA, PNP (Campo Crame)
22.	SpaMassage Clinic	Certificate of Training of Therapist or Masseur/Masseuse	Department of Health and TESDA
23.	Telecommunications Firm	License to Operate	National Telecommunications Commission (NTC)





24. • Water Station		Permit		Depa	rtment of Health (DOH)	
25. • Video Rental Serv	vices	Registra	tion/Permit	Optic	al Media Board	
CLIENT STEPS	AGENCY ACTION		FEES TO BE PAID	<u> </u>	PROCESSING TIME	PERSON RESPONSIBLE
1. Register to https://egovcityofimus.ph/bpl/ 1.1 Sign in using your email address or mobile number 1.2 Link the business to your account 1.3 Fill-out the Online Application Form 1.4 Attach the complete requirements 1.5 A notification will be sent to your mobile no./email for the Business Tax Order of Payment	 Evaluate and appro- linking of account Assess the requirement issue the Business Tax of Payment (Assessment For 	nts and Order of	None		30 minutes (time may vary on the speed of the internet connection) (stop time) Business Application will be accommodated between 8:00AM to 5:00PM only	Mary Grace Basa; Regina Camaclang; Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez
 (Assessment Form) 2. Pay the required fee(s) and tax(es) thru: Link.bizPortal (www.landbank.com and click on Link.bizPortal) Starpay (www.starpay.com.ph or download the app Starpay) Gcash (www.gcash.com or download the app Gcash) 	2. Receive the payment		 Mayor's Permit Fee Zoning Fee - Based on T of Establishment Building Inspection Fee Based on Type of Structu Garbage Fee -Based on of Establishment Environmental Protection Fee-Based on Type of Establishment Sanitary Inspection Fee Based on Type of Establishment Fire Safety Inspection Fee 15 % of total assessment excluding business tax Business Plate - ₱ 200.0 	- Type Type - -	2 days for posting of payment (3 rd party provider)	City Treasurer's Office assigned personnel

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	TOTAL	Based on computation	2 days and 1 hour	
		lient Satisfaction Rating Form		
Certificate, and Sanitary Permit				
Plate/Sticker, Mayor's Permit				
Receipts, CTC, Business				Zecel Secretario
(Assessment Form) with Official	Certificate, and Sanitary Permit			Richard Villanueva;
Business Tax Order of Payment	Plate/Sticker, Mayor's Permit			Melani Unawa;
Inspection Fee and claim the	Official Receipts, CTC, Business			Felizardo San Jose, Jr.;
Shop (BOSS) to pay the Fire	Payment (Assessment Form) with			Luisito Dominguez;
3. Visit the Business One-Stop	3. Issue the Business Tax Order of	None	30 minutes	Norman Angeles;
		₱ 30.00		
		 Documentary Stamp Tax – 		
		80.00		
		 Security Seal Sticker – ₱ 		

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

Mayor's Permit Fee

A. On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

Asset Size	Amount
P 10,000.00 and below	150.00
Over P 10,000.00 to P 30,000.00	225.00
Over P 30,000.00 to P 50,000.00	300.00
Over P 50,000.00 to P 75,000.00	375.00
Over P 75,000.00 to P 100,000.00	450.00
Over P 100,000.00 to P 200,000.00	525.00
Over P 200,000.00 to P 350,000.00	600.00
Over P 350,000.00 to P 500,000.00	700.00
Over P 500,000.00 to P 750,000.00	800.00
Over P 750,000.00 to P 850,000.00	1,000.00
Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 1,000,000.00 to P 3,000,000.00	5,000.00

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Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 30,000,000.00	60,000.00

B. On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00

C. On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00

Business Tax

A. On manufacturers, assemblers, re-packers, processors, brewers, distillers, rectifiers, and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature. In accordance with the following schedule:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,742.00
75,000.00 or more but less than 100,000.00	2,178.00
S CHADTED	

100,000.00 or more but less than 150,000.00	2,904.00
150,000.00 or more but less than 200,000.00	3,630.00
200,000.00 or more but less than 300,000.00	5,082.00
300,000.00 or more but less than 500,000.00	6,655.00
500,000.00 or more but less than 750,000.00	10,560.00
750,000.00 or more but less than 1,000,000.00	13,200.00
1,000,000.00 or more but less than 2,000,000.00	18,150.00
2,000,000.00 or more but less than 3,000,000.00	22,143.00
3,000,000.00 or more but less than 4,000,000.00	26,136.00
4,000,000.00 or more but less than 5,000,000.00	30,492.00
5,000,000.00 or more but less than 6,500,000.00	32,175.00
6,500,000.00 or more	32,175.00 plus 49.5% of 1% over P6.5million

The preceding rates shall apply only to the amount of domestic sales of manufacturers, assemblers, re-packers, processors, brewers, distillers, rectifiers and compounders of liquors, distilled spirits, and wines or manufacturers of any article of commerce of whatever kind or nature other than those enumerated under paragraph (c) of this Section.

B. On wholesalers, distributors, or dealers in any article of commerce of whatever kind or nature in accordance with the following schedules:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00
750,000.00 or more but less than 1,000,000.00	11,616.00
1,000,000.00 or more but less than 2,000,000.00	13,200.00
2,000,000.00 or more	P13,200.00 plus 66% of 1% over P2.0 million

The businesses enumerated in paragraph (a) above shall no longer be subject to the tax on wholesalers, distributors, or dealers herein provided for. However, barangays shall have the exclusive power to levy taxes on stores whose gross sales or receipts of the preceding calendar year does not exceed Fifty Thousand Pesos (P50,000.00) subject to existing laws and regulations





C. On exporters, and on manufacturers, millers, producers, wholesalers, distributors, dealers or retailers of essential commodities enumerated hereunder at a rate not exceeding one-half (1/2) of the rates prescribed under subsections (a), (b), and (d) of this Article;

- 1. Rice and Corn;
- 2. Wheat or cassava flour, meat, dairy products, locally manufactured, processed or preserved food, sugar, salt and agricultural marine, and fresh water products, whether in their Original state or not;
- 3. Cooking oil and cooking gas;
- 4. Laundry soap, detergents, and medicine;
- 5. Agricultural implements, equipment and post-harvest facilities, fertilizers, pesticides, insecticides, herbicides and other farm inputs;
- 6. Poultry feeds and other animal feeds;
- 7. School supplies; and
- 8. Cement

D. On exporters of all articles of commerce of whatever kind or nature not mentioned under subsection (c), in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
Less than 100,000.00	871.00
100,000.00 or more but less than 150,000.00	1,221.00
150,000.00 or more but less than 200,000.00	1,580.00
200,000.00 or more but less than 300,000.00	2,178.00
300,000.00 or more but less than 500,000.00	2,904.00
500,000.00 or more but less than 750,000.00	4,345.00
750,000.00 or more but less than1,000,000.00	5,749.70
1,000,000.00 or more but less than 2,000,000.00	6,534.00
2,000,000.00 or more	P6,534.00 plus 32.45% of 1% over P2.0 million

For purposes of this provision, the term *exporters* shall refer to those who are principally engaged in the business of exporting goods and merchandise, as well as manufacturers and producers whose goods or products are both sold domestically and abroad. The amount of export sales shall be excluded from the total sales and shall be subject to the rates not exceeding one half (1/2) of the rates prescribed under paragraphs (a), (b), and (d) of this Article.

E. On contractors and other independent contractors in accordance with the following schedule:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum	
50,000.00 or more but less than 75,000.00	1,161.00	
75,000.00 or more but less than 100,000.00	1,742,00	



100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00
400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	15,180.00 plus 66% of 1% over P2.0 million

Provided that in no case shall the tax on gross receipts of P2, 000,000.00 or more be less than P15, 180.00.

F. On **banks and other financial institutions**, at the rate of seven five percent of one percent (75% of 1%) of the gross receipts of the preceding calendar year derived from interest, commissions and discounts from lending activities, income from financial leasing, dividends, rentals on property, and profit from exchange or sale of property, insurance premium. All other income and receipts not herein enumerated shall be excluded in the computation of the tax

G. On operators of theaters and cinema houses, video-movie houses utilizing laser disc players, projectors and of similar apparatus, and other entertainment sites in the internet and other show houses which are open to public for a fee:

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,560.00
75,000.00 or more but less than 100,000.00	2,335.00
100,000.00 or more but less than 150,000.00	3,269.00
150,000.00 or more but less than 200,000.00	4,295.00
200,000.00 or more but less than 250,000.00	5,493.00
250,000.00 or more but less than 300,000.00	7,296.00
300,000.00 or more but less than 400,000.00	9,837.00
400,000.00 or more but less than 500,000.00	10,175.00
500,000.00 or more but less than 750,000.00	11,275.00
750,000.00 or more but less than 1,000,000.00	12,650.00
1,000,000.00 or more but less than 2,000,000.00	13,915.00
2,000,000.00 or more	P 13,915.00 plus 66% of 1% over P2.0 million

H. On **lessors of real estate** including apartments and boarding houses:







Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum	
50,000.00 or more but less than 60,000.00	1,210.00	
60,000.00 or more but less than 70,000.00	1,548.00	
70,000.00 or more but less than 80,000.00	1,839.00	
80,000.00 or more but less than 90,000.00	2,153.00	
90,000.00 or more but less than 100,000.00	2,468.00	
100,000.00 or more but less than 150,000.00	3,061.00	
150,000.00 or more but less than 200,000.00	4,138.00	
200,000.00 or more but less than 300,000.00	5,517.00	
300,000.00 or more but less than 500,000.00	8,167.00	
500,000.00 or more but less than 750,000.00	13,722.00	
750,000.00 or more but less than 1,000,000.00	19,882.00	
1,000,000.00 or more but less than 2,000,000.00	21,780.00	
2,000,000.00 or more	P21,780.00 plus 66% of 1% over P2.0 million	

I. On the businesses hereunder enumerated:

- 1. Commission agents;
- 2. Lessors, dealers, brokers of real estate;
- 3. On travel agencies and travel agents;
- 4. On boarding houses, pension houses, motels, apartments, apartelles, and condominiums;
- 5. Subdivision owners/developers, Private Cemeteries and Memorial Parks owners/developers;
- 6. Privately-owned markets;
- 7. Hospitals, medical clinics, dental clinics, therapeutic clinics, medical laboratories, dental laboratories;
- 8. Operators of Cable Network System;
- 9. General consultancy services;
- 10. Warehouses
- 11. On line businesses that offers services
- 12. All other similar activities consisting essentially of the sales of services for a fee.

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,161.00
75,000.00 or more but less than 100,000.00	1,742.00





100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00
400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	P15,180.00 plus 66% of 1% over P2.0 million

Provided, that in no case shall the tax on gross sales of P2, 000,000.00 or more be less than P15, 180.00.

J. On retailers with gross receipts or sales for the preceding year in the amount of:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00
750,000.00 or more but less than 1,000.000.00	11,616.00
1,000,000.00 or more but less than 100,000,000.00	11,616.00 plus 66% of 1% over P1.0 million but less than P100 million
100,000,000.00 or more but less than 500,000,000.00	665,016.00 plus 1.10% over P100 million but less than P500 million
500,000,000.00 or more	P5,065,016.00 plus 82.5% of 1% over P500 million

K. On retailers classified as sari-sari store with gross sales or receipts for the preceding year in the amount of:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,188.00
75,000.00 or more but less than 100,000.00	1,584.00



100,000.00 or more but less than 150,000.00	2,244.00
150,000.00 or more but less than 200,000.00	2,904.00
200,000.00 or more but less than 300,000.00	3,950.00
300,000.00 or more but less than 500,000.00	4,924.00
500,000.00 or more but less than 750,000.00	7,920.00
750,000.00 or more but less than 1,000.000.00	10,560.00
1,000,000.00 or more but less than 2,000,000.00	P10,560.00 plus 60% of 1% over P1.0 million

L. On **Authorized Franchise Car Dealers** engaged in business of selling brand new vehicles and genuine parts pursuant to a valid and existing Franchise Agreement with legitimate manufacturers and distributors shall be taxed at the rate of 50% of 1% of gross receipts up to P 2,000,000.00 and 45% of 1% of gross receipts in excess of P 2,000,000.00.

M. On **restaurants and other eating establishments** such as, but not limited to cafes, cafeterias, ice cream or refreshment parlors, carinderias, soda fountains, food caterers, fast food centers and snack counters shall be taxed at the rate of 1.75% of the gross receipts of the preceding calendar year.

N. On operators engaged in amusement devices and computer shop shall be taxed at the rate of Two Hundred Pesos (P200.00) per amusement device.

O. On peddlers engaged in the sale of any merchandise or article of commerce, at the rate of Sixty-six Pesos (P66.00) per peddler annually.

Delivery trucks, vans or vehicles used by manufacturers, producers, wholesalers, dealers or retailers enumerated under Section 141 of R.A. 7160 shall be exempt: from the peddlers' tax herein imposed.

The tax herein imposed shall be payable within the first twenty (20) days of January. An individual who will start to peddle merchandise or articles of commerce after January 20 shall pay the full amount of the tax before engaging in such activity.

P. On operators of public utility vehicles maintaining booking office, terminal, or waiting station for the purpose of carrying passengers from this city under a certificate of public convenience and necessity or similar franchises:

IMUS

Air-conditioned buses	P 6,000.00 per unit
Buses without air conditioning	5,000.00 per unit
"Mini" buses	4,000.00 per unit
Utility Vehicles/Vans/Fieras/Tamaraws	1,500.00 per unit
Taxis/Grab and the like	1,000.00 per unit
Jeepneys	800.00 per unit
Multi-Cabs	800.00 per unit
Tricycles (5 or more units)	100.00 per unit

CITIZEN'S CHARTER



5. CHANGE ADDRESS OF BUSINESS (WITHIN CITY OF IMUS) IN BUSINESS/MAYOR'S PERMIT (ON-SITE) All enterprises that changed its status are required to amend its Business/Mayor's Permit for transfer/change address.

OFFICE OR DIVISION Business Permits and Licensing Office CLASSIFICATION Simple TYPE OF TRANSACTION G2B – Government to Business WHO MAY AVAIL THE SERVICE All proprietors with new business in the City of Imus CHECKLIST OF REQUIREMENTS WHERE TO SE	
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WHO MAY AVAIL THE SERVICE All proprietors with new business in the City of Imus CHECKLIST OF REQUIREMENTS WHERE TO SE	
CHECKLIST OF REQUIREMENTS WHERE TO SE	
	CURE
Please fill-out the Business Permit Application Form/Unified	
Form (provided by BPLO) and submit together with the Business One-Stop Shop (BOSS), https://cityofim	us.gov.ph
following requirements:	
Latest Business Tax Order of Payment (Assessment Form) – From the owner of the business (previously issue	d by BPLO to the owner)
Original	
Latest Business Permit Certificate (Diploma) – Original From the owner of the business (previously issue	d by BPLO to the owner)
Proof of right of applicant to use location as business address From the owner of the business place	
-Certified True Copy of Original Certificate Title (OCT)/ Certified	
True Copy of Transfer Certificate of Title (TCT)/	
Tax Declaration/- 1 Original (if owned)	
-Notarized Deed of Sale (if owned)- Original and 1 Photocopy-	
complete set	
-Notarized Contract to Sell (if under amortization) -Original and 1	
Photocopy-complete set	
-Notarized Contract of Lease and Lessor's Business Permit (if	
renting)- Original and 1 Photocopy-complete set -Notarized Memorandum of Agreement/ Notarized written consent	
of property owner (if not owned, not renting) -Original and 1	
Photocopy-complete set	
- Death Certificate, Extrajudicial Settlement/Last Will and	
Testament/Affidavit of Self-Adjudication (if the title owner is	
deceased)- Original and 1 Photocopy-complete set	
-Notarized Consent of other title owner (if the business owner is	
one of the title owner)-Original	
-Secretary's Certificate (if title is single owned-for Corporation), -	
Original	
-Certificate of Award Notice from NHA (if without title but with	
Tax Declaration) Original and 1 Photocopy	

CITIZEN'S CHARTER





www.cityofimus.gov.ph

tenants listed the	orn Declaration of all erein- Original (if les	real properties for rent with sor)				
Location plan o	or sketch of the loca (front, right, left side	ation with picture of view including the road, and	From the owner of the business			
	REMENTS THAT M	AY BE NEEDED:				
Barangay Resolution - 1 Photocopy		From Barangay Hall where the business is located				
Homeowner's Association Resolution (HOA) endorsing the project or business, if the location of the business is within a Residential Subdivision-Original and 1 Photocopy		From Homeowner's Association of the Subdivision where the business is located				
		Receipt - Original and 1	From the Land Tax Office (Official Rec	ceipt of Real Property Tax	x-Amilyar)	
Market Clearand for business is Photocopy		narket -Original and 1	From the Economic Enterprise Manag	From the Economic Enterprise Management Office (EEMO) located at Imus Public Market		
Certificate/Parti		etary's with I.D.s from owner and	From the owner of the business			
authorized repr	resentative-(if Repr	esentative)1 Photocopy				
•	resentative-(if Repr	esentative)1 Photocopy AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
•	· ·	, .,	FEES TO BE PAID None	PROCESSING TIME 10 minutes	PERSON RESPONSIBLE Mary Grace Basa; Regina Camaclang; Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez	

CITIZEN'S CHARTER



3. Claim the Business Tax Order of Payment (Assessment Form) with Official Receipt, Mayor's Permit Certificate	Order of Payment (Assessment Form) with Official Receipt, Mayor's	None	10 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa;
	Permit Certificate			Richard Villanueva; Zecel Secretario
	Fill-out th	e Client Satisfaction Rating Form		
	TOTAL	Based on computation	30 minutes	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

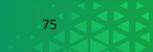
Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00
Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b.) On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00







(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00

6. CHANGE BUSINESS NAME IN BUSINESS/MAYOR'S PERMIT

All enterprises that changed its status are required to amend its Business/Mayor's Permit for change of business name.

OFFICE OR DIVISION	Business Permits and Licensing Office		
CLASSIFICATION	Simple		
TYPE OF TRANSACTION	G2B – Government to Business		
WHO MAY AVAIL THE SERVICE	All proprietors with new busine	ess in the City of Imus	
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE	
Please fill-out the Business Permit Application Form/Unified Form (provided by BPLO) and submit together with the following requirements:		Business One-Stop Shop (BOSS), <u>https://cityofimus.gov.ph</u>	
Latest Business Tax Order of Payı Original	ment (Assessment Form) -	From the owner of the business (previously issued by BPLO to the owner)	
Latest Business Permit Certificate	(Diploma) - Original	From the owner of the business (previously issued by BPLO to the owner)	
Proof of Registration -DTI, if Sole Proprietorship – should be same owner 2 Copies - 1 Original, 1 Photocopy or		Business One-Stop Shop (BOSS), https://bnrs.dti.gov.ph/registration, Imus Satellite Office – The District Mall, City of Imus, Any DTI Office	
-SEC Registration, if Partnership or Corporation – should be same incorporators 2 Copies COMPLETE SET - 1 Original, 1 Photocopy or		https://crs.sec.gov.ph/; Secretariat Building, PICC Complex Roxas Boulevard, Metro Manila Philippines	
-CDA, if Cooperative 2 Copies - 1 Original, 1 Photocopy		https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827 Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary cooperatives, this power has been delegated to the Regional or Extension Offices	
Written Authorization Letter / Secretary's Certificate /Partnership Certificate with I.D.s from owner and authorized representative-(if Representative)1 Photocopy		From the owner of the business	

CITIZEN'S CHARTER





CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements	1. Assess the requirements and issue the Business Tax Order of Payment (Assessment Form)	None	10 minutes	Mary Grace Basa; Regina Camaclang; Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez
2. Pay the required fee(s)	2. Receive the payment. Pass the Business Tax Order of Payment (Assessment Form)		10 minutes	City Treasurer's Office assigned personnel
3. Claim the Business Tax Order of Payment (Assessment Form) with Official Receipt, Mayor's Permit Certificate	Order of Payment	None	10 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa; Richard Villanueva; Zecel Secretario
		e Client Satisfaction Rating Form	-	
	TOTAL	Based on computation	30 minutes	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:

Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00





Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b.) On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00

(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00







7. MULTIPLE AMENDMENTS IN BUSINESS/MAYOR'S PERMIT (CHANGE OWNERSHIP/CHANGE BUSINESS NAME/CHANGE ADDRESS-WITHIN CITY OF IMUS); CHANGE OWNERSHIP IN BUSINESS/MAYOR'S PERMIT; CHANGE NATURE OF BUSINESS) - (ON-SITE)

All enterprises that changed its status are required to amend its Business/Mayor's Permit.

OFFICE OR DIVISION	Business Permits and Licensing Office	
CLASSIFICATION	Simple	
TYPE OF TRANSACTION	G2B – Government to Business	
WHO MAY AVAIL THE SERVICE	All proprietors with new busine	ess in the City of Imus
CHECKLIST OF REC	QUIREMENTS	WHERE TO SECURE
Please fill-out the Business Permit		Business One-Stop Shop (BOSS), https://cityofimus.gov.ph
Form (provided by BPLO) and sub	mit together with the	
following requirements:		
Business Retirement Certificate –	1 Photocopy	From the owner of the business (previously issued by City Treasurer's Office)
Proof of Registration		
-DTI, if Sole Proprietorship		Business One-Stop Shop (BOSS), https://bnrs.dti.gov.ph/registration, Imus Satellite Office
2 Copies - 1 Original, 1 Photocopy or	r	 The District Mall, City of Imus, Any DTI Office
SEC Registration if Partnarahin or (Corporation	https://org.gov.ph/: Socretorist Building, BICC Complex
-SEC Registration, if Partnership or 0 2 Copies COMPLETE SET - 1 Origin		https://crs.sec.gov.ph/; Secretariat Building, PICC Complex Roxas Boulevard, Metro Manila Philippines
2 COPIES COMPLETE SET - 1 Origin		https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827
-CDA, if Cooperative		Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary
2 Copies - 1 Original, 1 Photocopy		cooperatives, this power has been delegated to the Regional or Extension Offices
- Housing and Land Use Regulatory	Board (HLURB) Registration /	https://dhsud.gov.ph/services/homeowners-association/;
Department of Human Settlement an		DHSUD Building, Kalayaan Avenue, corner Mayaman Street, Diliman, Quezon City, 1101
(DHSUD) Registration (for Homeowr	•	
Proof of right of applicant to use lo	ocation as business address	From the owner of the business place
-Certified True Copy of Original Certi		·
True Copy of Transfer Certificate of Title (TCT)/		
Tax Declaration/- 1 Original (if owned)		
-Notarized Deed of Sale (if owned)- Original and 1 Photocopy-		
complete set		
-Notarized Contract to Sell (if under amortization) -Original and 1		
Photocopy-complete set		
-Notarized Contract of Lease and Lessor's Business Permit (if		
renting)- Original and 1 Photocopy-c	complete set	





 -Notarized Memorandum of Agreement/ Notarized written consent of property owner (if not owned, not renting) -Original and 1 Photocopy-complete set Death Certificate, Extrajudicial Settlement/Last Will and Testament/Affidavit of Self-Adjudication (if the title owner is deceased)- Original and 1 Photocopy-complete set -Notarized Consent of other title owner (if the business owner is one of the title owner)-Original -Secretary's Certificate (if title is single owned-for Corporation)- 	
Original, -Certificate of Award Notice from NHA (if without title but with Tax Declaration) Original and 1 Photocopy -Affidavit of Sworn Declaration of all real properties for rent with tenants listed therein- Original (if lessor)	
Location plan or sketch of the location with picture of establishment (front, right, left side view including the road, and interior view)-1 Copy-complete set	From the owner of the business
Certificate of Occupancy, if applicable -Original and 1 Photocopy	From the owner of the business/City Building Official Office
OTHER REQUIREMENTS THAT MAY BE NEEDED:	
Barangay Resolution -1 Photocopy	From Barangay Hall where the business is located
Homeowner's Association Resolution (HOA) endorsing the project or business, if the location of the business is within a Residential Subdivision -Original and 1 Photocopy	From Homeowner's Association of the Subdivision where the business is located
-Tax declaration and Updated Tax Receipt - Original and 1 Photocopy	From the Land Tax Office - Official Receipt of Real Property Tax-Amilyar
Market Clearance for business is located in public market-Original and 1 Photocopy	From the Economic Enterprise Management Office (EEMO) located at Imus Public Market
Franchise Agreement and Consent for franchisee-Original and 1 Photocopy	From the Franchisor of the business
Annual Report to DHSUD (received/stamped) for Homeowners' Association - Original and 1 Photocopy	From DHSUD







Written Authorization Letter/ SPA/ Secretary's Certificate/Partnership Certificate with I.D.s from owner and	From the owner of the business
authorized representative-(if Representative)1 Photocopy	
Letter of No Objection – Original	From Office of the City Mayor
Approval from the City Mayor – Original	From Office of the City Mayor
Certificate of Attendance on Solid Waste Management	From City Environment and Natural Resources Office (CENRO)
Seminar (must attend seminar conducted by CENRO)	
Certificate of Non-Coverage (CNC) DENR-EMB (www.emb.gov.ph) - for WATER STATION, JUNKSHOPS, MEDICAL & DENTAL CLINIC, LABORATORIES, LAUNDRY,	From DENR-EMB (www.emb.gov.ph)
CARWASH - 1 Photocopy	
Environmental Compliance Certificate (ECC) DENR-EMB (www.emb.gov.ph) - for INDUSTRY, HOSPITAL, GASOLINE STATION, FUNERAL HOMES, MALL, SUPERMARKET, MANUFACTURER, FACTORY, POULTRY, PIGGERY, OTHER BUSINESS POSES POTENTIAL RISK/IMPACT TO ENVIRONMENT - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Contract/MOA with Private Hauler - private hauler must have MOA with Sanitary Landfill and Certificate of Disposal for MALL, FASTFOOD CHAIN, RESTAURANT, SUPERMARKET, LARGE SCALE INDUSTRY, FACTORY (MANUFACTURING), WAREHOUSE, ET.AL- 2 Photocopies	From Private Hauler
Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal) for MEDICAL INFECTIOUS/TOXIC WASTE- 2 Photocopies	From DENR accredited Hauler
Discharge Permit (Water Pollution) -FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE STATIONS, FUNERAL PARLOR, & OTHER ESTABLISHMENTS THAT USE WATER & DISCHARGE IT EVENTUALLY - 1 Photocopy	From DENR-EMB (www.emb.gov.ph)
Hazardous Waste Generators ID & Contract/MOA with Private Infectious/Hazardous Waste Hauler (Certificate of Safe Disposal)-FOR RESTAURANTS, SHOPPING MALLS, COMMERCIAL LABORATORIES, HOSPITAL, MARKETS, COMMERCIAL CONDOMINIUMS, HOTELS, GASOLINE	From Private Infectious/Hazardous Waste Hauler

CITIZEN'S CHARTER



STATIONS, FUNERAL PARLOR, & C THAT USE CHEMICAL DISCHARGE SUBSTANCES - 1 Photocopy					
Permit to Operate (Air Pollution) - FOR MANUFACTURING/INDUSTRY with furnaces, boilers, generators, or any operation producing dust or particulate matter - 1 Photocopy		From DENR-EMB (www.emb.gov.ph)			
Picture of Grease Trap FOR RESTAURANT, EATERY, CARINDERIA - 1 Photocopy Water Permit from National Water Resources Board (nwrb.gov.ph) if source of water is from deep well -FOR WATER REFILLING STATION, CARWASH, LAUNDRY) - 1 Photocopy		From the owner of the business From National Water Resources Board (NWRB) (nwrb.gov.ph)			
Health Certificate of Staff for food establishment, water station, salon, and spa – Original		From City Health Office			
Urinalysis (1-month validity) - Origi	inal	From Department of Health (DOH)Accredited Laboratory			
Fecalysis (1-month validity) - Origin	nal	From Department of Health (DOH)Accredited Laboratory			
Chest X-Ray (6 months validity) - C	Driginal	From Department of Health (DOH)Accredited Laboratory			
Drug Test (1-year validity) - Origina	1	From Department of Health (DOH)Accredited Laboratory			
Pest/Vermin Control for food establishment, fast-food chain, supermarket – Original		From any legitimate Pest Control establishments			
Clearance for meat retailer, poultry and pet supplies retailer - Original		From City Veterinary Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
requirements	1. Assess the requirements and issue the Business Tax Order of Payment (Assessment Form)	None	20 minutes	Mary Grace Basa; Regina Camaclang; Ruby Concepcion; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez	



2. Pay the required fee(s)	2. Receive the payment. Pass the Business Tax Order of Payment (Assessment Form), O.R., CTC, to BFP personnel for Fire Inspection Fee payment, then to Sanitary Inspector for Sanitary Permit	 Mayor's Permit Fee Zoning Fee - Based on Type of Establishment Building Inspection Fee - Based on Type of Structure Garbage Fee -Based on Type of Establishment Environmental Protection Fee- Based on Type of Establishment Sanitary Inspection Fee - Based on Type of Establishment Fire Safety Inspection Fee - 15 % of total assessment excluding business tax Business Plate - ₱ 200.00 Security Seal Sticker - ₱ 80.00 Documentary Stamp Tax - ₱ 30.00 	10 minutes	City Treasurer's Office assigned personnel
3. Claim the Business Tax Order of Payment (Assessment Form) with Official Receipts, CTC, Business Plate, Mayor's Permit Certificate, and Sanitary Permit	Order of Payment (Assessment Form) with	None	30 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa; Richard Villanueva; Zecel Secretario
	Fill-out th	e Client Satisfaction Rating Form		
Noto:	TOTAL	Based on computation	1 hour	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

Mayor's Permit Fee

(a.) On business whose business tax rates are determined based on their gross sales and/or receipts based on section 7 paragraphs a, b, c, d, e, g, h, i, j, k and l of City Ordinance No. 04-133 S. 2019:







Asset Size	Amount	Asset Size	Amount
P 10,000.00 and below	150.00	Over P 850,000.00 to P 1,000,000.00	1,250.00
Over P 10,000.00 to P 30,000.00	225.00	Over P 1,000,000.00 to P 3,000,000.00	5,000.00
Over P 30,000.00 to P 50,000.00	300.00	Over P 3,000,000.00 to P 5,000,000.00	7,500.00
Over P 50,000.00 to P 75,000.00	375.00	Over P 5,000,000.00 to P 7,500,000.00	10,000.00
Over P 75,000.00 to P 100,000.00	450.00	Over P 7,500,000.00 to P 10,000,000.00	15,000.00
Over P 100,000.00 to P 200,000.00	525.00	Over P 10,000,000.00 to P 15,000,000.00	25,000.00
Over P 200,000.00 to P 350,000.00	600.00	Over P 15,000,000.00 to P 25,000,000.00	40,000.00
Over P 350,000.00 to P 500,000.00	700.00	Over P 25,000,000.00 to P 30,000,000.00	50,000.00
Over P 500,000.00 to P 750,000.00	800.00	Over P 30,000,000.00	60,000.00
Over P 750,000.00 to P 850,000.00	1,000.00		

(b). On Banks

Rural Banks (Main or Branch)	P 5,000.00
Thrift Banks (Main or Branch)	5,000.00
Savings, Commercial, Industrial and Development Banks (Branch)	10,000.00
Universal Banks (Branch)	20,000.00

On Main Offices, one half (1/2) of the Permit Fee enumerated.

(c.) On Other Financial Institutions per establishment

Lending	P 3,000.00
Pawnshop	3,000.00
Money Shops	3,000.00
Insurance	5,000.00
Pension Plan	5,000.00







www.cityofimus.gov.ph

8. ISSUANCE OF MAYOR'S PERMIT FOR COOPERATIVE

Cooperatives are required to obtain or secure Mayor's Permit and pay the commensurate cost of regulation, inspection, and surveillance of the operation of its business.

Jusiness.				
OFFICE OR DIVISION	Business Permits and Licensin	g Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All Cooperatives in the City of Imus			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Cooperative Development Authority (CDA) Registration (2 Copies - 1 Original, 1 Photocopy)		https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827 Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary cooperatives, this power has been delegated to the Regional or Extension Offices.		
Community Tax Certificate (CEDULA)		City Treasurer's Office		
OTHER REQUIREMENTS THAT MA	AY BE NEEDED:			
Written Authorization Letter /Secre Certificate/Partnership Certificate authorized representative-(if Repre	with I.D.s from owner and esentative) 1 Photocopy	From the owner of the business		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements	1. Assess the requirements and issue the Order of Payment/ Assessment Form	None	5 minutes	Mary Grace Basa; Regina Camaclang; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez
2. Pay the required fee(s)	2. Receive the payment and issue the O.R.	 Mayor's Permit Fee -₱ 1,000.00 Security Seal Sticker - ₱ 80.00 Documentary Stamp Tax - ₱ 30.00 	5 minutes	City Treasurer's Office assigned personnel
 Claim the Mayor's Permit Certificate 	3. Issue the Mayor's Permit Certificate	None	5 minutes	Norman Angeles; Luisito Dominguez; Felizardo San Jose, Jr.; Melani Unawa; Richard Villanueva; Zecel Secretario

CITIZEN'S CHARTER

Fill-out the Client Satisfaction Rating Form					
TOTAL Based on computation 15 minutes					

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

9. ISSUANCE OF TEMPORARY OR SEASONAL VENDOR'S PERMIT

Mayor's Permit is issued to temporary or seasonal vendors and exhibitors engaged in the sale or display of goods or services during fairs, fiestas, Christmas, foundation or anniversary day, and other holidays or special occasions, for a period of at least one (1) day but not more than one (1) year, in temporary booths or other temporary structures, located indoors or outdoors, whether leased or free.

OFFICE OR DIVISION	Business Permits and Licensing Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2B – Government to Business					
WHO MAY AVAIL THE SERVICE	All potential proprietors with business in the City of Imus					
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE				
DTI , if Sole Proprietorship (2 Copies - 1 Original, 1 Photocopy)		Business One-Stop Shop (BOSS), https://bnrs.dti.gov.ph/registration, Imus Satellite Office – The District Mall, City of Imus, Any DTI Office				
or SEC Registration, if Partnership or Corporation (2 Copies - 1 Original, 1 Photocopy)		https://crs.sec.gov.ph/; Secretariat Building, PICC Complex Roxas Boulevard, Metro Manila Philippines				
or CDA, if Cooperative (2 Copies - 1 Original, 1 Photocopy)		https://www.cda.gov.ph/resources/downloads/pro-forma-registration-documents; 827 Aurora Blvd., Immaculate Conception, Quezon City. For registration of primary cooperatives, this power has been delegated to the Regional or Extension Offices				
Contract of Lease		From the owner/lessor of the building or commercial stall				
Community Tax Certificate (CEDULA	A)	City Treasurer's Office				
OTHER REQUIREMENTS THAT MA	AY BE NEEDED:					
Approval from the City Mayor - Or	iginal	From the Office of the City Mayor				
Written Authorization Letter /Secre Certificate with I.D.s from owner a Representative)1 Photocopy		From the owner of the business				



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements	1. Assess the requirements and issue the Order of Payment/Assessment Form	None	5 minutes	Mary Grace Basa; Regina Camaclang; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez
2. Pay the required fee(s) and tax(es)	2. Receive the payment and issue the O.R.	 Business Taxes Renewal Based on Annual Gross Sales/Receipts Mayor's Permit Fee Four (4) square meters or less Php 7.00/day More than four (4) square meters Php 60.00/sq.m. per mo. (Refer to City Ordinance No. 04-133 S. 2019) Security Seal Sticker – ₱ 80.00 Documentary Stamp Tax – ₱ 30.00 	5 minutes	City Treasurer's Office assigned personnel
3. Claim the Mayor's Permit Certificate	Certificate	None	5 minutes	Norman Angeles; Luisito Dominguez; Melani Unawa; Richard Villanueva; Zecel Secretario
		ent Satisfaction Rating Form		
	TOTAL	Based on computation	15 minutes	

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.





Mayor's Permit Fee

Size	Amount
Four (4) square meters or less	P 7.00/day
More than four (4) square meters	60.00/sq.m./mo.

Business Taxes

Renewal

A. On the businesses hereunder enumerated: All other similar activities consisting essentially of the sales of services for a fee.

Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,161.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,613.00
150,000.00 or more but less than 200,000.00	3,484.00
200,000.00 or more but less than 250,000.00	4,791.00
250,000.00 or more but less than 300,000.00	6,098.00
300,000.00 or more but less than 400,000.00	8,131.00
400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but less than 2,000,000.00	15,180.00
2,000,000.00 or more	P15,180.00 plus 66% of 1% over P2.0 million

Provided, that in no case shall the tax on gross sales of P2, 000,000.00 or more be less than P15, 180.00.

B. On retailers with gross receipts or sales for the preceding year in the amount of:

Amount of Gross Sales/Receipts For the Preceding Calendar Year	Tax Per Annum
50,000.00 or more but less than 75,000.00	1,306.00
75,000.00 or more but less than 100,000.00	1,742.00
100,000.00 or more but less than 150,000.00	2,468.00
150,000.00 or more but less than 200,000.00	3,194.00
200,000.00 or more but less than 300,000.00	4,345.00
300,000.00 or more but less than 500,000.00	5,416.00
500,000.00 or more but less than 750,000.00	8,712.00

CITIZEN'S CHARTER



750,000.00 or more but less than 1,000.000.00	11,616.00
1,000,000.00 or more but less than 100,000,000.00	11,616.00 plus 66% of 1% over P1.0 million but less than
	P100 million
100,000,000.00 or more but less than 500,000,000.00	665,016.00 plus 1.10% over P100 million but less than P500
	million
500,000,000.00 or more	P5,065,016.00 plus 82.5% of 1% over P500 million

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.







10. ISSUANCE OF PERMIT FOR AMBULANT AND ITINERANT AMUSEMENT OPERATORS

Mayor's Permit is issued to operators of amusement area particularly within the Imus Town Plaza, Imus Covered Court and its vicinity.

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OFFICE OR DIVISION	Business Permits and Licensing Office						
CLASSIFICATION	Simple						
TYPE OF TRANSACTION	G2B – Government to Business						
	All potential proprietors with business	in the City of Imus					
	REQUIREMENTS		WHERE TO SECURE				
Endorsement Letter from the City Ma		Office of the City Mayor/ City	Administrator's Office				
Community Tax Certificate (CEDULA		City Treasurer's Office					
OTHER REQUIREMENTS THAT MA							
Barangay Clearance/Endorsement -Original and 2 Photocopies	for business (if not yet integrated)	Barangay Hall where the busi	iness is located				
Written Authorization Letter /	Secretary's Certificate/Partnership	From the owner of the busine	SS				
	r and authorized representative-(if						
Representative)1 Photocopy							
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1. Submit the complete requirements	1. Assess the requirements and issue the Assessment Form	None	5 minutes	Mary Grace Basa; Regina Camaclang; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez			
2. Pay the required fee(s)	2. Receive the payment and issue the O.R.	 Mayor's Permit Fee Php 600.00 per sq.m./day (particularly within the Imus City Plaza, Imus Covered Court, and its vicinity) Circus, Carnivals, or the like Php 500.00 per day Merry-go-round, Rollercoaster, Ferris Wheel, Swing and other Mechanical rides(within 	5 minutes	City Treasurer's Office assigned personnel			

CITIZEN'S CHARTER





							TOTAL	Based on computation	15 minutes	
						Fill-out		Satisfaction Rating Form		1
										Richard Villanueva; Zecel Secretario
										Melani Unawa;
Certificate				Certificate						Luisito Dominguez;
3. Claim	the	Mayor's	Permit		the	Mayor's	Permit	None	5 minutes	Norman Angeles;
								Tax – ₱ 30.00		
								 Documentary Stamp 		
								 Security Seal Sticker – ₱ 80.00 		
								4 sq.m.) per day		
								Php 1,500.00 (greater than		
								Other gaming stalls		
								than or equal to 4 sq.m.)		
								Php 750.00 per day (less		
								game booths		
								Shooting gallery and other		
								public property) Php 1,200.00 per day		
								Imus City Plaza or any		

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.







11. ISSUANCE OF OTHER PERMITS

Mayor's Permit is issued to cockpit operators/owners/licensees and cockpit personnel. The following are the other issued permits:

- Permit for Cockpit Owners/Operators/ Licensees
- Permit for Promoters and Cockpit Personnel
- Special Permit for Cockfighting

	9					
OFFICE OR DIVISION	Business Permits and Licensing O	Business Permits and Licensing Office				
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2B – Government to Business					
WHO MAY AVAIL THE SERVICE	All residents and non-residents of the City of Imus All cockpit owners of the City of Imus (for issuance of Special Permit					
for Cockfighting)						
CHECKLIST OF F	REQUIREMENTS	WHERE TO SECURE				
Permit for Cockpit Owners/Opera	tors/ Licensees					
New License						
Zoning/Locational Clearance (issued		City Planning and Development Office				
Building Plan and Design (duly appro	oved by the City Engineer)	City Engineering Office				
Sanitary Permit/Clearance (issued by	/ the City Health Officer)	City Health Office				
Annual Renewal						
Certification from the City Engineer to	o the effect that such cockpit is free	City Engineering Office				
from material, structural or other phys	sical hazards					
Sanitary Permit/Clearance (issued by		City Health Office				
Permit for Promoters and Cockpit	Personnel					
Community Tax Certificate (CTC)		City Treasurer's Office				
Special Permit for Cockfighting						
Endorsement Letter from the City M	ayor/City Administrator	Office of the City Mayor/ City Administrator's Office				
Community Tax Certificate (CTC)						
		City Treasurer's Office				
OTHER REQUIREMENTS THAT M						
Barangay Clearance/Endorsement for business (if not yet		Barangay Hall where the business is located				
integrated) -Original and 2 Photoco		From the sum of the busic set				
Written Authorization Letter /Se		From the owner of the business				
Certificate with I.D.s from owner a	and authorized representative-(if					
Representative)1 Photocopy						

CITIZEN'S CHARTER

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements	1. Assess the requirements and issue the Assessment Form	None	5 minutes	Mary Grace Basa; Regina Camaclang; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial; Ruby Ordoñez; Glenn Elmer Ramirez
2. Pay the required fee(s)	2. Receive the payment and issue the O.R.	A. Owner/operator/licensee of the cockpit: Application Filing Fee Php 3,000.00 Annual Cockpit Permit Fee Php 15,000.00 B. Permit for Promoters and Cockpit Personnel Cockpit Personnel Promoter/Hosts Php 2,000.00 per annum Pit Manager Php 500.00 per annum Referee Php 300.00 per annum Bet Taker (Kristo/Llamador) Php 300.00 per annum Bet Manager (Maciador/Kasador) Php 300.00 per annum Gaffer (Mananari) Php 200.00 per annum Cashier Php 200.00 per annum Derby (Matchmaker) Php 200.00 per annum	5 minutes	City Treasurer's Office assigned personnel

CITIZEN'S CHARTER





	Ordinary/Regular/Hackfight Php 50.00 per fight		
	Plasada		
	1% of the total bet of the		
	winner		
	Special Permit Fee for		
	Cockfighting		
	A. Special Cockfights		
	(Pintakasi)		
	Php1,000.00 per day		
	B. Special Derby Assessment		
	from Promoters of:		
	One-Cock "Ulutan" and		
	Php 2,000.00 per day		
	"Timbangan"		
	Two-Cock Derby		
	Php 3,000.00 per day		
	Three-Cock Derby		
	Php 4,000.00 per day Four-Cock Derby		
	Php 5,000.00 per day		
	Five-Cock (or more) Derby		
	Php 6,000.00 per day		
	International Derby		
	Php 3,000.00 per day		
	C. Soltada		
	Special Cockfight and Derby		
	Php 120.00 per fight		
	International Derby		
	Php 200.00 per fight		
	Security Seal Sticker – ₱		
	80.00		
	Documentary Stamp Tax – ₱		
	30.00		
3. Claim the Mayor's Permit 3. Issue the Ma	iyor's Permit None	5 minutes	Norman Angeles;
Certificate Certificate			Luisito Dominguez;

CITIZEN'S CHARTER



			Melani Unawa; Richard Villanueva; Zecel Secretario
Fill-out the C	lient Satisfaction Rating Form		
TOTAL	Based on Computation	15 minutes	

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.

12. ISSUANCE OF CERTIFICATION

The certification for non-existing business, with existing business, or other certifications related to businesses are issued by this office that are usually required for scholarships, hospitalization, BIR, verifications, and others. The following are the issued certifications:

- Certification with existing business
- Certification non-existing business
- o Other Certifications

OFFICE OR DIVISION	Business Permits and Licensin	a Office		
CLASSIFICATION	Simple	Simple		
TYPE OF TRANSACTION	G2B – Government to Busines	s, G2G – Government to Governmen	t, G2C – Government to 0	Citizen
WHO MAY AVAIL THE SERVICE	All residents and non-residents	of the City of Imus	·	
CHECKLIST OF RE	QUIREMENTS	N V	HERE TO SECURE	
Request Letter		From the requesting party		
Community Tax Certificate (CEDULA	A)	City Treasurer's Office		
OTHER REQUIREMENTS THAT MA	AY BE NEEDED:			
Written Authorization Letter (if Re	presentative)1 Photocopy	From the requesting party		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements	1. Assess the requirements and issue the Assessment Form	None	5 minutes	Mary Grace Basa; Regina Camaclang; Rolando Dela Cruz; Ma. Elinor Laureles; Roehl Mañago, Jr.; Dianne Lois Marcial;



2. Pay the required fee(s)	2. Receive the payment and issue the O.R.	With Existing Business Certification P 50.00 Non-Existing Business Certification P 50.00 Other Certifications P 50.00 Documentary Stamp Tax Php 30.00	5 minutes	City Treasurer's Office assigned personnel
3. Claim the Certificate	3. Issue the Certificate	None	5 minutes	Norman Angeles; Luisito Dominguez; Melani Unawa; Richard Villanueva; Zecel Secretario
	Fill-out th	e Client Satisfaction Rating Form		
	TOTAL	P80.00	15 minutes	

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.







13. ISSUANCE OF CEMETERY CONTRACT OF LEASE (for lots owned by the city)

A Cemetery Contract of Lease for lots owned by this city is issued to the relative of the deceased resident of Imus. Rental fee is collected for the rental of Municipal Cemetery lots/niche with the lease period of five (5) years.

wunicipal Cemetery lots/hiche with th				
OFFICE OR DIVISION	Business Permits and Licensing C	Business Permits and Licensing Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents and non-residents of			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SECURE	
Referral Letter (issued by BPLO)		Business Permits & Licensing Off	ice	
Community Tax Certificate (CEDULA	A) of informant	City Treasurer's Office		
Registered Death Certificate		From the Local Civil Registrar's O		
Transfer Permit in case the dece jurisdiction of the city;	ased died outside the territorial	From the Treasurer's Office of the	e City/City where the pers	son died;
Previous Cemetery Contract (if rene	wal)	From the relative of the deceased	or person who processe	ed the previous contract
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements and get the Referral Letter	1. Evaluate requirements and issue Referral Letter for signature of cemetery caretaker	None	2 minutes (stop time)	Norman Angeles; Luisito Dominguez; Melani Unawa; Richard Villanueva; Zecel Secretario
2. Present the Referral Letter	2. Fill-out the Referral Letter & sign	None	5 minutes (stop time)	Nelson Vasquez (cemetery caretaker)
3. Present the Referral Letter with signature of cemetery caretaker	3. Check the requirements and approve the Referral Letter	None	10 minutes	General Services Office personnel
4. Present the Referral Letter with the complete requirements and receive the Cemetery Contract of Lease	4. Prepare Cemetery Contract of Lease, to be signed by concerned personnel and release for signature of the City Mayor	None	5 minutes	Norman Angeles; Luisito Dominguez; Melani Unawa; Richard Villanueva; Zecel Secretario
5. Pay the required fee(s) at the City Treasurer's Office	5. Receive the payment and issue the O.R.	Alapan Public Cemetery Contract Fee New Php 1,500.00 Renewal Php 500.00 Construction of new tomb fee Php 6,500.00	5 minutes	City Treasurer's Office assigned personnel







	TOTAL	Depending on the option chosen	1 day and 28 minutes	
		Client Satisfaction Rating Form		
8. Present the O.R. and Cemetery Contract of Lease (paid, signed and notarized)		None	1 minute	Norman Angeles; Luisito Dominguez; Melani Unawa; Richard Villanueva
7. Notarize the Cemetery Contract of Lease	7. Wait for the client	None	(stop time)	Any notary public office
 Submit Cemetery Contract of Lease for signature 	 The lessor (City Mayor) will sign the contract 	 Construction of old tomb fee Php 5,000.00 Construction of bone crypt Php 3,000.00 Toclong Public Cemetery Contract Fee New Php 1,500.00 Lot Renewal Php 100.00/sq.m./year None 	1 day	City Mayor

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.





14. CERTIFIED COPY OF DOCUMENTS

Certified copy of Mayor's Permit or any certifications/permits originated from this office is issued to the requesting party.

OFFICE OR DIVISION	Business Permits and Licensing	Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE		d personnel of the requesting party		
CHECKLIST OF RI	EQUIREMENTS	W	HERE TO SECURE	
Photocopy of document/s originated f	rom this office	From the requesting party		
OTHER REQUIREMENTS THAT	MAY BE NEEDED:			
Written Authorization Letter /Sec	retary's Certificate/Partnership	From the requesting party		
Certificate with I.D.s from owner				
(if Representative)1 Photocopy	·			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete	1. Assess the requirements and	None	2 minutes	Mary Grace Basa;
equirements	issue the Assessment Form			Regina Camaclang;
				Rolando Dela Cruz;
				Ma. Elinor Laureles;
				Roehl Mañago, Jr.;
				Dianne Lois Marcial;
				Ruby Ordoñez;
				Glenn Elmer Ramirez
Pay the required fee(s)	2. Receive the payment and		5 minutes	City Treasurer's Office
	issue the O.R.	Documentary Stamp Tax P 30.00		assigned personnel
3. Claim the Certified Copy of	3. Issue the Certified Copy of	None	2 minutes	Norman Angeles;
document	document	None	Z minutes	Luisito Dominguez;
				Melani Unawa;
				Richard Villanueva;
				Zecel Secretario
	Fill-out the	Client Satisfaction Rating Form		
	TOTAL	P 80.00	9 minutes	

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.





15. VERIFICATION OF RECORDS

The requesting party may verify the records from this office in relation to business permit issued. **OFFICE OR DIVISION Business Permits and Licensing Office CLASSIFICATION** Simple G2G – Government to Government **TYPE OF TRANSACTION** All requesting parties or authorized personnel of government agencies WHO MAY AVAIL THE SERVICE CHECKLIST OF REQUIREMENTS WHERE TO SECURE Request letter (written letter, email) From the requesting party **CLIENT STEPS** AGENCY ACTION FEES TO BE PAID **PROCESSING TIME** PERSON RESPONSIBLE Submit 1. Verify the request from the 5 minutes Mary Grace Basa; 1. the complete None Regina Camaclang; requirements database Ruby Concepcion; Ma. Elinor Laureles 2. Receive 2. Prepare the letter/certification Mary Grace Basa; the None 5 minutes reply thru letter/certification or email Regina Camaclang; or email and send to the requesting party Ruby Concepcion; Ma. Elinor Laureles Fill-out the Client Satisfaction Rating Form 10 minutes TOTAL None

Note: All information to be disclosed will be in accordance with the Data Privacy Act

Note:

*The processing time stated herein are not applicable during (1) Peak season; and/or (2) Bulk transactions; and /or (3) System Failure.





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16. FILING OF BUSINESS COMPLAINT

Complaint on business establishments in City of Imus is filed in this office to undertake necessary actions.

		IT THIS OFFICE TO UNDERTAKE NECESSARY ACT	10113.	
OFFICE OR DIVISION	Business Permits and Licensin	g Office		
CLASSIFICATION	Complex			
TYPE OF TRANSACTION		s, G2G – Government to Government, G	<u>G2C – Government to Citiz</u>	zen
WHO MAY AVAIL THE SERVICE	All residents and non-residents			
CHECKLIST OF RE	QUIREMENTS	WH	ERE TO SECURE	
Accomplished Business Complaint F	Form or	Business Permits and Licensing Office	e (BPLO) for Form	
Letter of Complaint or		From the requesting party		
Endorsement of Complaint		From Complaints Center		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-out and submit Business Complaint Form or Letter of Complaint	1.1 Interview the complainant	None	5 minutes	Regina C. Camaclang; Ruby R. Concepcion; Ma. Elinor G. Laureles
	1.2 Schedule the ocular inspection of the business complaint	None	2 minutes (stop time)	Will be inspected on scheduled date Rolando S. Dela Cruz;
	1.3 Ocular inspection on the scheduled date ("Special Visit") and take photos	None	1 day	Luisito E. Dominguez; Roehl R. Mañago, Jr.; Dianne Lois Marcial; Glenn Elmer S. Ramire;
	1.4 Prepare the Inspection Report	None	5 minutes	Felizardo San Jose, Jr. Zecel N. Secretario; Job Order employees
	1.5 Encode the inspected business establishment in the computer system and prepare an arrears assessment, if necessary	None	5 minutes	assigned to BPLO

CITIZEN'S CHARTER



	1.6 File the Inspection Report and attachments (per business)	None	3 minutes	Regina Camaclang
2. Receive feedback or update	2. Send feedback or update to the complainant	None	5 minutes	Regina C. Camaclang; Ruby R. Concepcion; Ma. Elinor G. Laureles
	TOTAL	None	1 day and 25 minutes	







CITY ASSESSOR'S OFFICE EXTERNAL SERVICES







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A. APPRAISAL SERVICES

1. FIRST TIME DECLARATION OF IMPROVEMENT (HOUSE, BUILDING, FENCE, PAVEMENT AND MACHINERY)

2. RE-ASSESSMENT DUE TO SUBSTANTIAL INTRODUCTION OF ADDITION IMPROVEMENT

Persons who are acquiring real property or making improvements thereon as well as the Office of the city Assessor have the duty to make declaration of real property as provided by law. This service requested by declarant/owners is for the issuance of tax declaration for his newly constructed/reconstructed building and or/newly installed machinery.

	City Assessor's Office			
LASSIFICATION	Highly Technical			
YPE OF TRANSACTION	G2G – Government to Government; G2C	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business		
HO MAY AVAIL THE SERVICE	All Imus City real property owners/tax page	yers, buyers, realtors/developers and other parties concerned.		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
OR DECLARED PROPERTY OV	/NER			
igned photocopy of owner's one (1) valid I.D. from the list below:			
E-Card/Umid, Employee's ID/ Office ID, Driver's License, Professional Regulation Commission (PRC) ID, Passport, Senior Citizen ID, SSS ID, Comelec/Voter's ID/ Comelec Registration Form, Integrated Bar of the		Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA, COMELEC, IBP, BIR, Post Office, HDMF, Philhealth.		
Philippines (IBP) ID, Firearms License, AFPSLAI ID, PVAO ID, AFP Beneficiary ID, BIR (TIN) ID, Pag-ibig ID, Person With Disability (PWD) ID, Solo Parent ID, Pantawid Pamilya Pilipino Program (4Ps) ID, Barangay ID, Philippine Postal ID, Phil-health ID, School ID				
ating the specific purpose for sec ith attached signed photocopy of presentative. Apostilled or Consularized Specia abroad. * Notarized Deed of Sale/Deed o	Special Power of Attorney from the owner uring documents and property description valid I.D. of owner and authorized al Power of Attorney if the property owner Assignment/Memorandum or Contract of tragage if the title is not yet transferred to the	Person being represented		
OR CORPORATE OWNED PRO ttached signed photocopy of valic uthorized Representative.	PERTY: Latest Secretary's Certificate with I.D. of Corporate Secretary and	Person being represented		

CITIZEN'S CHARTER



2. Processing fee of Php. 25.00 per tax declaration applied		Treasurer's Office, Wi	ndow 8 or 9	
3 .Processing time: 7 working days		Assessor's Office		
4. Ocular inspection of the subject property (every day from 8:30AM to 11:30 AM and 1:00PM to 4:00 PM)		Assessor's Office		
BASIC REQUIREMENTS (Clear Ph	otocopy of the Following)			
1. Electronic Copy of the latest Trans	sfer Certificate of Title	Registry of Deeds-Tre Dasmarinas City, Baco	ce Martires, Reg. of Dee oor City Hall	ds Kiosks- Robinsons
2. Tax Declaration of Land		Assessor's Office	,	
3. Latest/Current Real Property Tax	Receipt/ Tax Clearance Certificate	Treasurer's Office, wir	ndows 17 to 19 & 15 & 23	3
4. Approved Building Plan	· · ·	Office of the Building (Official – 2nd Floor	
5. Bill of Materials of actual construct Engineer	tion signed and sealed by Architect or	Office of the Building (Official – 2nd Floor	
6. Building Permit and/or Occupancy	Permit	Office of the Building (Official – 2nd Floor	
7. Printed colored photographs of lat (Exterior and interior portion of the b	est and actual condition of the property uilding)	Principal Owner/Applic	cant	
8. Sworn statement stating the true market value of the property- Notarized, signed by owner or Authorized Representative ONLY.		Assessor's Office		
9. Sketch of exact location or Vicinity	Map of the property	Applicant		
	ears (Sec. 222 of RA 7160) for first time ient proof of date of latest construction.			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to any of Window 1 to 5	1.1 Receive the required documents and check for completeness and accuracy.1.2 Issue order of payment	None	5 minutes	Assessor's assigned personne
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2. Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
	3.1 Accept photocopy of Official Receipt	None	2 minutes	Assessor's Office assigned
3. Present O.R. to Assessor's office any from Windows 1 to 5	and issue Claim stub			personnel

CITIZEN'S CHARTER

of the presenter to Window 1 to 5	TOTAL	Php 25.00 per tax declaration	7 days	
4. Present claim stub and valid I.D.	4. Release the document requested	None	2 minutes	Secretariat
	H. Recording/Filing			Secretariat
	G. Final Approval			Elmer Camerino Acting City Assessor
	F. Encoding/Reviewing/Printing			Assessment & Records Personnel
	E. Numbering			Records personnel
	D. Approval of FAAS			Elmer Camerino Acting City Assessor
				Marina Gonzales LAOO III Ramon Crisostomo Jr.
	C. Appraisal/Preparation of FAAS			Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I
	B. Ocular inspection			and tax mapping personnel Appraisers:
	A. Plotting			Engr. Roy Ebio Tax Mapper II





3. RECLASSIFICATION/RE-ASSESSMENT OF ACTUAL USE OF LAND AND BUILDING BASED ON TIS PREDOMINANT USE

This service pertains to the issuance of tax declaration to the properties with updated classification and valuation for taxation purposes.

OFFICE OR DIVISION	City Assessor's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
FOR DECLARED PROPERTY OWN	IER			
Signed photocopy of owner's one (1)	valid I.D. from the list below:			
ID, BIR (TIN) ID, Pag-ibig ID, Person	assport, Senior Citizen ID, SSS ID,	Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA, COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
FOR AUTHORIZED REPRESENTA	TIVE:			
* Authorization letter from the owner/	s (1 original copy)	Person being represented		
** Notarized/Consularized Special Po	, , , , , , , , , , , , , , , , , , , ,	Person being represented		
,	signed photocopy of Gov't. issued I.D. of			
Corporate Secretary and				
Authorized Representative				
	dum or Contract of Agreement/Lease/Real	Person being represented		
Estate Mortgage if the title is not yet				
transferred to the new owner of being				
	ERTY: Latest Secretary's Certificate with	Person /company being represented		
Attached signed photocopy of valid I.				
Secretary and authorized Representation				
2.Processing fee of Php 25.00 per ta	x declaration	Treasurer's Office,		
3.Processing Time: 7 days				
4.Ocular inspection of the subject pro and 1:00PM to 4:00 PM)	operty (every day from 8:30AM to 11:30 AM	Assessor's Office		





BASIC REQUIREMENTS (Clear Pho	otocopy of the following):			
1. Letter Request addressed to the City Assessor (1 original copy)		Principal owner		
2. Electronic Copy of Title (1 original copy)		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City, Bacoor City Hall		
3. Tax Declaration of Land and buildi	ng(Iphotocopy)	Assessor's Office – W		
4. Updated Realty Tax Receipt or Ta	x Clearance Certificate (1 photocopy)	Treasurer's Office – W	/indow	
5. Notarized sworn statement stating original copy)	the true market value of property (1	Assessor's Office – W	indows 1 to 5	
6. Approved building plan/fencing pe actual construction signed by Archite Engineer	rmit; Occupancy Permit; bill of materials of ct or	Office of the Building (Dfficial – 2nd Floor	
<u> </u>	est and actual condition of the property iilding)	Applicant		
8. Sketch Map of location of property		Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to	1.1 Receive the required documents and	None	5 minutes	Assessor's assigned
any from Window 1 to 5	check for completeness and accuracy. 1.2 Issue order of payment			personnel
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2. Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office to any from Windows 2 to 7	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assessor's Office assigned personnel
	3.2 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II and tax mapping personnel
	B. Ocular inspection			Appraisers: Engr. Ken Dacatimbang

CITIZEN'S CHARTER



	TOTAL	Php 25.00 per tax declaration	7 days	
to 5				
4. Present claim stub to Window 1	4. Release the document requested	None	2 minutes	Secretariat
	H. Recording/Filing			Records Personnel
	G. Final Approval			Elmer L. Camerino Acting City Assessor
	F. Encoding/Printing			
	E. Numbering			Records Personnel Assessment Personnel
	D. Approval of FAAS			Elmer L. Camerino Acting City Assessor
	C. Appraisal/Preparation of FAAS			LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO III Ramon Crisostomo Jr. LAOO I





4. RECLASSIFICATION OF ACTUAL USE OF LAND AND BUILDING FROM BEING TAXABLE TO EXEMPT (RELIGIOUS, EDUCATIONAL, CHARITABLE AND INSTITUTIONAL PROPERTIES

This service pertains to the issuance of tax declaration of properties with updated classification and valuation of their properties for being taxable to exempt based on its actual use as provided in Sec. 234 of R.A. 7160 or Local Government Code of 1991.

OFFICE OR DIVISION	City Assessor's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
1. FOR DECLARED PROPERTY O	WNER			
*Authorization letter from the owner/	s (1 original copy)	Person being represented		
**Notarized/Consularized Special Po	ower of Attorney (1 photocopy) or	Person being represented		
Secretary's Certificate with attached	signed photocopy of Gov't. issued I.D. of			
Corporate Secretary and Authorized	Representative			
	lum or Contract of Agreement/Lease/Real	Principal owner		
Estate Mortgage if the title is not yet				
new owner of being leased (1 photoe				
	ERTY: Latest Secretary's Certificate with	Person /company being represented		
Attached signed photocopy of valid I	.D. of Corporate Secretary and			
authorized Representative.				
2.Processing fee of Php 25.00 per ta	ax declaration	Treasurer's Office, Window 8 or 9		
3.Processing time: 7 days				
	operty (every day from 8:30AM to 11:30 AM	Assessor's Office		
and 1:00PM to 4:00 PM)				
BASIC REQUIREMENTS (Clear Ph				
1.Letter Request addressed to the C		Principal owner		
2. Electronic Copy of Title of land (1 of	priginal copy)	Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons		
		Dasmarinas City, Bacoor City Hall		
3.Tax Declaration of Land and buildi		Assessor's Office – Windows 1 to 5		
	x Clearance Certificate (1 photocopy)	Treasurer's Office – Windows 17 to 19 & 15& 23		
	development plan; Occupancy Permit; bill	Office of the Building Official – 2nd Floor		
of materials of actual construction sig				
6 Pulainaga Darmit DTI Darmit DID	Certification of Registration, Certificate of	BPLO – Ground Floor, D.T.I.; B.I.R.; DECS, CHED, CBCP		





Accreditation/Affiliation, Government Operate (1 photocopy)	t Permit (DECS/CHED) and License to			
7.SEC Registration and Updated Art	icles of Incorporation and By-Laws	S.E.C.		
	the true market value of the property (1	Assessor's Office – Wi	ndows 1 to 5	
original copy)				
10.Sketch Map of location of propert	V	Applicant		
	atest and actual condition of the property	Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete	1 Receive the required documents and	None	5 minutes	Assigned personnel
requirements to any from Windows	check for completeness and accuracy.			
1 to 5	1.1 Issue order of payment			
2. Pay the required fees showing	2.Receive the payment and issue the	Processing Fee: Php	2 minutes	City Treasurer's assigned
the Order of Payment at Treasurer	Official Receipt	25.00 per tax		personnel
Office,		declaration		
Window 8 or 9				
3. Present O.R. to Assessor's	3.1 Accept photocopy of Official Receipt	None	2 minutes	Assessor's Office assigned
office Any from Windows 1 to 5	and issue Claim stub			personnel
	3.2 Start processing the request	None	6 days	Engr. Roy A. Ebio Tax
				Mapper II and tax mapping
	A. Plotting			personnel
				Appraisers:
	B. Ocular inspection			Engr. Ken Dacatimbang LAOO II
	C. Appraisal/Preparation of FAAS			Engr. Joycell Bawalan
				LAOO I
				Marina Gonzales LAOO III
				Ramon Crisostomo Jr.
				LAOO I
				Elmer L. Camerino Acting
				City Assessor

CITIZEN'S CHARTER



	D. Approval of FAAS			
	E. Numbering F. Encoding/Printing			Records Personnel Assessment Personnel
	G. Final Approval			Elmer L. Camerino Acting City Assessor
	H. Recording/Filing			Records Personnel
4. Present claim stub to Windows 1 to 5	4. Release the document requested	None	2 minutes	Secretariat
	TOTAL	Php 25.00 per tax declaration	7 days	







5. APPRAISAL OF PROPERTIES FOR THE ESTABLISHMENT OF FAIR MARKET VALUE FOR LGU'S ACQUISITION, LEASING AND OTHER FINANCIAL PURPOSES, AND FOR EXPROPRIATION PROCEEDINGS

This service is issued to clients whose property will be acquired by the government through sale, lease or expropriation proceedings.

OFFICE OR DIVISION	City Assessor's Office				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G - Government to Government				
WHO MAY AVAIL THE SERVICE	LGU, Province, National Government and T	rial Courts			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
1. FOR DECLARED PROPERTY OV					
ID, BIR (TIN) ID, Pag-ibig ID, Person	ID, Driver's License, Professional assport, Senior Citizen ID, SSS ID,	Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA, COMELEC, IBP, BIR, Post Office, HDMF, Philhealth			
FOR AUTHORIZED REPRESENTA	ΓIVE:				
*Authorization letter from the owner/s **Notarized/Consularized Special Po Secretary's Certificate with attached issued I.D. of Corporate Secretary ar ***Notarized Deed of Sale/Deed of A Agreement/Lease/Real Estate Mortga yet transferred to the new owner of b	wer of Attorney (1 photocopy) or signed photocopy of Gov't. Ind Authorized Representative ssignment/Memorandum or Contract of age if the title is not	Person being represented			
and 1:00PM to 4:00 PM)	operty (every day from 8:30AM to 11:30 AM	Assessor's Office			
BASIC REQUIREMENTS: clear Pho 1. Indorsement letter to conduct prop Order/Subpoena	otocopy of the following): erty appraisal or Regional Trial Court	City Mayor, RTC			





		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City, Bacoor City Hall		
		Assessor's Office – Windows 1 to 5		
	x Clearance Certificate (1 photocopy)	-	Windows 17 to 19 & 15 &	23
5. Sketch Map of location of property		Applicant		20
	est and actual condition of the property.	Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to any from Windows 1 to 5	1.1 Receive the required documents and check for completeness and accuracy.	None	5 minutes	Elmer L. Camerino Acting City Assessor; Assigned personnel
	1.2 Start processing the requesta. Plottingb. Ocular inspection	None	2 days	Engr. Roy Ebio Tax Mapper II and tax mapping personnel Assigned Appraiser and inspectors
	1.3 Preparation of Narrative Report	None	2 days	Elmer Camerino, Acting City Assessor; Assigned Appraiser
	1.4 Convenes for determination of appraised valuation of the property	None	1 day	Appraisal Committee
2. Get Indorsement and Narrative and Appraisal Report.	2. Indorsement of Narrative and Appraisal Report to the Sangguniang Panglungsod for Approval and Resolution		30 minutes	Secretariat
	TOTAL	None	6 days	







6. FIRST TIME DECLARATION OF PEZA ACCREDITED PROPERTIES

This service pertains to the issuance of tax declaration to the real properties owned by manufacturing and industrial companies who may avail incentives by Philippine Economic Zone Authority.

Philippine Economic Zone Authority.				
OFFICE OR DIVISION	City Assessor's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	PEZA Registered Companies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1.FOR DECLARED PROPERTY OW	/NER			
ID, BIR (TIN) ID, Pag-ibig ID, Person	ID, Driver's License, Professional assport, Senior Citizen ID, SSS ID,	Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA, COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
FOR AUTHORIZED REPRESENTA	TIVE:			
*Authorization letter from the owner/s	s (1 original copy)	Person being represented		
**Notarized/Consularized Special Po				
	signed photocopy of Gov't. issued I.D. of			
Corporate Secretary and Authorized	•			
***Notarized Deed of Sale/Memorand				
•	age if the title is not yet transferred to the			
new owner of being leased (1 photoc				
	ERTY: Latest Secretary's Certificate with	Person /company being represented		
ö 1 1,	D. of Corporate Secretary and authorized			
Representative.				
2. Processing fee: Php 25.00 per tax	declaration	Treasurer's Office, Window 8 or 9		
3. Processing time: 7 to 20 days				
4. Ocular inspection of the subject pr and 1:00PM to 4:00 PM)	operty (every day from 8:30AM to 11:30 AM	A City Assessor's Office		





BASIC REQUIREMENTS (Clear pho				
		Principal owner		
		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City, Bacoor City Hall		
3. Tax Declaration of Land and build	ng (1 photocopy)	Assessor's Office – W	indows 1 to 5	
4. Updated Realty Tax Receipt or Ta	x Clearance Certificate (1 photocopy)	Treasurer's Office – W	/indows 17 to 19 & 15 &	23
5. Notarized sworn statement stating original copy)	true market values of the property (1	Assessor's Office		
•••••	e development plan; Occupancy Permit; bill	Office of the Building (Official – 2nd Floor	
of materials of actual construction sig				
7. List of complete machineries inclu-	•	Applicant		
8. Business Permit, DTI Permit, BIR conditions, and Annual Audited Finar	Certification of Registration with Terms and ncial Reports(1 photocopy)	BPLO, Ground Floor,	D.T.I.; B.I.R.;	
9.SEC Registration and Updated Arti	cles of Incorporation and By-Laws	S.E.C.		
10.PEZA Reg. Certificate, Anti-Graft	Certificate,			
11.PEZA - ERD Form No. 97-01 (PE	ZA VAT Zero Rating Certificate)	PEZA OFFICE		
12.PEZA - ERD Form No. 97-01 (Co	prporate Income Tax Holiday)			
13.List of Affiliated Companies/tenan	ts registered with PEZA			
14.Printed colored photographs of la	test and current condition of the properties	Applicant		
15.Notarized sworn statement stating	the true market value of the property	City Assessor's Office		
16.Sketch Map of location of property	ý	Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to any from Windows 1 to 5	 Receive the required documents and check for completeness and accuracy. Issue order of payment 	None	5 minutes	Assigned Personnel
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2.Receive the payment and issue the Official Receipt.	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office from Window 1 - 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assessor's Office assigne personnel
	3.2 Start processing the request	None	6 days	



	TOTAL	Php 25.00 per tax declaration	7 days	
4. Present claim stub to Windows 2 or 3	4. Release the document requested	None	2 minutes	Secretariat
	H. Recording/Filing			Records Personnel
	G. Final Approval			Elmer L. Camerino Acting City Assessor
	F. Encoding/Printing			
	E. Numbering			Records Personnel Assessment Personnel
	D. Approval of FAAS			Elmer L. Camerino Acting City Assessor
	B. Ocular inspection C. Appraisal/Preparation of FAAS			personnel Appraisers: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO I Ramon Crisostomo Jr. LAOO I
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II and tax mappin





B. ASSESSMENT SERVICES

7. TRANSFER OF OWNERSHIP OF TAX DECLARATION OF TITLED PROPERTY

8. TRANSFER OF OWNERSHIP OF UNREGISTERED (NEVER BEEN ISSUED A TITLE OR REGISTERED IN THE REGISTRY OF DEEDS (OWNERSHIP OF LAND IS BASED ON TAX DECLARATION ONLY)

This service pertains to the issuance of tax declaration of properties to the newly declared owners.

OFFICE OR DIVISION	City Assessor's Office					
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE				
1.FOR DECLARED PROPERTY OW	/NER					
Signed photocopy of owner's one (1) E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional	Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA, COMELEC, IBP, BIR, Post Office, HDMF, Philhealth				
Regulation Commission (PRC) ID, Passport, Senior Citizen ID, SSS ID, Comelec/Voter's ID/ Comelec Registration Form, Integrated Bar of the Philippines (IBP) ID, Firearms License, AFPSLAI ID, PVAO ID, AFP Beneficiary ID, BIR (TIN) ID, Pag-ibig ID, Person With Disability (PWD) ID, Solo Parent ID, PantawidPamilya Pilipino Program (4Ps) ID, Barangay ID, Philippine Postal ID, Phil-health ID, School ID,						
FOR AUTHORIZED REPRESENTA	TIVE:					
*Authorization letter from the owner/s **Notarized/Consularized Special Po Secretary's Certificate with attached	wer of Attorney (1 photocopy) or					
issued I.D. of Corporate Secretary ar	nd Authorized Representative dum or Contract of Agreement/Lease/Real	Person being represented				
	ERTY: Latest Secretary's Certificate with D. of Corporate Secretary and authorized	Person /company being represented				
2. Processing fee of Php. 25.00 per t	ax declaration applied	Treasurer's Office – Windows 8 or 9				
3. Processing time: working days		Assessor's Office – Windows 1 to 5				





-	ed with proper coordination with contact	ordination with contact Inspector Assessor's Office			
person one (1) day prior to actual ins	1				
BASIC REQUIREMENTS (Clear pho					
1. Electronic copy of the latest Trans	fer Certificate of Title	Registry of Deeds –	TreceMartires City		
2. Electronic copy of cancelled/previo	ous Transfer of Title.	Registry of Deeds –	TreceMartires City		
3. Latest/Current Real Property Tax	Receipt/ Tax Clearance cert.	Treasurer's Office –	Window's17 to 19 & 15	& 23	
4. Mode of Transfer/ Acquisition:					
Deed of Absolute Sale					
Deed of Donation					
Deed of Exchange					
Deed of Assignment					
Extrajudicial Settlement of Estate					
Self-Adjudication		Trial Court			
For Foreclosed Properties:					
Certificate of Sale					
Original Affidavit of Consolidation					
For unregistered lot:					
a. LRA Certification (1 copy)					
5. Certificate Authorizing Registration	P(CAP) (1 photocopy)	B.I.R. – TreceMartires City			
6. Transfer tax receipt or certificate of			/	ied from 2012 up to present	
	n payment (1 photocopy)			transfer Tax Issued from 2000	
		to 2011	(Treceiviantines City) for		
7. Notarized Sworn Statement stating	a ourrent and true market value of	City Assessor's Offic			
	g current and true market value of		e		
the property.	not and actual condition of the property	Angliaget			
	est and actual condition of the property	Applicant			
(interior and exterior portion of the house)		Applicant			
9.Sketch Map of location of property		Applicant			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit complete requirements to	•	None	5 minutes	Assigned personnel	
Window 1 to 5	check for completeness and accuracy.				
	1.1 Issue order of payment				



2. Pay the required fees showing the Order of Payment at Treasurer Office Window 8 or 9	2. Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 2 to 7	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.2 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy A. Ebio Tax Mapper III and tax mapping personnel
	B. Ocular inspection			Appraisers: Engr. Ken Dacatimbang
	C. Preparation of FAAS			LAOO II Engr. Joycell Bawalan LAOO I
				Marina Gonzales LAOO III Ramon Crisostomo Jr. LAOO I
	D. Approval of FAAS			Elmer I. Camerino Acting City Assessor
	E. Numbering F. Encoding/Printing			Records Personnel Assessment Personnel
	G. Final Approval			Elmer Camerino Acting City Assessor
	H. Recording			Secretariat
4. Present claim stub to Window1	4. Release the document requested	None	2 minutes	Secretariat

CITIZEN'S CHARTER



TOTAL	Php 25.00 per tax	7 days	
	declaration		

9. TRANSFER OF OWNERSHIP OF TAX DECLARATION OF LAND AWARDED TO FARMER BENEFICIARIES OF COMPREHENSIVE AGRARIAN REFORM PROGRAM (CARP)/CERTIFICATE OF LAND OWNERSHIP (CLOA)/EMANCIPATION PATENT TITLE FOR LAND

This service pertains to the issuance of tax declaration of land to the new owners from previous owners who were tenants or beneficiaries of the government program.

jovernment program.				
OFFICE OR DIVISION	City Assessor's Office – Assessment			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1.FOR DECLARED PROPERTY OW	VNER			
Signed photocopy of owner's one (1) valid I.D. from the list below:		Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA		
E-Card/Umid, Employee's ID/ Office ID, Driver's License, Professional Regulation		COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
Commission (PRC) ID, Passport, Senior Citizen ID, SSS ID, Comelec/Voter's ID/				
Comelec Registration Form, Integrated Bar of the Philippines (IBP) ID, Firearms				
License, AFPSLAI ID, PVAO ID, AFF	P Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,			
Person With Disability (PWD) ID, Sol	lo Parent ID, PantawidPamilya Pilipino			
Program (4Ps) ID, Barangay ID, Phil	ippine Postal ID, Phil-health ID, School ID,			
FOR AUTHORIZED REPRESENTA	TIVE:			
*Authorization letter from the owner/s (1 original copy)		Person being represented		
**Notarized/Consularized Special Power of Attorney (1 photocopy) or				
Secretary's Certificate with attached signed photocopy of Gov't. issued I.D. of				
Corporate Secretary and Authorized Representative				
***Notarized Deed of Sale/Memorandum or Contract of Agreement/Lease/Real				
Estate Mortgage if the title is not yet transferred to the new owner of being leased				
(1 photocopy)				
FOR CORPORATE OWNED PROPERTY: Latest Secretary's Certificate with		Person /company being represented		
Attached				
signed photocopy of valid I.D. of Cor	porate Secretary and authorized			
Representative.				

CITIZEN'S CHARTER

2.Processing fee of Php. 25.00 per tax declaration applied	Treasurer's Office – Windows 8 or 9
3.Processing time: working days	Assessor's Office – Windows 1 to 5
4.Ocular inspection of the subject property (every day from 8:30AM to 11:30 AM and 1:00PM to 4:00 PM)	Inspector Assessor's Office
BASIC REQUIREMENTS (Clear Photocopy of the following):	
1. Electronic Copy of Title (1 original copy)	Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City, Bacoor City Hall
2. Electronic copy cancelled title of mother lot (1 original copy)	Registry of Deeds
3. Certification that the original copy of CLOA/EP title is intact and existing in the said registry (1 original copy)	Registry of Deeds
4. Certificate of Award (1 photocopy)	Department of Agrarian
5.Tax Declaration of Land and building (1 photocopy)	Assessor's Office – Windows 1 to 5
6.Updated Realty Tax Receipt or Tax Clearance Certificate (1 photocopy)	Treasurer's Office – Windows 17 to 19 & 15 or 23
7.Notarized Sworn statement stating true market value of the property (1 original copy)	Assessor's Office – Windows 1 to 5
8. Notarized Deed of Conveyance (1 photocopy) such as:	Principal Owner
Deed of Absolute Sale Deed of Donation Deed of Exchange Deed of Assignment Extrajudicial Settlement of Estate Self-Adjudication	
For Foreclosed Properties: Certificate of Sale Original Affidavit of Consolidation	Trial Court
9. Certificate Authorizing Registration (CAR) (1 photocopy)	B.I.R. – TreceMartires City
10. Transfer tax receipt or certificate of payment (1 photocopy)	Treasurer Imus for Transfer tax Receipt issued from 2012 up to present Provincial Treasurer (TreceMartires City) for transfer Tax Issued from 200 to 2011
Sketch Map of location of property	Applicant
Ocular inspection of the subject property (every day from 8:30AM to 11:30 AM and 1:00PM to 4:00 PM)	Inspectors of Assessor's Office





CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Window 1 to 5	1.1 Receive the required documents and check for completeness and accuracy.1.2 Issue order of payment	None	2 minutes	Assigned Personnel
	2.Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Windows 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.2 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II And tax mapping personnel
	B. Ocular inspection			Assigned appraisers and inspectors:
	C. Preparation of FAAS			Appraisers: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO III Engr. Ramon Crisostomo Jr. LAOO I
	D. Approval of FAAS			Elmer Camerino Acting City Assessor

CITIZEN'S CHARTER

	E. Numbering			Records Personnel
	F. Encoding/Printing			Assessment Personnel
	G. Final Approval			Elmer Camerino Acting City Assessor
	H. Recording/Filing			Records Personnel
4. Present claim stub to Window 1 to 5	4. Release the document requested	None	2 minutes	Secretariat
	TOTAL	Php 25.00 per tax declaration	7 days	







10. FIRST TIME DECLARATION OF UNTITLED/TITLED PROPERTY

This service pertains to the issuance of tax declaration whose land will be declared/registered at the Office of the City Assessor.

OFFICE OR DIVISION	City Assessor's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST C	OF REQUIREMENTS	WHERE TO SECURE		
1.FOR DECLARED PROPERTY OV	VNER			
Signed photocopy of owner's one (1)	valid I.D. from the list below:	Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA,		
E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
Regulation Commission (PRC) ID, P	assport, Senior Citizen ID, SSS ID,			
Comelec/Voter's ID/ Comelec Regist				
Philippines (IBP) ID, Firearms Licens	se, AFPSLAI ID, PVAO ID, AFP			
	g ID, Person With Disability (PWD) ID,			
Solo Parent ID, PantawidPamilya Pil	ipino Program (4Ps) ID, Barangay ID,			
Philippine Postal ID, Phil-health ID, S	School ID,			
FOR AUTHORIZED REPRESENTA	TIVE:			
*Authorization letter from the owner/s		Person being represented		
**Notarized/Consularized Special Po	, , , , , , , , , , , , , , , , , , ,			
	signed photocopy of Gov't. issued I.D. of			
Corporate Secretary and Authorized				
	dum or Contract of Agreement/Lease/Real			
	transferred to the new owner of being			
leased (1 photocopy)				
	ERTY: Latest Secretary's Certificate with	Person /company being represented		
	D. of Corporate Secretary and authorized			
Representative.				
2. Processing fee of Php. 25.00 per t	ax declaration applied	Treasurer's Office – Windows 8 or 9		
3. Processing time: working days		Assessor's Office – Windows 1 to 5		
4. Ocular inspection of the subject pr	operty (every day from 8:30AM to 11:30	Inspector Assessor's Office		
AM and 1:00PM to 4:00 PM)				
BASIC REQUIREMENTS (Clear Ph	otocopy of the following):			

CITIZEN'S CHARTER



1. Letter request addressed to the City Assessor	Applicant
2. Electronic Copy of Title (1 original copy for titled property only)	Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons
	Dasmarinas City, Bacoor City Hall
3. Electronic copy of cancelled title of mother lot (1 original copy for titled	Registry of Deeds
property only)	
4. Tax Declaration of Land and building(I photocopy)	Assessor's Office – Windows 1 to 5
5. Updated Realty Tax Receipt or Tax Clearance Certificate (1 photocopy)	Treasurer's Office – Windows 17 to 19 7 15 OR 23
6. Notarized Affidavit the actual status of the property (1 original copy)	Assessor's Office – Windows 1 to 5
7. Notarized Deed of Conveyance (1 photocopy) such as:	Applicant
Deed of Absolute Sale	
Deed of Donation	
Deed of Exchange	
Deed of Assignment	
Extrajudicial Settlement of Estate	Trial Court
Self-Adjudication	
For Foreclosed Properties:	
Certificate of Sale	
Original Affidavit of Consolidation	
8.Certificate Authorizing Registration (CAR) (1 photocopy)	B.I.R. – TreceMartires City
9. Transfer tax receipt or certificate of payment (1 photocopy)	Treasurer Imus for Transfer Tax Receipt issued from 2012 up to present
	Provincial Treasurer (Trece Martires City) for transfer Tax Issued
	from 2011 to 2000
10.Certification from DENR stating that the subject property is registered in the	DENR/PENRO/CENRO
name of applicant/claimant	
11.Certification from LRA stating that the untitled property was registered in the	Registry of Deeds – Trece Martires City
Ref. of Deeds' List of Untitled Property	
12.Approved survey plan, technical description and exact location of property	DENR – LMB, LRA
13.Certification stating among others that the land is within alienable and	PENRO/ CENRO
disposable area	
14. Certification/Clearance	DAR
15. Affidavit of Ownership stating the following (1 original copy)	Principal Owner
No Adverse Claim	
Length of possession of the property	





The applicant is in long, continuous a	and notorious possession of the property				
16. Certification that the property has	16. Certification that the property has never been declared for taxation		Assessor's Office – Windows 1 to 5		
purposes (1 original copy)					
17. Notarized Affidavit of Adjoining C	Owners	Principal owner			
18. Subject to 10 year back taxes					
19. Printed colored photograph of ac	tual and current condition of the property	Applicant			
20. Sketch Map of location of proper	ty	Applicant			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2.Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel	
3. Present O.R. to Assessor's office Windows 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel	
	3.2 Start processing the request	None	6 days		
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II And tax mapping personnel	
	B. Ocular inspection			Assigned appraisers and inspectors:	
	C. Preparation of FAAS			Appraisers: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO III Engr. Ramon Crisostomo	

CITIZEN'S CHARTER



				Jr. LAOO I
	D. Approval of FAAS			Elmer Camerino Acting City Assessor
	E. Numbering			
	F. Encoding/Printing			Records Personnel Assessment Personnel
	G. Final Approval			Elmer Camerino Acting City Assessor
	H. Recording/Filing			Records Personnel
4. Present claim stub to Window 1 to 5	4. Release the document requested	None	2 minutes	Secretariat
	TOTAL	Php 25.00 per tax declaration	7 days	







11. RECLASSIFICATION OF AGRICULTURAL LAND TO OTHER NON-AGRICULTURAL USAGE

This service pertains to the issuance of tax declaration whose land will be utilized form being agricultural to its Highest and best Use such as residential, commercial or industrial

commercial or industrial			
OFFICE OR DIVISION	City Assessor's Office		
CLASSIFICATION	Complex		
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business		
WHO MAY AVAIL THE SERVICE	All		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE	
1. FOR DECLARED PROPERTY OV	VNER		
Signed photocopy of owner's one (1)	valid I.D. from the list below:	Government Agencies assigned such as:	
		GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA,	
E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth	
Regulation Commission (PRC) ID, Pa	• • • • • •		
Comelec/Voter's ID/ Comelec Registre	ration Form, Integrated Bar of the		
	e, AFPSLAI ID, PVAO ID, AFP Beneficiary		
ID, BIR (TIN) ID, Pag-ibig ID, Person	With Disability (PWD) ID, Solo Parent ID,		
	Ps) ID, Barangay ID, Philippine Postal ID,		
Phil-health ID, School ID,			
FOR AUTHORIZED REPRESENTAT	ΓIVE:		
*Authorization letter from the owner/s		Person being represented	
**Notarized/Consularized Special Por			
or Secretary's Certificate with attache	ed signed photocopy of Gov't. issued I.D. of		
Corporate Secretary and Authorized	Representative		
***Notarized Deed of Sale/Memorand	dum or Contract of Agreement/Lease/Real		
Estate Mortgage if the title is not yet t	transferred to the new owner of being		
leased (1 photocopy)			
FOR CORPORATE OWNED PROPE	ERTY: Latest Secretary's Certificate with	Person /company being represented	
Attached signed photocopy of valid I.D. of Corporate			
Secretary and authorized Representation			
2. Processing fee of Php. 25.00 per ta	ax declaration applied	Treasurer's Office – Windows 8 OR 9	
3.Processing time: working days		Assessor's Office – Windows 1 to 5	
4. Ocular inspection of the subject pro and 1:00PM to 4:00 PM)	operty (every day from 8:30AM to 11:30 AM	Inspector Assessor's Office	





BASIC REQUIREMENTS (Clear Photocopy of the following):				
		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons		
		Dasmarinas City, Bacoor City Hall		
2. Letter Request addressed to the C	City Assessor	Person being represer		
3. Tax Declaration of Land and build		Assessor's Office – W	indows 1 to 5	
4. Updated Realty Tax Receipt or Ta	x Clearance Certificate (1 photocopy)	Treasurer's Office – W	/indows 17 to 19 & 15 or	23
5. Approved building plan/permit, Oc	cupancy permit, Bill of materials of actual	Office of the Building (Official – 2nd Floor	
construction cost approved and signed				
6. Certification/Clearance/Order of C	onversion (I photocopy)	DAR		
7. Notarized Affidavit of Non-tenancy	r (I original copy)	Principal Owner		
Certification from:(1 photocopy)				
Resolution or Ordinance		Sangguniang Panglun	÷	
Housing and Land Use Regulatory B	oard	City Planning and Dev	elopment Office NIA	
Zoning Certificate				
National Irrigation Authority, if irrigate	ed rice land			
In case of subdivision:				
Development permit				
License to Sell and Certificate of Reg	gistration (CR)			
Approved Site Development Plan		Applicant		
Approved alteration permit, in case the	nere were changes made in the			
development plan				
	th Lot data computation of all resulting			
subdivision lots				
8. Sketch Map of location of property		Applicant		
9. Printed colored photographs of the actual condition of the property.		Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1.1 Receive the required documents and	None	5 minutes	Assigned personnel
Window 1 to 5check for completeness and accuracy.				
	1.2 Issue order of payment			
, , , , , , , , , , , , , , , , , , , ,	2.Receive the payment and issue the	Processing Fee:	2 minutes	City Treasurer's assigned
the Order of Payment at Treasurer	Official Receipt	Php 25.00 per tax		personnel
Office, Window 8 or 9		declaration		



		Reclassification fee:		
		Php 1.00 per sq.m.		
3. Present O.R. to Assessor's office Window 1 to 5	3.2 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.1 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II And tax mapping personne
	B. Ocular inspection			Assigned appraisers and inspectors:
	C. Preparation of FAAS			Appraisers: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO III Engr. Ramon Crisostomo A LAOO I
	D. Approval of FAAS			Elmer Camerino Acting City Assessor
	E. Numbering			Records Personnel
	F. Encoding/Printing			Assessment Personnel
	G. Final Approval			Elmer Camerino Acting City Assessor

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	H. Recording/Filing			Records Personnel
4. Present claim stub to Windows 3 or 4	4. Release the document requested	None	2 minutes	Secretariat
	TOTAL	Processing Fee: Php 25.00 per tax declaration Reclassification fee: Php 1.00 per sq.m.	7 days	

12. CONSOLIDATION/SUBDIVISION OF MOTHER LOT/AND IMPROVEMENT

This service pertains to the issuance of tax declaration to the mother lot/s to be consolidated or subdivided

OFFICE OR DIVISION	City Assessor's Office			
CLASSIFICATION				
	Highly Technical			
TYPE OF TRANSACTION		overnment to Citizen; G2B – Government to Business		
WHO MAY AVAIL THE SERVICE	5	evelopers, public utility companies, supermalls, convenience stores,		
	hospitals and industrial companies			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
1. FOR DECLARED PROPERTY ON	WNER			
Signed photocopy of owner's one (1)	valid I.D. from the list below:	Government Agencies assigned such as:		
E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional Regulation	GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA,		
Commission (PRC) ID, Passport, Se	nior Citizen ID, SSS ID, Comelec/Voter's ID/	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
Comelec Registration Form, Integra	ted Bar of the			
Philippines (IBP) ID, Firearms License, AFPSLAI ID, PVAO ID, AFP Beneficiary				
ID, BIR (TIN) ID, Pag-ibig ID, Person With Disability (PWD) ID, Solo Parent ID,				
PantawidPamilya Pilipino Program (4	Ps) ID, Barangay ID, Philippine Postal ID,			
Phil-health ID, School ID,				
FOR AUTHORIZED REPRESENTA	TIVE:			
*Authorization letter from the owner/s (1 original copy)				
**Notarized/Consularized Special Power of Attorney (1 photocopy) or		Person being represented		
	signed photocopy of Gov't. issued I.D. of			
Corporate Secretary and Authorized				



***Notarized Deed of Sale/Memorand	dum or Contract of			
Agreement/Lease/Real Estate Mortg	age if the title is not yet transferred to the			
new owner of being leased (1 photoc				
FOR CORPORATE OWNED PROPI	ERTY: Latest Secretary's Certificate with	Person /company be	ing represented	
Attached signed photocopy of valid I.	.D. of Corporate Secretary and authorized			
Representative.				
2.Processing fee of Php. 25.00 per ta	ax declaration applied	Treasurer's Office –	Windows 8 or 9	
3. Processing time: working days		Assessor's Office – \	Vindows 1 to 5	
4. Ocular inspection of the subject pr and 1:00PM to 4:00 PM)	operty (every day from 8:30AM to 11:30 AM	Inspector Assessor's	Office	
BASIC REQUIREMENTS (Clear Ph	otocopy of the following):			
1. Letter request addressed to the Ci	ty Assessor	Applicant		
2. Electronic Copy of Title (1 original	сору)	Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons		
		Dasmarinas City, Bacoor City Hall		
3. Tax declaration of land (and impro		Applicant		
	x Clearance Certificate (1 photocopy)	Treasurer's Office –	Windows 17 to 19 & 15 (OR 23
5. Approved building plan/permit, Oc	cupancy permit, Bill of materials of actual	Office of the Building Official, 2nd floor		
construction cost approved and signed	,			
(IF THERE ARE IMPROVEMENTS O	,			
	cal description, site development plan	DENR – LMB, LRA, CPDO		
7. Approved original subdivision plan		CPDO, SangguniangPanglungsod		
8. Approved Alteration Permit (FOR		CPDO/SangguniangPanglungsod, HLURB		
9. License to Sell (1 photocopy) (FOI	,	HLURB		
•	ivision lots with mother title numbers and tax			
declaration numbers) (e-file or photo-		CPDO, SangguniangPanglungsod, HLURB		
11. Printed colored photographs of the	ne actual condition of the property.			
12. Sketch Map of location of proper				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to	•	None	2 minutes	Assigned personnel
Window 1 to 5	check for completeness and accuracy.			
	1.2 Issue order of payment			





2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2.Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.2 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy A. Ebio Tax Mapper II
	7. Flotting			And tax mapping personne
	B. Ocular inspection			Assigned appraisers and inspectors:
	C. Preparation of FAAS			Appraisers: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I Marina Gonzales LAOO III Engr. Ramon Crisostomo J LAOO I
	D. Approval of FAAS			Elmer Camerino Acting City Assessor
	E. Numbering			Records Personnel
	F. Encoding/Printing G. Final Approval			Assessment Personnel Elmer Camerino Acting City Assessor
	H. Recording/Filing			Records Personnel

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4. Present claim stub to Window 1 to 5	4. Release the document requested			Secretariat
	ΤΟΤΑΙ	Ū	20 days	
		Php 25.00 per tax declaration		

13. CORRECTION OF DATA/REVISION OF TAX DECLARATION DUE TO TYPOGRAPHICAL ERROR ON ASSESSEMENT RECORDS BASED ON CERTIFIED TRUE COPY OF TITLE

This service pertains to the correction of data on declarant's name, address, title number and other necessary information that are basically typographical only based on titles.

OFFICE OR DIVISION CLASSIFICATION	City Assessor's Office				
	Complex				
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	All				
	OF REQUIREMENTS	WHERE TO SECURE			
1.FOR DECLARED PROPERTY OV					
Signed photocopy of owner's one (1)		Government Agencies assigned such as: GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA			
Commission (PRC) ID, Passport, Se	ID, Driver's License, Professional Regulation nior Citizen ID, SSS ID, Comelec/Voter's ID/	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth			
	ted Bar of the Philippines (IBP) ID, Firearms P Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,				
Person With Disability (PWD) ID, So	lo Parent ID, Pantawid Pamilya Pilipino				
Program (4Ps) ID, Barangay ID, Philippine Postal ID, Phil-health ID, S	School ID,				
FOR AUTHORIZED REPRESENTA	TIVE:				
Certificate with attached signed phot Secretary and Authorized Represent ***Notarized Deed of Sale/Memoran	ower of Attorney (1 photocopy) or Secretary's cocopy of Gov't. issued I.D. of Corporate	Person being represented			
(1 photocopy)					

CITIZEN'S CHARTER

2. Processing fee of Php 25.00 per tax declaration		Treasurer's Office		
3. Certification fee of PHP80.00 per of	certificate			
4. Processing time: 10 to 15 minutes	per tax declaration			
BASIC REQUIREMENTS (Clear Ph	otocopy of the following):			
1. Letter Request addressed to the C	City Assessor (original copy)	Applicant		
2. Electronic copy of Title		Registry of Deeds-Tr Dasmarinas City	rece Martires, Reg. of De	eds Kiosks- Robinsons
3.Real Property tax receipt/Tax Clea	rance	Treasurer's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Certified true copy of Title to window 1 to 5	1.1 Receive Certified true copy of Title check for completeness and accuracy.	None	2 minutes	Assigned personnel
	1.2 Issue order of payment			
2.Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9	2.Receive the payment and issue the Official Receipt	Processing Fee: Php 80.00 per tax declaration	3 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 1 or 5	3.1 Accept photocopy of Official Receipt		5 minutes	Assigned personnel
	3.2Start processing			Records Personnel
	3.3 Prepared certified true copy of Corrected Tax Declaration			Elmer Camerino Acting City Assessor
5. Get the document.	4. Release the document requested			
	TOTAL	Php 80.00 per tax declaration	15 minutes	





B. RECORDS OF ASSESSMENT MANAGEMENT SERVICES

14. VERIFICATION OF RECORDS OF ASSESSMENT

15. ISSUANCE OF CERTIFIED TRUE COPY OF LAND, BUILDING AND MACHINERY

16. ISSUANCE OF CERTIFICATE OF BEING TAX EXEMPT (FOR EDUCATIONAL, CHARITABLE, RELIGIOUS AND INSTITUTIONAL PROPERTIES)

This service pertains to verification and issuance of assessment records for the following purposes: reference for tax payment, for mortgage/loan/financial institutions, courts and many other legal purposes.

OFFICE OR DIVISION	City Assessor's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE			
1. FOR DECLARED PROPERTY O	WNER				
Signed photocopy of owner's one (1)	valid I.D. from the list below:	Government Agencies assigned such as:			
E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional Regulation	GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA,			
Commission (PRC) ID, Passport, Se	nior Citizen ID, SSS ID, Comelec/Voter's ID/	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth			
Comelec Registration Form, Integra	ted Bar of the Philippines (IBP) ID, Firearms				
License, AFPSLAI ID, PVAO ID, AFF	P Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,				
Person With Disability (PWD) ID, So	lo Parent ID, PantawidPamilya Pilipino				
Program (4Ps) ID, Barangay ID,					
Philippine Postal ID, Phil-health ID, S	School ID,				
FOR AUTHORIZED REPRESENTA	TIVE:				
*Authorization letter from the owner/s	s (1 original copy)				
**Notarized/Consularized Special Po	wer of Attorney (1 photocopy) or Secretary's				
Certificate with attached signed phot	ocopy of Gov't. issued I.D. of Corporate				
Secretary and Authorized Represent	ative				
***Notarized Deed of Sale/Memorane	dum or Contract of Agreement/Lease/Real	Person being represented			
Estate Mortgage if the title is not yet	transferred to the new owner of being leased				
(1 photocopy					
2. Certification fee of PHP80.00 per	certificate				
3. Processing time: 3 to 5 minutes pe	er certificate	Assessor's Office			
BASIC REQUIREMENTS (Clear Ph	otocopy of the following):				
1. Updated real Property tax receipt/	Tax Clearance Certificate	Treasurer's Office 17 to 19 & 15 or 23			
2. Electronic Copy of title					





CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to	1.1 Receive the required documents and	None	5 minutes	Assigned personnel
Window 1 to 5	check for completeness and accuracy.			
	1.2 Issue order of payment			
2. Pay the required fees showing	2. Receive the payment and issue the Official	Certification fee	2 minutes	City Treasurer's assigned
the Order of Payment at Treasurer	Receipt	Fee: Php 50.00		personnel
Office, Window 8 or 9.		per certified true		
		copy of tax dec;		
		Doc Stamp: Php		
		30.00 per certifcate	0 minutes	
3. Present O.R. to Assessor's office Window 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.2 Start processing the request	None	8 minutes	
	A. Verify records			Records personnel
	B. Prepare certificates			·
	C. Print certificate			
	D. Review			
	E. Recording			
	F. Final Approval			Elmer Camerino
				Acting City Assessor
				Ermily dela Cruz
				LAOO IV
				Edgardo I. Bautista;
				LAOO IV
	4. Release the document requested			Assigned personnel
	TOTAL	Php 80.00 per certified true copy of tax dec	14 minutes	





17. ISSUANCE OF CERTIFICATE OF NO IMPROVEMENT

This service is issued to a client who wishes to secure document certifying that their lot is actually vacant has no any improvement erected thereon, and usually used as reference for transfer of title or loan application.

or lille or loan application.				
City Assessor's Office				
Simple				
G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business				
All				
OF REQUIREMENTS	WHERE TO SECURE			
VNER				
valid I.D. from the list below:	Government Agencies assigned such as:			
ID, Driver's License, Professional	GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA,			
assport, Senior Citizen ID, SSS ID,	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth			
ration Form, Integrated Bar of the				
e, AFPSLAI ID, PVAO ID, AFP Beneficiary				
With Disability (PWD) ID, Solo Parent ID,				
ppine Postal ID, Phil-health ID, School ID,				
ΓIVE:				
s (1 original copy)				
	Person being represented			
rporate Secretary and Authorized				
-				
transferred to the new owner of being				
2	Person /company being represented			
alid I.D. of Corporate Secretary and				
certification applied	Treasurer's Office – Windows 8 or 9			
	Assessor's Office – Windows 1 to 5			
operty (every day from 8:30AM to 11:30 AM	Inspector Assessor's Office			
	City Assessor's Office Simple G2G - Government to Government; G2C – Gov			

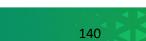




BASIC REQUIREMENTS (Clear pho	otocopy of the following):			
		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City		
2. Tax Declaration of Land		Assessor's Office - \	Windows 1 to 5	
3. Updated Realty Tax Receipt or Ta	x Clearance Certificate	Treasurer's Office –	Windows 8 or 9	
4. Affidavit of No Improvement (statin	ng that the subject	Applicant		
property is a vacant lot and has no ai	ny structures such as fence, house, etc.			
5. Printed colored photograph of late	st and actual condition of the property.	Applicant		
6. Sketch of exact location or Vicinity	map of the property	Person being repres	ented	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to Window 1 or 3	1.1 Receive the required documents and check for completeness and accuracy.1.2 Issue order of payment	None	5 minutes 5 minutes	Assigned personnel
2. Pay the required fees showing the Order of Payment at Treasurer Office	2. Receive the payment and issue the Official Receipt	Certification Fee: Php 50.00 per certificate; Doc Stamp: Php 30.00 per certifcate	5 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 1 or 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	
	3.2 Start processing the request.A. Plotting	None	25 minutes	Assigned appraisers and inspectors: Engr. Roy Ebio
	B. Ocular inspection			Inspector
	C. Issue Notice of Disapproval/ Sworn Statement and Affidavit, if found with improvement			Secretariat
	D. Printing			Tax Mapping Personnel







	F. Final Approval			Elmer Camerino OIC-City Assessor
4. Get the document.	4. Release the document requested	None	2 minutes	Assigned personnel
	TOTAL	Php 80.00 per	30 minutes	
		certificate		

18. ISSUANCE OF AGGREGATE PROPERTY HOLDINGS (WITH PROPERTY/NO PROPERTY)

This service is given to property owners or his duly authorized representatives, any government agency or private entity to who wish to obtain a listing of his property holdings as reference for tax payment and other legal purposes it may serve.

OFFICE OR DIVISION	ASSESSOR			
CLASSIFICATION	Simple – 3 DAYS			
TYPE OF TRANSACTION	G2G - Government to Government; G2C - Ge	overnment to Citizen; G2B – Government to Business		
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
1. FOR DECLARED PROPERTY OW	VNER			
Signed photocopy of owner's one (1)	valid I.D. from the list below:	Government Agencies assigned such as:		
E-Card/UMID, Employee's ID/ Office	ID, Driver's License, Professional Regulation	GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA		
Commission (PRC) ID, Passport, Ser	nior Citizen ID, SSS ID, Comelec/Voter's ID/	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth		
Comelec Registration Form, Integrate	ed Bar of the Philippines (IBP) ID, Firearms			
License, AFPSLAI ID, PVAO ID, AFF	P Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,			
Person With Disability (PWD) ID, Sol	o Parent ID, Pantawid Pamilya Pilipino			
Program (4Ps) ID, Barangay ID, Phili	ppine Postal ID, Phil-health ID, School ID,			
FOR AUTHORIZED REPRESENTAT	ΓIVE:			
*Authorization letter from the owner/s	s (1 original copy)			
**Notarized/Consularized Special Por	wer of Attorney (1 photocopy) or Secretary's			
Certificate with attached signed photo	pcopy of Gov't. issued I.D. of Corporate			
Secretary and Authorized Representative				
***Notarized Deed of Sale/Memorandum or Contract of Agreement/Lease/Real		Person being represented		
Estate Mortgage if the title is not yet transferred to the new owner of being leased				
(1 photocopy	-			
FOR CORPORATE OWNED PROPE	ERTY: Latest Secretary's Certificate			



with Attached signed photocopy of va authorized Representative.	alid I.D. of Corporate Secretary and			
1. Certification fee of PHP 80.00 per	certificate			
2. Processing time: 10-15 minutes pe				
	numerous deceased owners/heirs which			
require back tracing of records.				
BASIC REQUIREMENTS (Clear Ph	otocopy of the following):			
1. Updated real Property tax receipt/Ta	ax Clearance Certificate	Treasurer's Office, win	dow 17 to 19 & 15 or 23	
2. Electronic Copy of title		Applicant		
3. Notarized Extra-Judicial Settlement of		Applicant		
4. Death Certificate of deceased own		Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to Window 1 to 5	1.1 Receive the required documents and check for completeness and accuracy.1.2 Issue order of payment	None	2 minutes	Assigned Personnel
2. Pay the required fees showing the Order of Payment at Treasurer Office	2. Receive the payment and issue the Official Receipt	Certification Fee: Php 50.00 per certificate; Doc Stamp: Php 30.00 per certifcate	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	 3.2 Start processing the request A. Verify records B. Prepare certificates C. Print certificate D. Review E. Recording/Filing F. Final Approval 	None	2 days	Records personnel
				Elmer Camerino Acting City Assessor



				Ermily dela Cruz LAOO IV Edgardo I. Bautista LAOO IV
4. Get the document.	4. Release the document requested	None		Assigned personnel
	TOTAL	None	3 days	

19. ANNOTATION/CANCELLATION OF MORTGAGE ON TAX DECLARATION

This service pertains to cancellation or annotation of mortgage on tax declaration

OFFICE OR DIVISION	City Assessor's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G - Government to Government; G2C – Government to Citizen; G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST O	F REQUIREMENTS	WHERE TO SECURE			
1. FOR PROPERTY DECLARED OW	NER:				
Signed photocopy of owner's one (1) v	alid I.D. from the list below:	Government Agencies assigned such as:			
		GSIS/SSS, Employer's Company, Land Transportation Office, PRC, DFA			
E-Card/Umid, Employee's ID/ Office ID), Driver's License, Professional Regulation	COMELEC, IBP, BIR, Post Office, HDMF, Philhealth			
Commission (PRC) ID, Passport, Seni	or Citizen ID, SSS ID, Comelec/Voter's ID/				
Comelec Registration Form, Integrated	Bar of the Philippines (IBP) ID, Firearms				
License, AFPSLAI ID, PVAO ID, AFP I	Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,				
Person With Disability (PWD) ID, Solo	Parent ID, Pantawid Pamilya Pilipino				
Program (4Ps) ID, Barangay ID, Philip	pine Postal ID, Phil-health ID, School ID,				
FOR AUTHORIZED REPRESENTATI	VE:				
*Authorization letter from the owner/s ((1 original copy)	Person being represented			
***Notarized/Consularized Special Pov	ver of Attorney (1 photocopy) or Secretary's	Person being represented			
Certificate with attached signed					
photocopy of Gov't. issued I.D. of Corp	porate Secretary and Authorized				
Representative	-				
***Notarized Deed of Sale/Memorandu	im or Contract of	1			
Agreement/Lease/Real Estate Mortgag	ge if the title is not yet transferred to the				
new owner of being leased (1 photoco					



FOR CORPORATE OWNED PROPE	RTY: Latest Secretary's Certificate with			
Attached signed photocopy of valid I.E	D. of Corporate Secretary and authorized			
Representative.				
BASIC REQUIREMENTS:				
1. Certified True Copy of Title (1 origi	nal copy for titled property only)	Registry of Deeds-Tr Dasmarinas City, Ba	eceMartires, Reg. of Decoor City Hall	eds Kiosks- Robinsons
2.Tax Declaration of Land and building		Assessor's Office – \	Vindows 1 to 5	
3.Updated Realty Tax Receipt or Tax	Clearance Certificate (1 photocopy)	Treasurer's Office – '	Windows 17 to 19 & 15 t	io 23
4.FROM BANKS/FINANCIAL INSTITU	JTIONS: Original copy of	Financial Institutions		
mortgage/release of mortgage (1 origi	1,2,7			
FROM TRIAL COURTS: Original/certi		Trial Courts		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements to	•	None	2 minutes	Assigned Personnel
Window 1 to 5	check for completeness and accuracy. 1.2 Issue order of payment			
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9		Certification fee Fee: Php 50.00 per certified true copy of tax dec Doc Stamp: Php30.00 per certificate	2 minutes	City Treasurer's assigned personnel
3.Present O.R. to Assessor's office Window 1 or 5	3.1 Accept photocopy of Official Receipt and issue Claim stub3.2 Start processing the request		2 minutes	Assigned personnel
	 A. Verify records B. Annotate/cancel mortgage C. Prepare certificates D. Print certificate 		20 minutes	Records personnel





TOTAL	Php 50.00 per	1 day	
	certified true copy		
	of tax dec		

20. CANCELLATION OF RECORDS WITH DUAL OR ULTIPLE ASSESSMENT AND/OR PROPERTIES THAT ARE ALREADY TOTALLY DEMOLISEHED OR NO LONGER EXISTING

This service pertains to the issuance of Notice of Cancellation of Records of assessment for properties found out to be doubled or totally demolished

OFFICE OR DIVISION	City Assessor's Office					
CLASSIFICATION	Complex	Complex				
TYPE OF TRANSACTION	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE				
1. FOR PROPERTY DECLARED O	WNER:					
Signed photocopy of owner's one (1) valid I.D. from the list below:	Client				
E-Card/Umid, Employee's ID/ Office	ID, Driver's License, Professional Regulation					
Commission (PRC) ID, Passport, Se	nior Citizen ID, SSS ID, Comelec/Voter's ID/					
Comelec Registration Form, Integrat	ed Bar of the Philippines (IBP) ID, Firearms					
License, AFPSLAI ID, PVAO ID, AFI	P Beneficiary ID, BIR (TIN) ID, Pag-ibig ID,					
Person With Disability (PWD) ID, So	lo Parent ID, Pantawid Pamilya Pilipino					
	lippine Postal ID, Phil-health ID, School ID,					
FOR AUTHORIZED REPRESENTA	TIVE:					
*Authorization letter from the owner/	s (1 original copy)					
	ower of Attorney (1 photocopy) or Secretary's					
Certificate with attached signed		Person being represented				
photocopy of Gov't. issued I.D. of Co	orporate Secretary and Authorized					
Representative						
***Notarized Deed of Sale/Memoran						
÷ •	age if the title is not yet transferred to the					
new owner of being leased (1 photod						
FOR CORPORATE OWNED PROP	2					
with Attached signed photocopy of v	alid I.D. of Corporate Secretary and					
authorized Representative.						
BASIC REQUIREMENTS (CLEAR F	POTOCOPY OF THE FOLLOWING):					

CITIZEN'S CHARTER



1. Certified True Copy of Title (1 original copy for titled property only)		Registry of Deeds-TreceMartires, Reg. of Deeds Kiosks- Robinsons Dasmarinas City, Bacoor City Hall		
2. Tax Declaration of Land and build	ing(I photocopy)	Assessor's Office – Windows 1 to 5		
	x Clearance Certificate (1 photocopy)	Treasurer's Office – Windows 8 or 9		
4. Fire incident report/certificate (1 photocopy)		Bureau of Fire, Bara	ngay Captain	
5. Demolition Permit (1 Photocopy)		Office of the Building	Official	
6.Certificate of Business Closure/Re	tirement	BPLO, City Treasure	er, DTI/SEC	
7. Approved building plan/fencing pe	ermit; Occupancy Permit; bill of	Office of the Building	Official – 2ndFloor	
•	ed by Architect or Engineer, if there were new			
construction /structures already				
establishments constructed (1 photo	Registration, if there were already business	BPLO, DTI, SEC		
· ·	est and actual condition of the property.	Applicant		
10. Sketch Map of location of proper		Applicant		
11. Ocular inspection of the subject property (every day from 8:30AM to 11:30 AM and 1:00PM to 4:00 PM)		Appraiser and Inspectors of Assessor's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLI
1. Submit complete requirements to Window 1 to 5	1.1 Receive the required documents and check for completeness and accuracy.1.2 Issue order of payment	None	2 minutes	Assigned Personnel
2. Pay the required fees showing the Order of Payment at Treasurer Office, Window 8 or 9.	2. Receive the payment and issue the Official Receipt	Processing Fee: Php 25.00 per tax declaration	2 minutes	City Treasurer's assigned personnel
3. Present O.R. to Assessor's office Window 1 to 5	3.1 Accept photocopy of Official Receipt and issue Claim stub	None	2 minutes	Assigned personnel
	3.2 Start processing the request	None	6 days	
	A. Plotting			Engr. Roy Ebio Tax Mapper II and tax mapping

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CITIZEN'S CHARTER

	B. Ocular inspectionC. Preparation of ocular inspection report			Assigned appraisers and inspectors: Engr. Ken Dacatimbang LAOO II Engr. Joycell Bawalan LAOO I
	D. Numbering			Records Personnel
	E. Prepare Notice of Cancellation			Ermily dela Cruz LAOOIV
	F. Approval of Notice of Cancellation			Elmer Camerino Acting City Assessor
	G. Cancellation of Records			Records Personnel
4. Present claim stub to Window 1 to 5.	4. Release the document requested	None	2 minutes	Secretariat
	Fill-out Client Satisfaction	on Rating Form		
	TOTAL	Php 25.00 per tax declaration	7 days	







CITY CIVIL REGISTRAR'S OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

1. REGISTRATION OF BIRTH, MARRIAGE, AND DEATH CERTIFICATES (TIMELY)

Birth – It's complete expulsion or extraction of a duration of conception from its mother, irrespective of the duration of pregnancy, which after such separation, breathes or shows any other evidences of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut off or the placenta is still attached; each product of such birth is considered alive.

Marriage – is a special contract of permanent union between a man and a woman entered into in accordance with law of the establishment of conjugal and family life.

Death – is a permanent disappearance of all evidence of life at any time after live birth has taken place (postnatal cessation of vital functions without capability of resuscitation).

OFFICE OR DIVISION	City Civil Registrar's Office	City Civil Registrar's Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Four (4) copies of birth, marriage,	and death certificates, which must be	Birth (Hospital, Lying-In C	linics and Health Center		
accomplished correctly and comple	etely	Marriage (Church, Pastor,	Judge and Mayor)		
		Death (Hospital and Funer	ral Services)		
Additional Requirements for Cer	tificate of Death				
Transfer Permit of Cadaver				arde Medicion, Greengate	
		Malagasang, Plaridel Bayan Luma and Carsadang Bago)			
Entrance Permit of Cadaver		Different Municipalities and Cities			
Exhumation Permit		Building Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirements.	1.1 Interview the client.	None	20 minutes	(Birth)	
				Celia M. Sapida	
	1.2 Examine and check the documents.	None		Jett S. San Jose	
				Glenn Paul L. Villarosa	
				Ariel Mari C. Camerino	
				Rolly R. Melitante	
				(Marriage)	
				Carolina S. Saria	
				Renato B. Pangilinan	
				Renalyn Q. Topacio	
				(Death)	
				Debbie Jane S. Melo	





				Michael R. Miranda
2. Payment of Fees	2. Receive payment.	 Burial Permit – P 500.00 Transfer Permit – P 100.00 Transfer of Ashes - P 100.00 Transfer/exhumation of Cadaver - P100.00 Cremation Permit – P 1,000.00 AUSF – P200.00 	10 minutes (stop time)	City Treasurer's Office
3. Present Official Receipt (OR)	3.1 Registration of document with registry number.	None	5 minutes	(Birth) Celia M. Sapida Jett S. San Jose Glenn Paul L. Villarosa Ariel Mari C. Camerino Rolly R. Melitante (Marriage) Carolina S. Saria Renato B. Pangilinan Renalyn Q. Topacio (Death) Debbie Jane S. Melo Michael R. Miranda
	3.2 Sign the document.	None	5 minutes	Randy Gonzales OIC – Civil Registrar
4. Claim the registered documents.	4. Release the document.	None	5 minutes	CCRO Personnel
		faction Rating Form	· · · · ·	
	TOTAL	Based on assessment	45 minutes	

NOTE : Additional payment for Certification - Documentary Stamp Tax (P 30.00)







OFFICE OR DIVISION	City Civil Registrar's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE		
Birth, marriage and death certificat	es and other civil registry documents	City Civil Registrar Off	ice			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit request slip.	1.1 Database/ archive search.	None	10 minutes	Joselito S. Camia Maricia S. Gonzales		
	1.2 Issuance of order payment.	None		Shanielyn H. Ramirez Glenn Paul L. Villarosa		
2. Payment of Fees	2. Receive payment.	P 100.00 P30.00 (Documentary Stamp Tax)	5 minutes	City Treasurer's Office		
3.Present Official Receipt (OR)	3.1 Check and certify the documents.	None	5 minutes	CCRO Personnel		
	3.2 Record the OR.	None		CCRO Personnel Randy Gonzales		
	3.3 Sign the document.			OIC – Čivil Registrar		
4. Claim the Certified Copy	4. Release the document.	None	5 minutes	CCRO Personnel		
	Fill-out Client Sati	sfaction Rating Form				
	ΤΟΤΑΙ	P 130.00	25 minutes			

2. ISSUANCE OF CERTIFIED COPIES OF BIRTH, MARRIAGE AND DEATH CERTIFICATES AND OTHER CIVIL REGISTRY DOCUMENTS





3. REGISTRATION OF COURT ORDERS (CO)/DECREES AND REQUEST OF ANNOTATED RECORD

The Civil Registry office where the event of the decree/order was registered shall forward a certified true copy of the decision to the office of the Civil Registrar where an event affected was originally registered.

Registrar where an event affected wa				
OFFICE OR DIVISION	City Civil Registrar's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All	-		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
Original/certified photo copy of the court order/decision		Court where he/she can file	order/decision	
Certificate of Finality		Court where he/she can file	order/decision	
Certificate of Authenticity		Court where he/she can file	order/decision	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements.	1.1 Check and examine the documents for registration and annotation.1.2 Issuance of order payment.	None	10 minutes	Cynthia E. Ochosa
2. Payment of fees.	2. Receive payment.	 Annulment - P500.00 Adoption - P 500.00 Correction - P500.00 Certified photocopy of court order (CO)-P100.00 Endorsement-P100.00 Certified photocopy of Annotated Record P130.00 	10 minutes (stop time)	City Treasurer's Office
3. Present Official Receipt.	 3.1 Registration of Court Order and Annotation to the Affected Civil Registry Record. 3.2 Prepares certificate of court registration, annotated Civil Registry record and certified photocopy of CO and 	None	20 minutes	CCRO Personnel

CITIZEN'S CHARTER



	endorsement letter to PSA, Sta. Mesa, Manila			
4.1 Claim the Requested Record	4.1 Review, approve and sign the documents.	None	5 minutes	Randy B. Gonzales OIC – City Civil Registrar
4.2 Sign the logbook.	4.2 Record and release court registration.	None	5 minutes	Cynthia E. Ochosa
	Fill-out Client Satis	sfaction Rating Form		
	TOTAL	Based on assessment	50 minutes	

NOTE : Additional payment for Certification - Documentary Stamp Tax (P 30.00)

4. REGISTRATION OF LEGAL INSTRUMENTS/LEGITIMATION OF NATURAL CHILD

Legitimation is a remedy by means of which those who in fact were not born in wedlock and should, therefore, be considered illegitimate, are, by fiction, considered legitimate, it being supposed that they were born when their parents were already validly married.

OFFICE OR DIVISION	City Civil Registrar's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CENOMAR (Certificate of No Marriage) of Husband and Wife		Philippine Statistics Authority (PSA)		
Marriage Contract (PSA copy) if not solemnized in Imus, Cavite		Philippine Statistics Authority (PSA)		
Birth Certificate		City Civil Registrar Office		
Affidavit of Legitimation		City Civil Registrar Office/ Notary Public		
Affidavit of Acknowledgement if father is N/A on COLB		City Civil Registrar Office/ Notary Public		
Residence Certificate		City Treasurer's Office		
Appearance of Parents				
Republic Act 9255 - Affidavit to Use the Surname of the Father (AUSF)		City Civil Registrar Office/ Notary Public		
1. a. affidavit of paternity / acknowled authorization,	Igement, voluntary emancipation/parental	City Civil Registrar Office/ Notary Public		
* all legal instruments executed abroad must be registered at the city civil registry office of Manila				



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements.	1.1 Check and verify the requirements for registration and annotation.	None	5 minutes	Celia M. Sapida Ariel Mari C. Camerino
	1.2 Issuance of order payment.	None		
2. Payment of fees	2. Receive payment.	 Legitimation Fee – P 500.00 Certification - P 100.00 Deed of Legitimation - P 100.00 Registration Fee - P 200.00 Affidavit of Acknowledgement - P 200.00 	10 minutes (stop time)	City Treasurer's Office
		 AUSF P200.00 		
3. Present the OR.	3.1 Prepare certificate, endorsement letter and annotate registered documents.	None	20 minutes	CCRO Personnel
	3.2 Review, approve and sign the documents.	None	5 minutes	Randy B. Gonzales OIC – City Civil Registrar
4. Claim the document.	4. Release the document	None	5 minutes	CCRO Personnel
	Fill-out Client Satis	sfaction Rating Form		
	TOTAL	Based on assessment	45 minutes	

NOTE : Additional payment for Certification - Documentary Stamp Tax (P 30.00)







OFFICE OR DIVISION	City Civil Registrar's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
PSA-Negative Result Certification		Philippine Statistics Aut	Philippine Statistics Authority (PSA)			
Certified true copy/photocopy of Civil registry documents		City Civil Registrar Offic	City Civil Registrar Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Request for an endorsement of his/her record to PSA.		None	10 minutes	Celia M. Sapida Rolly R. Melitante		
	1.2 Issuance of order payment.	None		Jett S. San Jose Ariel Mari C. Camerino Glenn Paul L. Villarosa		
2. Payment of fees	2. Receive payment	P 100.00 P 30.00 (Documentary Stamp Tax)	10 minutes (stop time)	City Treasurer's Office		
3. Present the Official Receipt (OR)	3.1 Prepare the endorsement letter.	None	5 minutes	CCRO Personnel Randy B. Gonzales		
	3.2 Review and approval.	None	3 minutes	OIC – City Civil Registrar		
4. Claim the endorsement.	4. Release the document	None	2 minutes	CCRO Personnel		
	Fill-out Client Sa	tisfaction Rating From				
	TOTAL	0	30 minutes			

5. ENDORSEMENT OF REGISTRY RECORDS TO THE CIVIL REGISTRAR-GENERAL

Note: Mail the documents to Provincial Statistics Office (PSA) follow-up after 5 days to 7 working days by the client.





6. DELAYED AND OUT OF TOWN REGISTRATION OF BIRTH, MARRIAGE AND DEATH CERTIFICATE OF CIVIL REGISTRY RECORDS

OFFICE OR DIVISION City Civil Registrar's Office **CLASSIFICATION** Highly-Technical G2C – Government to Citizen **TYPE OF TRANSACTION** WHO MAY AVAIL THE SERVICE All CHECKLIST OF REQUIREMENTS WHERE TO SECURE For Birth Certificate: Philippine Statistics Authority (PSA) Negative Result Philippine Statistics Authority (PSA) Affidavit of Two (2) Disinterested Persons Notary Public COMELEC Voter's Affidavit Church where he/she baptized **Baptismal Certificate** School Records School Marriage Certificate (if married) Philippine Statistics Authority (PSA) or Civil Registrar Office **Residence Certificate of Parents** Treasurer's Office Medical Records Hospitals/Clinics For Marriage and Death Certificate: Philippine Statistics Authority (PSA) Negative Result Philippine Statistics Authority (PSA) Affidavit of Delayed Registration Notary Public Affidavit of Two (2) Disinterested Persons Notary Public **CLIENT STEPS AGENCY ACTION FEES TO BE PAID PROCESSING TIME** PERSON RESPONSIBLE Submit 1.1 Interview the client and evaluate the (Birth) 1. complete None 15 minutes Celia M. Sapida requirements. submitted requirements. Ariel Mari C. Camerino 1.2 Database / Archive search. None Jett S. San Jose (Marriage) 1.3 Issuance of claim stub. None Carolina S. Saria 1.4 Process, record, and register the None documents (Death) Debbie Jane S. Melo 1.5 Issuance of order payment. Michael R. Miranda None 2. Payment of fees. 2. Receive payment. P 200.00 10 minutes City Treasurer's Office • (stop time)

A report of vital event made beyond the reglementary period is considered delayed.

CITIZEN'S CHARTER



		• P 300.00 - Out of town		
3.1 Present the Official Receipt (OR)	3.1 Approve and sign the documents.	None	3 minutes	Randy B. Gonzales OIC – City Civil Registrar
	3.2 Publication Posting day	None	10 days	
3.2 Present claiming stub and get the document.	3.3 Release the document	None	2 minutes	CCRO Personnel
	Fill-out Client Satis	sfaction Rating Form		
	TOTAL	Based on assessment	10 days and 30 minutes	

Note: Out of Town Registration are forwarded to the corresponding towns/cities for registration by the client. Release documents after 10 calendar days. (Administrative Order No. 1 Series of 1993)







7. ISSUANCE OF MARRIAGE LICENSE

A license contains important details of marriage, such as the wedding date and place, and is a formal requirement to marry anywhere in the Philippines. It is proof that your marriage took place and that your partner is your legal spouse.

	and that your partner is your legal spouse.			
OFFICE OR DIVISION	City Civil Registrar's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
Certified True/Xerox copy of birth cer	rtificate of applicants	Philippine Statistics Auth	ority (PSA) or Civil Regis	trar Office
Certificate of No Marriage (CENOMA	NR)	Philippine Statistics Auth	ority (PSA)	
Barangay Clearance		Respective Barangay		
Pre-Marriage Counseling Certificate		PopCom Office		
Family Planning Seminar		PopCom Office		
Certificate of Death (if widowed)		Philippine Statistics Auth		
Annotated Certificate of Marriage (if		Philippine Statistics Offic	e (PSA)	
Legal capacity to marry from respective embassy in the Philippines (if foreigner)		Respective Embassy		
Judicial Decree of absolute divorce (if divorced)		Court		
Parental consent (if applicant is 18 years old but below 20 years old)		City Civil Registrar Office)	
Parental Advice (if applicant is 21 ye	ars old but below 25 years old)	City Civil Registrar Office		
••At least one of the contracting part	ies must be a resident of the place where			
the local civil registry office is located				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Submit complete requirements.	1.1 Assess the documents.	None	5 minutes	Carolina S. Saria Renato B. Pangilinan
1.2 Fill out the application form.(Contracting parties both sign the application form)	1.2 Receive, review and check the accomplished application.	None	5 minutes	Renalyn Q. Topacio
	1.3 Issuance of order payment.	None	2 minutes	
2. Payment of fees	2. Receive payment	 Application - P 300.00 License - P 50.00 	10 minutes (stop time)	City Treasurer's Office





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	TOTAL	Based on assessment	10 days and 45 minutes	
		sfaction Rating Form		
6. Present claiming stub and get the license.	6. Release the license.	None	5 minutes	CCRO Personnel
	5.4 Record in the logbook.	None	5 minutes	CCRO Personnel
	5.4 Review and sign.	None	5 minutes	Randy B. Gonzales OIC – City Civil Registrar
	5.3 Publication Posting Day	None	10 days	
	 5.2 Prepare documents Marriage license application Advice upon intended marriage Consent to marriage of a person underage 	None	5 minutes	
5. Submit PMC Seminar certification	5.1 Receive PMC certificate. Issuance of claim stub.	None	10 minutes	Carolina S. Saria Renato B. Pangilinan
4. Attend Pre-Marriage Counselling (PMC) Seminar	4. Conduct Pre-Marriage Counselling (PMC) Seminar.	None	(stop time)	Population Development Office
3.1 Present the Official Receipt (OR) 3.2 Receive referral stub	3. Issuance of referral stub for Pre Marriage Counselling (PMC) Seminar. (POPDEV Office)	None	3 minutes	CCRO Personnel
		Pre-Nuptial Agreement - P 200.00		

Note: Release after 10 days publication period. (Administrative Order No. 1 Series of 1993) Additional payment for Certification - Documentary Stamp Tax (P 30.00)







8. MARRIAGE LICENSE VERIFICATION

8. MARRIAGE LICENSE VERIFICAT				
OFFICE OR DIVISION	City Civil Registrar's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
PSA Marriage Contract		Philippine Statistics Au	thority (PSA)	
Letter Request		Client		
Valid ID of the Requestor		Client		
Authorization letter (if the applicant is		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Marriage contract and Letter Request	Letter	None	3 minutes	Deborah C. Achas Marianne E. Alcoseba
2. Payment of Fees	1.2 Issuance of order payment.2. Receive payment	P 100.00 P 30.00 (Documentary Stamp Tax)	10 minutes (stop time)	City Treasurer's Office
3. Present the Official Receipt (OR)	3.1 Verification of marriage license in the registry book of application for marriage licenses.3.2 Prepare the certification	None	3 days	Deborah C. Achas
	3.3 Approval and sign the certification			Randy B. Gonzales OIC – City Civil Registrar
4. Claim the document	4.1a Issue certification of no record if the verified license is not in the registry book.	None	2 minutes	Marianne E. Alcoseba
	4.1b Issue certification if has record in the registry book.			
	4.2 Record in the logbook.	None	5 minutes	
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL		3 days and 20 minutes	





NO. 9048 (DIRECT OR MIGRANT)			
OFFICE OR DIVISION	City Civil Registrar's Office		
CLASSIFICATION	Simple		
TYPE OF TRANSACTION	G2C – Government to Citizen		
WHO MAY AVAIL THE SERVICE	All		
	F REQUIREMENTS	WHERE TO SECURE	
Petition for Change of First Name			
PSA & CCR copies of Birth Certificate	e	Philippine Statistics Authority (PSA)	
Baptismal Certificate		Church	
School records or medical records		School	
Marriage Contract, if applicable		Philippine Statistics Authority (PSA)	
Birth Certificates of children, if application	able	Philippine Statistics Authority (PSA)	
Barangay Clearance		Barangay	
NBI Clearance		NBI Offices	
Police Clearance		Police	
	ing administrative or criminal case from	Employer/Notary Public	
employment (affidavit of non-employr	ment if not employed)		
		Notary Public	
		Client	
Affidavit of publication with newspape		Publishing Company	
		eeks in a newspaper of general circulation.	
		Photocopies of each document (if migrant)	
	concerned Local Civil Registrar. Follow –u		
	Errors in Middle Name, Last Name and c		
PSA & CCR copies of document to b	e corrected	Philippine Statistics Authority (PSA)	
Baptismal Certificate		Church	
		Philippine Statistics Authority (PSA)	
Marriage Contract of Parents, (if appl		Philippine Statistics Authority (PSA)	
Birth Certificates of brothers and siste		Philippine Statistics Authority (PSA)	
Birth Certificates of children, (if applic	cable)	Philippine Statistics Authority (PSA)	
Marriage Contract (if married)		Philippine Statistics Authority (PSA)	
Affidavit of Discrepancy		Notary Public	
Valid IDs	decurrent (if registered in Image) Four (4)	client	

9. PROCESSING OF PETITION FOR CHANGE OF FIRST NAME (CFN) AND CORRECTION OF CLERICAL ERROR/S (CCE) PURSUANT TO REPUBLIC ACT NO. 9048 (DIRECT OR MIGRANT)

Note: Three (3) Photocopies of each document (if registered in Imus), Four (4) Photocopies of each document (if migrant)

CITIZEN'S CHARTER



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. File and submit required petition.	 1. 1 Checking of submitted supporting documents 1.2 Issuance of order payment 	None	5 minutes	Deborah C. Achas Marianne E. Alcoseba Michael I. Caguyong
2. Payment of fees	2. Receive payment	 Petition for CFN - P3,000.00 Petition for CCE - P1,000.00 Migrant Petition for 	10 minutes (stop time)	City Treasurer's Office
Present the OR		CFN - P1,000.00 • Migrant Petition for CCE - P500.00		
3. Present the Official Receipt (OR)	3.1 Prepares petition and ask the petitioner to sign	None	30 minutes	Deborah C. Achas Marianne E. Alcoseba Michael I. Caguyong
	3.2 Give the petitioner a stub as to how and when to follow up the petition	None	15 minutes	
	3.3 Signing of Approved petition by the Civil Registrar	None	5 minutes	Randy B. Gonzales OIC – City Civil Registrar
	3.4 Publication for CFN and posting for clerical error	None	10 days	Publishing Company
		sfaction Rating Form	· · · · · · · · · · · · · · · · · · ·	
	TOTAL	Based on assessment	10 days, 1 hour and 5 minutes	

Note : Additional payment for Certification - Documentary Stamp Tax (P 30.00)







10. PROCESSING OF PETITION FOR CORRECTION OF CLERICAL/TYPOGRAPHICAL ERRORS IN MONTH AND DATE OF BIRTH AND SEX OF A PERSON APPEARING IN CERTIFICATE OF LIVE BIRTH PURSUANT TO REPUBLIC ACT No. 10172) (DIRECT OR MIGRANT)

OFFICE OR DIVISION	City Civil Registrar's Office		
CLASSIFICATION	Highly-Technical		
TYPE OF TRANSACTION	G2C – Government to Citizen		
WHO MAY AVAIL THE SERVICE	All		
	OF REQUIREMENTS	WHERE TO SECURE	
	Errors in Month and Date of Birth		
PSA & CCR copies of Birth Certifica		Philippine Statistics Authority (PSA)	
Baptismal Certificate		Baptismal	
School Records/Medical Records/C	ertificates	School	
Barangay Clearance		Barangay	
NBI Clearance		NBI Offices	
Police Clearance		Police	
Clearance Certificate of no pend employment (affidavit of non-employ	ing administrative or criminal case from	Notary Public	
Affidavit of Discrepancy/Two Disinte		Notary Public	
Marriage Contract (if married)		Philippine Statistics	
		Authority (PSA)	
Valid IDs		Client	
Affidavit of publisher with newspape		Publishing Company	
Note: Three (3) Photocopies of each Note: Transmittal of Petition to PSA	Vconcerned Local Civil Registrar. Follow –up		
Petition for Correction of Child's			
PSA & CCR copies of Birth Certifica		Philippine Statistics Authority (PSA)	
Baptismal Certificate		Church	
		School	
		Hospitals and Clinics	
Barangay Clearance		Barangay	
NBI Clearance		NBI Offices	
Police Clearance		Police	
employment (affidavit of non-employ	ling administrative or criminal case from yment if not employed)	Notary Public	





has not undergone sex change/trans	enter) attesting that owner of the document	City Health Office		
Marriage Contract (if married)		Philippine Statistics Authority (PSA)		
Affidavit of Discrepancy		Client		
Valid IDs		Notary Public		
Affidavit of publisher with newspape	r clipping	Publishing Company		
Note : Three (3) Photocopies of each Note : Transmittal of Petition to PSA	east once a week for two (2) consecutive we n document /concerned Local Civil Registrar. Follow –u nality and annotated civil registry document	o after 2 months for the	result and decision of the	OCRG
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE
1. File and submit required petition.	1.1 Checking of submitted supporting documents1.2 Issuance of order payment	None None	5 minutes	Deborah Achas Marian E. Alcoseba Michael I. Caguyong
2. Payment of fees.	2. Receive payment.	 Petition for CCE R. 10172 P3,000.00 Migrant Petition for CCE RA 10172 P1,000.00 	(stop time)	City Treasurer's Office
3. Present the Official Receipt	3.1 Prepares petition and ask the petitioner to sign	None	20 minutes	Deborah Achas Marian E. Alcoseba
	3.2 Give the petitioner a stub as to how and when to follow up the petition	None		Deborah Achas Marian E. Alcoseba
	3.3 Review and sign the petition	None		Randy B. Gonzales OIC – City Civil Registrar
	3.4 Publication for CCE under R.A. 10172 and posting for clerical error	None		Publishing Company
		faction Rating Form	1	
	TOTAL	Based on assessmer	nt 35 minutes	

Note : Additional payment for Certification - Documentary Stamp Tax (P 30.00)

CITIZEN'S CHARTER



11. REGISTRATION OF FOUNDLING/ABANDONED CHILDREN

Foundling is a deserted or abandoned infant or a child found, with parents, guardian, orphanage or charitable or similar institution with unknown facts of birth and parentage.

biliti alla parontago.				
OFFICE OR DIVISION	City Civil Registrar's Office	City Civil Registrar's Office		
CLASSIFICATION	Simple	Simple		
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen		
WHO MAY AVAIL THE SERVIC	E All			
CHECKL	IST OF REQUIREMENTS		WHERE TO SECU	JRE
Duly accomplished certificate of	Foundling	DSWD		
Police Report		Police		
Affidavit of finder stating the facts child	and circumstances surrounding the finding of the	Notary Public		
Barangay Report		Barangay		
DSWD Certificate		DSWD		
Certificate of Foundling		DSWD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requirements.	1.1 Receive and evaluate the documents.	None	5 minutes	Debbie Jane S. Melo Michael R. Miranda
	1.2 Check and sign for approval.	None		Randy B. Gonzales OIC – City Civil Registrar
2. Claim the document	2. Register and Release the document.	None	5 minutes	Randy B. Gonzales OIC – City Civil Registrar
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	10 minutes	

CITIZEN'S CHARTER



12. REGISTRATION OF SUPPLEMENTAL REPORT

The Supplemental Report may be filed by the parent/guardian or the party concerned, if of age, who shall execute an affidavit indicating the entry/ies missed in the registration and the reason/s why there was a failure in supplying the required entry.

OFFICE OR DIVISION	City Civil Registrar's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen	32C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All				
	OF REQUIREMENTS		WHERE TO SECU	JRE	
Affidavit for Supplemental Report		Notary Public			
PSA Birth Certificate/Death Ce		Philippine Statistics A			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit complete requirements.	1.1 Check and verify the requirements	None	5 minutes	Celia M. Sapida Jett S. San Jose	
	1.2 Issuance of order payment				
2. Payment of fees.	2. Receive payment	P 200.00	10 minutes (stop time)	City Treasurer's Office	
3. Present Official Receipt (OR)	3.1 Prepare supplemental report and endorsement letter.	None	10 minutes	CCRO Personnel	
	3.2 Review and sign the documents.	None		Randy B. Gonzales OIC – City Civil Registrar	
	3.3 Sort and file the supplemental report.	None		Celia M. Sapida	
4. Claim the document.	4. Release the document.	None	5 minutes	CCRO Personnel	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	P 200.00	30 minutes		





13. ISSUACE OF AUTHENTICATED CIVIL REGISTRY DOCUMENTS SUCH AS BIRTH, MARRIAGE, DEATH CERTIFICATE AND CERTIFICATE OF NO MARRIAGE (CENOMAR)

The PSA is mandated by law to keep and preserve the birth, marriage, and death certificates of a Filipino citizen. These certificates are the bases for establishing the legal status of each and every Filipino.

stabilishing the legal status of cach a				
OFFICE OR DIVISION	City Civil Registrar's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
Birth, Marriage and Death Certificate		Philippine Statistics Authority (PSA)		
Certificate of No Marriage (CENOMA	AR)	Philippine Statistics Authority (PSA)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Philippines Statistics Authority (PSA) form.	1.1 Check if information is complete and readable.	None	8 minutes	Maricia S. Gonzales Shanielyn H. Ramirez Joselito S. Camia
	1.2 Issuance of order payment.	None		
2. Payment of fees.	2. Receive of payment.	 City - P100.00 PSA - Birth, Marriage and Death - P155 CENOMAR – P 210 	10 minutes (stop time)	City Treasurer's Office
3.1 Present the Official Receipt(OR)3.2 Present the Claim Stub	3. Release the document	None	2 minutes	Maricia S. Gonzales Shanielyn H. Ramirez Joselito S. Camia
	Fill-out Client Sati	sfaction Rating Form		
	TOTAL		20 minutes	
lata: Palazsa aftar 2 ta 3 waaks PSA		Based on assessment	20 mmates	

Note: Release after 2 to 3 weeks PSA copy.



CITIZEN'S CHARTER

PERSONS WITH DISABILITY AFFAIRS OFFICE (PDAO) EXTERNAL SERVICE







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1. APPLICATION OF PERSONS WITH DISABILITY (PWD) IDENTIFICATION CARDS AND PURCHASE BOOKLETS

The office in compliance with the Republic Act 7277 (Magna Carta for Disabled Persons) is mandated to provide assistance to persons with disabilities in the City of Imus. And to maintain and regularly update the list of PWDs and issue individual PWD identification cards and purchase booklets;

OFFICE OR DIVISION	Persons with Disability Affairs Office (PDAO)
CLASSIFICATION	Simple
TYPE OF TRANSACTION	G2C - Government to Citizens
WHO MAY AVAIL THE SERVICE	All Qualified and Registered Persons with Disability who are Residents of the City of Imus. The specified beneficiaries are as follows: The Department of Health updated and issued Administrative Order No. 2013-0005 entitled "National Policy on the Unified Registry Systems of the Department of Health." The revised Philippine Registry for PWDs Version 4 now enumerated the following types of disability:
	 Deaf or Hard of Hearing – refers to people with hearing loss, implies little or no hearing/ranging from mild to severe hearing loss, also known as hearing impairment means the complete or partial loss of the ability to hear from one or both ears with 26dB or greater threshold, averaged at frequencies '0.5, 1, 2, 4 kilohertz;
	 Intellectual Disability – a significantly reduced ability to understand new or complex information and to learn and apply new skills. Learning Disability – persons who, although normal in sensory, emotional, and intellectual abilities, exhibit disorders in
	 perception, listening, thinking, writing, spelling and arithmetic. Mental Disability – disability resulting from organic brain syndrome and or mental illness (psychotic or non-psychotic disorders);
	 Physical Disability – is a restriction of ability due to too any physical impairments that affect a person's mobility, function, endurance, or stamina to sustained prolong physical ability, dexterity to perform tasks skillfully, and quality of life. Causes may be hereditary or acquired from trauma, infection, surgical or medical condition, and include the following disorders, namely: 1) Musculoskeletal or orthopedic disorders (2) Neurological disorders (3) cardiopulmonary diseases (4) Pediatric and congenital disorders.
	 Psychosocial Disability – any acquired behavioral, cognitive, emotional, or social impairment that limits one or more activities necessary to effective interpersonal transactions and other civilizing processes or activities to daily living such as but not limited to deviancy or anti-social behavior.
	 Speech and Language Impairment – one or more speech/language disorders of voice, articulation, rhythm, and/or the receptive and expressive processes of language; Viewel Disorbility – a percent with a viewel disorbility (impairment) is one who has impairment of viewel functioning over after
	 Visual Disability – a person with a visual disability (impairment) is one who has impairment of visual functioning even after treatment and. or standard refractive correction and has visual acuity in the better eye of less than 6/18 for low vision and 3/60 for the blind, or a visual field of fewer than 10 degrees from the point of fixation. A certain level of visual impairment is defined as legal blindness. One is legally blind when your best-corrected central visual acuity in your better eye is 6/50 or worse or your side vision is,20 degrees or less in the better eye;





 their usual boundaries, and wh Rare Disease (RA 10747) re occurrences as recognized by t 	plasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond ich then invade adjoining parts of the body and spread to other organs; efers to disorders such as inherited metabolic disorders and other diseases with similar rare the DOH upon recommendation of the NIH but excluding catastrophic (i.e. life-threatening, seriously onic) forms of more frequently occurring diseases.
For Application of NEW PWD Identification Card	WHERE TO SECURE
Duly accomplished Application Form	PDAO
Two (2) pcs. 1x1 ID picture	Client
Recent Certificate of Disability (indicating the disability due to illness)	Registered Doctor (SPECIALIZED in the disability) / PDAO Officer / City Health Officer – Imus/ ANY GOVERNMENT PHYSICIAN (for <i>APPARENT DISABILITY ONLY</i>) REQUIRED: ANY GOVERNMENT PHYSICIAN (for <i>NON-APPARENT DISABILITY</i>)
ONE VALID GOVERNMENT ISSUED ID (with IMUS Address)	Client
Blood Type (optional)	Client
Affidavit of Guardianship if the contact person or guardian is not an immediate family of patient	Client
For RENEWAL of PWD Identification Card	
Duly accomplished Application Form	PDAO
Two (2) pcs. 1x1 ID picture	Client
Updated Certificate of Disability (indicating the disability due to illness)	Registered Doctor (SPECIALIZED in the disability) / PDAO Officer / City Health Officer – Imus/ ANY GOVERNMENT PHYSICIAN (for <i>APPARENT DISABILITY ONLY</i>) REQUIRED: ANY GOVERNMENT PHYSICIAN (for <i>NON-APPARENT DISABILITY</i>)
ONE VALID GOVERNMENT ISSUED ID (with IMUS Address)	Client
Blood Type (optional)	Client
For Replacement of LOST PWD Identification Card	
Duly accomplished Application Form	PDAO
Two (2) pcs. 1x1 ID picture	Client
Notarized Affidavit of Loss	Notary Public
ONE VALID GOVERNMENT ISSUED ID (with IMUS Address)	Client
For Replacement of DAMAGED PWD Identification Card	
Duly accomplished Application Form	PDAO

CITIZEN'S CHARTER



Two (2) pcs. 1x1 ID picture		Client		
Notarized Affidavit of Mutilation		Notary Public		
ONE VALID GOVERNMENT ISSUE	ED ID (with IMUS Address)	Client		
For Correction of Discrepancy on	PWD Identification Card			
Duly accomplished Application Form		PDAO		
Two (2) pcs. 1x1 ID picture		Client		
Notarized Affidavit of Discrepancy		Notary Public		
ONE VALID GOVERNMENT ISSUE	ED ID (with IMUS Address)	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1.1 Verify and approve the submitted requirements.	None	2 minutes	Mary Ann S. Saniel; Richard A. Camama
	1.2 Encoding of client information to PRPWD.	None	3 minutes	Jacquelyn C. Silla; Mary Ann S. Saniel
	1.3 Process the request	None	6 minutes	Joerella L. Castillo; Marian Nicole C. Delizo; Jacquelyn C. Silla
2. Receive the PWD ID and booklet	2.1 Brief orientation on the use of PWD ID	None	1 minute	Joerella L. Castillo; Marian Nicole C. Delizo; Jacquelyn C. Silla
	2.2 Release the PWD ID with PWD Booklet	None	1 minute	Joerella L. Castillo; Marian Nicole C. Delizo; Jacquelyn C. Silla
		Client Satisfaction Rating Form	1	
	TOTAL	None	13 minutes	







2. APPLICATION FOR FINANCIAL ASSISTANCES

The office in compliance with the Republic Act 7277 (Magna Carta for Disabled Persons) is mandated to provide assistance to the persons with disabilities in the City of Imus. And design and implement yearly work programs and projects in accordance with R.A. 7277 (Magna Carta for Disabled Persons), Batas Pambansa 344 (Accessibility Law) and the UN Convention on the Rights of PWDs (UNCRPD); Advocate for equal opportunity and accessibility of PWDs the programs for education, employment, health, socio-cultural and sports development;

OFFICE OR DIVISION	Persons with Disability Affairs Office	(PDAO)		
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C - Government to Citizens			
WHO MAY AVAIL THE SERVICE	All Qualified and Registered Persons wit	All Qualified and Registered Persons with Disability that are residents in the City Of Imus		
	REQUIREMENTS	WHERE TO SECURE		
For Medical Assistance				
Original and fully filled up Baranga FINANCIAL ASSISTANCE)	ay Indigency of claimant (purpose of	Clients Respective Punong Barangay's Office		
Original COMELEC Certificate under	the name of the claimant	COMELEC Office in the City of Imus		
Photocopy of claimant's ID (Back-to-ba	ck)	Client		
Photocopy of PWD ID (Back-to-back)		Client		
PWD (with License Number of the Doc · With medical prescriptio · With Laboratory tests/pr · With Treatment Protoc (Photocopy) or · With tentative Hospital E	n (Photocopy) or ocedure requests (Photocopy) or ol for chemotherapy and hemodialysis Bill	Registered Doctor (specialized in the disability / City Health Officer - Imus		
For Educational Assistance (upon a				
Original School Certificate of Enrollme		Respective Schools where the PWD is enrolled		
Barangay Indigency, under the name ASSISTANCE	of the claimant purpose of FINANCIAL	Clients Respective Punong Barangay's Office		
Original COMELEC Certificate under	the name of the claimant	COMELEC Office in the City of Imus		
Photocopy of claimant's ID (Back-to-ba	ck)	Client		
Photocopy of PWD ID (Back-to-back)		Client		
For Mobility/Wheelchair Assistance				
Whole Body Picture of the PWD ben disability is recognizable	eficiary, in any size, where the apparent	Client		





Barangay Indigency, under the name of the claimant purpose of Clients Respective Barangay Captain's Office WHEELCHAIR ASSISTANCE				
Original COMELEC Certificate under	er the name of the claimant	COMELEC Office in the City	y of Imus	
Photocopy of claimant's ID		Client		
Photocopy of PWD ID		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements with filled out PDAO Assistance Assessment form	1.1 Review, Interview, Received and Checked the requirements	None	3 minutes	Mariane Nicole C. Delizo Joerella C. Castillo
	1.2 Assess and Approve the requirements	None	2 minutes	Mary Ann S. Saniel Richard A. Camama
	1.3 Assessment and E-Registration of the social worker from the Office of the Aksyon Center and Prepare Transaction Slip.	None	5 minutes	Social Worker from the office of Aksyon Center
2. Proceed to process of Disbursement Voucher	2. Verify account and let the client sign to Intake Sheet	None	5 days	Joerella C. Castillo
3. Proceed to Treasury Department for the release and claim of cash assistance	3. Release financial assistance.	None	1 minute	City Treasurer's Office
	Fill-out Client Sa	tisfaction Rating Form		
	TOTAL	None	5 days, 11 minutes	



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OFFICE OF THE SENIOR CITIZENS AFFAIRS EXTERNAL SERVICES







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1. OSCA ID ISSUANCE

The Office of the Senior Citizens Affairs (OSCA) issues OSCA ID to a senior citizen aged 60 and up to avail of the privileges and benefits from the local and national government.

OFFICE OR DIVISION	Office of the Senior Citizens Affairs			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE		0 years old and above. (For Dual Citizens-proof of Filipino Citizenship and		
WHO MAT AVAIL THE SERVICE	Residency of at least 6 months).	by years old and above. (For Duar Cilizens-proof of Filipino Cilizenship and		
	F REQUIREMENTS	WHERE TO SECURE		
New Applicant:		WHERE TO SECORE		
Duly Accomplished Application Form		OSCA Office / Downloadable Forms from OSCA Website		
Birth Certificate/Marriage Contract with	Date of Birth/GSIS ID/SSS ID/	Local Civil Registrar/Philippines Statistic Authority, Client		
Passport (NOT EXPIRED) - Photocopy				
Latest 1X1 ID Picture (White Backgrou		Client		
Certificate of Residency	/ 1	Barangay Hall		
Voter's Certificate (issued from 2022 u	p to present) - photocopy	Commission on Election (COMELEC)		
*For DUAL CITIZEN – Photocopy of O		Department of Foreign Affairs / Philippine Embassy, Client		
Lost ID:				
Latest 1X1 ID Picture (White Backgrou	Ind) - 2 pcs.	Client		
Voter's Certificate (issued from 2022 u	p to present) - photocopy	Commission on Election (COMELEC)		
Affidavit of Loss		Notary Public		
Transfer from Other City/Municipality	ty:			
OSCA ID and Certificate of Cancellation	on from the City/Municipality of Origin –	OSCA Office (of Origin), Client		
Original and Photocopy				
Certificate of Residency		Barangay Hall		
Voter's Certificate (issued from 2022 u	• • • • • • •	Commission on Election (COMELEC)		
Latest 1X1 ID Picture (White Backgrou	ınd) - 2 pcs.	Client		
Updating of:				
Name				
OSCA ID – Original and Photocopy		OSCA Office, Client		
Birth Certificate/Marriage Contract		Local Civil Registrar/Philippines Statistic Authority, Client		
Latest 1X1 ID Picture (White Backgrou	ind) - 2 pcs.	Client		
Birthday				
OSCA ID – Original and Photocopy		OSCA Office, Client		
Birth Certificate/Marriage Contract		Local Civil Registrar/Philippines Statistic Authority, Client		

CITIZEN'S CHARTER

Latest 1X1 ID Picture (White Bac	kground) - 2 pcs.	Client		
Address				
OSCA ID – Original and Photoco	ру	OSCA Office, Client		
Certificate of Residency		Barangay Hall		
Latest 1X1 ID Picture (White Bac	kground) - 2 pcs.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Application Form with complete requirements (Walk- In Application)	1.1 Verify requirements	None	10 minutes	Eliana Janica Llagas Venditta Gasic
	1.2 Typing information on OSCA ID	None	3 minutes	Gina Fe Gabriel, Jay Anne I. Cinco
2. Receive OSCA ID	2. Issue OSCA ID	None	1 minute	Eliana Janica Llagas Venditta Gasic
	Fill out Client Satisfac	tion Rating Form		
	TOTAL	None	14 minutes	

1.2 OSCA ID ISSUANCE (ONLINE APPLICATION)

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out Online Form and	1.1 Verify the filled-out online form and	None	5 minutes	Kristina Lea Monzon
submit complete requirements via email. (Online Application)	requirements. 1.2 Typing information on OSCA ID	None	3 minutes	Gina Fe Gabriel, Jay Anne Cinco
	1.3 Advice client via e-mail on the schedule of date of issuance of OSCA ID.	None	2 minutes	Kristina Lea Monzon
2. Receive OSCA ID	2. Issue OSCA ID.	None	1 minutes	Eliana Janica Llagas
	Fill out Client Satisfact	tion Rating Form		
	TOTAL	None	11 minutes	







2. BOOKLET ISSUANCE

The Office of the Senior Citizens Affairs (OSCA) issues a Booklet to a senior citizen aged 60 and up to avail of the privileges and benefits from the local and national government.

OFFICE OR DIVISION	Office of the Senior Citizens Affairs			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	Registered Senior Citizen of City of Imus.			
CHECKLIST O	OF REQUIREMENTS WHERE TO SECURE			
OSCA Identification Card	OSCA Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present OSCA ID	1. Verify and log OSCA ID	None	3 minutes	Ernesto Bandilla
2. Receive Booklet	2. Release Booklet	None	2 minutes	Ernesto Bandilla
Fill out Client Satisfaction Rating Form				
TOTAL None 5 minutes				







3. BURIAL ASSISTANCE FOR SENIOR CITIZENS OF IMUS CITY

Financial Assistance to the surviving relative of the deceased Senior Citizen.

	TOTAL	None	5 days and 12 minutes		
	Fill out Client Satisfac	tion Rating Form			
2. Receive cash	2. Release cash assistance.	None	2 minutes	Office of the City Treasurer	
	1.3 Advise for the availability of cash via text message	None	2 minutes	Gencil Ramos	
	1.2 Process the voucher	None	5 days	Gencil Ramos, Various Offices	
1. Submit complete documents.	1.1 Receive and verify the documents	None	8 minutes	Venditta Gasic	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Birth Certificate or Marriage Contract if	claimant is not the informant	Local Civil Registrar/Philippines Statistic Authority, Client			
Barangay Certificate of Claimant		Commission on Election (COMELEC) Respective Barangay			
back) COMELEC Certificate of Claimant (Imp	is Votor)	Commission on Electic			
	D of Claimant (Imus Address) (back-to-	Client			
Photocopy of OSCA ID of the decease	d Senior Citizen (Imus Issued)	Client			
Certified True Copy of Death Certificat	e of the deceased Senior Citizen	City Civil Registrar's O Center	ffice, Upper Ground Floo	or, Imus City Government	
CHECKLIST O	F REQUIREMENTS		WHERE TO SECU		
WHO MAY AVAIL THE SERVICE		The nearest surviving relative who took care of the deceased senior citizen until death; The nearest relative who is signatory in the Death Certificate of the deceased senior citizen.			
TYPE OF TRANSACTION	G2C – Government to Citizens		ion oitimon until do othe. Th		
CLASSIFICATION	Highly Technical				
OFFICE OR DIVISION	Office of the Senior Citizens Affairs				

NOTE: Time varies depending on the availability of budget and processing of voucher







4. PHILHEALTH MEMBERSHIP APPLICATION

The Office of the Senior Citizens Affairs helps the senior citizens in processing their PhilHealth ID and Members Data Record (MDR).

OFFICE OR DIVISION	Office of the Senior Citizens Affairs	fice of the Senior Citizens Affairs			
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen, G2G – Goverr	ment to Government			
WHO MAY AVAIL THE SERVICE	All Senior Citizens in the City of Imus				
CHECKLIST OF REQUIREMENTS	S WHERE TO SECURE				
PhilHealth Application Form		OSCA Office/PHILHE OSCA/Philhealth web	EALTH Office/Downloada	able Forms from	
OSCA ID (photocopy)		OSCA Office, Client			
Latest 1X1 ID Picture (1 pc)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Application Form with the required documents	1.1 Receive and verify the documents	None	8 minutes	Eliana Janica Llagas	
	1.2 Forward documents to PHILHEALTH office for processing	None	2 hours	Stephen L. Soriano	
	1.3 Processing in PhilHealth	None	(stop time)	PhilHealth – Imus	
2. Receive Philhealth ID and MDR from OSCA Office	2. Issuance of PHILHEALTH ID and MDR	None	2 minutes	Eliana Janica Llagas	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	2 hours and 10		
			minutes		

NOTE: Processing and Releasing of MDR/ID depends on action of Philhealth Branch





5. AMBULATORY CARE

This type of service is to aid our senior citizens who are physically injured or incapacitated due to illness, and unable to perform their duties without the aid of a wheelchair or cane.

OFFICE OR DIVISION	Office of the Senior Citizens Affairs			
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	Senior Citizens who are physically injured or	incapacitated due to ill	ness, and unable to perfo	orm their duties without the ai
	of a wheelchair or cane.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	IRE
OSCA ID (photocopy)		OSCA Office, Client		
Comelec Certification		Commission on Elect	ion (COMELEC)	
Medical Certificate		City Health Office		
Barangay Certification (original)		Barangay Hall		
Picture of Senior Citizen (patient)		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements	1.1 Receive and verify requirements	None	8 minutes	Gina Gabriel
	1.2 Process the voucher	None	5 days	Gina Gabriel Various Offices
	1.3 Advice the client	None	2 minutes	Gina Gabriel
2. Receive the wheelchair/cane	2. Deliver the wheelchair/cane	None	1 day	Gina Gabriel Stephen L. Soriano IMUSCAI President OSCA Chairman
	Fill out Client Satisfac	tion Rating Form None	6 days and 10	

NOTE: Time varies depending on the availability of budget and processing of voucher.





6. CENTENARIAN ACT

This program is to provide a grant to a Senior Citizen who reaches the age of 100 years old. This is in line with the National Program to recognize a 100-year-old senior citizen.

	TOTAL	INDIG	minutes	
	Fill out Client Satisfac	tion Rating Form	6 days and 10	
	home Received cash to be delivered.		Tuay	OSCA Chairman
2. Secure the cash	grant. 2. Deliver grant to the Centenarian in his/her	None	1 day	City Mayor,
	1.3 Advise the client on the delivery of the	None	2 minutes	Gencil Ramos
	1.2 Process the voucher	None	5 days	Gencil Ramos Various Offices
1. Submit complete documents.	1.1 Receive and verify the documents	None	8 minutes	Gencil Ramos; Luzviminda Elbinias
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
few years younger, proving the birth Certification from HOA, Senior Citize	ens Organization, or Barangay Council	HOA, IMUSCAI, Baran	Idav	
honored, provided that there are two	o (2) witnesses of almost the same age, or			
	a Certificate of Late Registration will be	Notary Public		
Incorporated (IMUSCAI)				
Registered Member of the Imus Mu	nicipal Senior Citizen Association	IMUSCAI		
Biometrics Registration		OSCA		
Marriage Contract (if married) (PSA Voter's ID, COMELEC Certification	Сору)	Philippine Statistics Au COMELEC, Client	ithority (PSA)	
Certified by the City Civil Registrar	Carry	Local Civil Registrar		
Birth Certificate of child/children (if r	narried) (PSA Copy)	Philippine Statistics Au	ithority (PSA)	
Certified by the City Civil Registrar		Local Civil Registrar		
Birth Certificate (PSA Copy)		Philippine Statistics Au	ithority (PSA)	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
WHO MAY AVAIL THE SERVICE	Senior Citizen who reaches the age of 100 ye	ears old		
TYPE OF TRANSACTION	G2C – Government to Citizens			
CLASSIFICATION	Highly Technical			
OFFICE OR DIVISION	Office of the Senior Citizens Affairs			

NOTE: Time varies depending on the availability of budget and processing of youcher

CITIZEN'S CHARTER



7. SOCIAL PENSION

Social Pension for indigent Senior Citizens is an additional government assistance to augment indigent senior citizens' daily subsistence and other medical needs.

neeus.				
OFFICE OR DIVISION	Office of the Senior Citizens Affairs			
	lighly Technical			
TYPE OF TRANSACTION	62C – Government to Citizens, G2G- Gove	ernment to Government		
	ndigent Senior Citizens of City of Imus (me	ember or non- member of	Imus Municipal Senior Ci	tizen Association
	ncorporated (IMUSCAI)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Application Form		OSCA Office, Associatio	n President	
OSCA ID		OSCA Office, Client		
Latest 1X1 ID Picture (White Backgrou	/ 1	Client		
Medical Abstract / Medical Certificate /	Latest Prescription	Hospitals, City Health Of	fice	
Printed whole-body photo		Client		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1 Submit application form with requirements to Association President	1.1 Receive and evaluate documents	None	10 minutes	Association Presidents
	1.2 Receive and evaluate the requirements submitted by the Association Presidents.	None	10 minutes	Joan Claire Rosido
2. Applicants interview	2.1 Interview and evaluate the applicant. (House-to-house assessment.)	None	20 minutes	Joan Claire Rosido Venditta Gasic
	2.2 Encode qualified Social Pension beneficiaries to be submitted to DSWD Regional Office	None	3 days	Joan Claire Rosido DSWD Region
	2.3 Receive final list of Social Pension Beneficiaries from DSWD Regional Office		(stop time)	DSWD Region





3. Receive cash	3. Distribution of Social Pension	None	3 days	Joan Claire Rosido' Venditta C. Gasic' IMUSCAI Officers' DSWD Region IV-A Staff
	Fill out Client Satisf	action Rating Form		
	TOTAL	None	6 days and 40 minutes	

NOTE: Distribution depends on the scheduled date from DSWD Regional Office







8. SENIOR CITIZENS SUBSIDY (CASH GIFT) APPLICATION

The Senior Citizens Subsidy Program is a program to provide cash assistance to a Senior Citizen and an increase in subsidy to a Nonagenarian (aged 90-99). It is given on the Senior Citizen's birthday.

This subsidy is a privilege for a Senior Citizen who is a resident for at least two (2) years and an active voter of City of Imus (Ordinance No. 05-209 Series of 2023). A Senior Citizen can also be qualified whether he/she is an active member of a Senior Citizens Association or not.

OFFICE OR DIVISION	Office of the Senior Citizens Affairs Extension Office – Old City Hall				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	Senior Citizens who are 60 years old and a	bove, and Nonagenarians	s (90-99) who met the crit	eria or requirements set by	
	City Government of Imus.				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
OSCA ID – photocopy		OSCA Office, Client			
Certificate of Residency		Barangay Hall			
Voter's Certificate (issued from 2022	up to present) - photocopy	Commission on Election (COMELEC)			
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requirements	1. Verify requirements	None	10 minutes	Eliana Janica Llagas	
2. Receive acknowledgment stub.	2.1 Issue acknowledgment stub.	None	2 minutes	Eliana Janica Llagas	
	2.2 Encode qualified Senior Citizen to the database	None	4 minutes	Kurt Jonrai Matro	
	Fill out Client Satisf	action Rating Form			
	TOTAL	None	16 minutes		
			1	I	

NOTE:

1. A Senior Citizen who will be qualified for the current year shall be included in the Master List of the succeeding fiscal year to receive Subsidy (Cash Gift).

2. A Senior Citizen who registered himself/herself as a Senior Citizen of City of Imus (applied for OSCA ID) in the current year and was evaluated as qualified to become beneficiary through his/her requirements will be automatically included in the Master List of the succeeding fiscal year to receive Subsidy (Cash Gift).





CITY SOCIAL WELFARE AND DEVELOPMENT OFFICE EXTERNAL SERVICES







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1. PROVIDE ASSISTANCE TO REPATRIATED OR DEPORTED OVERSEAS FILIPINO WORKER (OFW) (FOR REFERRAL)

Assistance in the form of outright cash and/or referral is provided to individuals/ families in extremely difficult circumstances. Cash assistance for repatriates and deportees OFWs, as may be justified by social workers or through a case consultation/conference.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All registered voters of the City of Imus, Cavite			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECURE	
Barangay Clearance of the client (Original c	ору)	Barangay Hall		
Government Issued ID of the Client (Photoc	opy only)	Client		
Letter of Request addressed to the City May	or	Client		
Travel Document/ Passport (Photocopy only	only) Client/ Department of Foreign Affairs (DFA)			
Contract/ Referral letter from OWWA (Photocopy only)		Employer/ Overseas Workers Welfare Administration (OWWA)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements to the	1. Refer the client to the social worker in charge.	None	3 minutes	Earvin Lucena
Evaluation Section of the City Social				
Welfare and Development Office.				
2. Proceed to the assigned social worker for		None	15 minutes	Earvin Lucena
an interview	formulate the General Intake Sheet (GIS)			
3. Wait for the documents.	3. Approve and sign the duly accomplished GIS	None	2 minutes	Josephine G. Villanueva
	Form			
4. Receive the Referral Letter	4. Release the Referral Letter	None	2 minutes	Support Staff
	Fill-out Client Satisfact	ion Rating Form		
	TOTAL	None	22 minutes	

NOTE: For outright cash, please proceed o Action Center, 3rd Floor Imus New Gov't Center





2. ISSUANCE OF REFERRAL FOR MIGRANT WORKER

Assisting the Migrant worker with their needs/queries. Referral for the migrant workers to other concerned agencies.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All migrant worker residents				
CHECKLIST O	F REQUIREMENTS WHERE TO SECURE				
Latest documents					
Travel Document/ Passport (Photocopy)		Client/ Department of Fo	oreign Affairs (DFA)		
Contract/ Referral letter of OWWA (Photoco	ру)	Employer/ OWWA			
Government Issued ID (Photocopy)		Client			
Referral / Certification from OWWA / POLO		OWWA			
Barangay Certification of Indigency (Original copy)		Barangay Hall			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present all the documents to the Evaluation Section of the City Social Welfare and Development Office.		None	3 minutes	Support Staff / Earvin Lucena	
2. Personal interview	2.1 Assessment	None			
	2.2 Formulate the Referral Letter2.3 Approve and sign the Referral Letter	None	15 minutes	Earvin Lucena Josephine G. Villanueva	
		None	1 minute		
3. Receive the Referral Letter	3. Log and release the Referral Letter	None	1 minute	Earvin Lucena	
	Fill-out Client Satisfact	3			
	TOTAL	None	20 minutes		





3. PROVIDE ASSISTANCE IN PERSON WHO USE DRUGS (PWUDs) FOR AFTER-CARE SESSION

Provision of post-rehab aftercare, helping people in recovery stay on track. It decreases the probability they will relapse and return to their addictive

behavior.					
OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit				
CLASSIFICATION	Highly Technical	Highly Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All registered voters of the City of Imus, Cavite				
CHECKLIST O	F REQUIREMENTS		WHERE TO SECURE		
Court Order (Photocopy only)		Court			
Referral Letter for After Care (Original Copy		Rehabilitation Center			
Drug Test for 18 months (Original Copy)		Diagnostic clinic accredit	ted by DOH		
Certificate of Completion from Rehabilitation	Certificate of Completion from Rehabilitation (Photocopy only)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirements to the	1. Refer the client to the social worker in charge.	None	3 minutes	Ma. Jane Camu	
Evaluation Section of the City Social					
Welfare and Development Office.					
2. Proceed to the assigned social worker for		None	15 minutes	Ma. Jane Camu	
an interview	formulate the General Intake Sheet (GIS)				
3. Monthly reporting	3. 18 months after care report, with submission	None	18 months	Ma. Jane Camu	
	of the monthly drug test report and journal				
4. Completion of 18 month After- Care		None	3 days	Ma. Jane Camu	
session	copy furnish Branch Court and Rehabilitation				
	Center				
	Fill-out Client Satisfaction				
	TOTAL	None	18 months, 3 days, and 18 minutes		





4. ISSUANCE OF SOCIAL CASE STUDY REPORT (PRO-FORMAT)

A Social Case Study Report (SCSR) is a description of the socio-economic condition of the client that justifies his/her eligibility to avail assistance such as medical, financial, burial, transportation, and educational assistance from government, non-government, or civil society organizations like the Philippine Charity Sweepstakes Office (PCSO), Office of the President and Vice President of the Philippines, Offices of the Senators and Representatives, and many others.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit					
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E		
For Medical						
Medical Certificate / (Latest)		Attending Doctor or Phys	sician			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
	1. Interview the client, verify the documents,	None	1 minute	Support Staff		
Evaluation Section of the City Social	and check the record in the database.					
Welfare and Development Office.						
2. Proceed to the assigned social worker for		None	25 minutes	Officer of the Day		
an interview	Case Study Report (Pro-format)			(Social Worker)		
3. Wait for the document	3. Approve and sign the SCSR	None	2 minutes	Josephine G. Villanueva		
	4. Register the name and purpose to the	None	1 minute	Katherine Grace Padilla;		
	logbook			Rose Anne Monzon		
4. Receive the Social Case Study Report	5. Release the Social Case Study Report	None	1 minute	Katherine Grace Padilla;		
				Rose Anne Monzon		
	Fill-out Client Satisfaction	on Rating Form				
	TOTAL	None	30 minutes			





5. ISSUANCE OF SOCIAL CASE STUDY REPORT (NARRATIVE CASE STUDY REPORT)

A Social Case Study Report (SCSR) is a description of the socio-economic condition of the client that justifies his/her eligibility to avail assistance such as medical, financial, burial, transportation, and educational assistance from government, non-government, or civil society organizations like the Philippine Charity Sweepstakes Office (PCSO), Office of the President and Vice President of the Philippines, Offices of the Senators and Representatives, and many others.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit	· · · · · · · · · · · · · · · · · · ·		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
For Medical				
Barangay Clearance (Original copy)		Barangay Hall		
Medical Certificate issued within 3 months (Doctor's License No. and signature)	Original or Certified True Copy with Attending	Attending Doctor or Physic	cian	
Medical Prescription, Laboratory tests, Prom medical procedure requests (chemotherapy,		Attending Doctor or Physic	cian	
For Education				
Barangay Indigency (Original copy)		Barangay Hall		
Registration Form or Certificate of Enrollmer	nt (Photocopy)	Respective School		
For Burial				
Barangay Clearance (Original copy)		Barangay Hall		
Death Certificate (Photocopy)		City Civil Registrar's Office	9	
Funeral Contract		Funeral Parlor		
For IBP				
Case Filed (Photocopy only)		Court		
Referral from IBP		Court		
Barangay Indigency (Original copy)		Barangay Hall		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present all the documents to the Evaluation Section of the City Social Welfare and Development Office.	1. Verify the documents	None	2 minutes	Katherine Grace Padilla; Rose Anne Monzon
2. Proceed to the assigned social worker for an interview and assist the social worker in	2.1 Processing of Report	None		Social Worker
data gathering	2.2 Data Gathering	None	2 hours	Josephine G. Villanueva

CITIZEN'S CHARTER



	2.3 Approve and Sign the SCSR	None	1 minute		
3. Wait for the document	3. Register the name and purpose in the	None	1 minute	Katherine Grace Padilla;	
	logbook			Rose Anne Monzon	
4. Receive the Social Case Study Report	4. Release the Social Case Study Report	None	1 minute	Katherine Grace Padilla;	
				Rose Anne Monzon	
Fill-out Client Satisfaction Rating Form					
	TOTAL	None	2 hours, 5 minutes		

NOTE: If it requires home visitation, the client will get the document after one day







6. ISSUANCE OF CERTIFICATE OF INDIGENCY

Certificate Of Indigency is issued so that the less fortunate can avail of the privileges from the municipal/ city as well as referrals to agencies to avail and apply for assistance such as scholarship, short-term employment, medical services, fire aid, PhilHealth, legal assistance from Public Attorney's Office (PAO), etc.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST C	F REQUIREMENTS		WHERE TO SECUR	E	
For Public Attorney's Office (PAO)					
Latest pay slip or Income Tax Return or ot	her proofs of income (Photocopy)	Company / Client			
Barangay Certification of Indigency (Photo	сору)	Barangay Hall			
Government Issued ID (Photocopy)		Client			
Case Filed (Photocopy)		PAO Office			
copy)	e (non-ownership of real property) (Original	City Assessor's Office			
For Educational Assistance					
Barangay Certification of Indigency (Origin		Barangay Hall			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present all the documents to the Evaluation Section of the City Social Welfare and Development Office.	1. Check and verify the requirements Refer the client to CSWDO personnel available.	None	2 minutes	Support Staff	
2. Undergo one-on-one interview (May be	2.1 Processing of Document	None		Katherine Grace Padilla;	
required to sketch the residence for a	5			,	
home visit)	2.2 Conduct an interview with the client and prepare the requested certification.	None	14 minutes	Rose Anne Monzon; Ma. Jane Camu	
	2.3 Approve and sign the Certificate of Indigency	None	2 minutes	Josephine G. Villanueva	
3. Wait for the document	3. Register the name and purpose in the logbook	None	1 minute	Katherine Grace Padilla; Rose Anne Monzon;	
4. Receive the Certificate of Indigency	4. Release the Certificate of Indigency	None	1 minute	Katherine Grace Padilla; Rose Anne Monzon	
	TOTAL	None	30 minutes		

NOTE: If it requires home visitation, the client will get the document after one day.





7. ISSUANCE OF CERTIFICATE OF INDIGENCY (FOR AMBULANCE CONDUCTION - NON-EMERGENCY CASES AND PHILHEALTH)

Certificate of Indigency is issued so that the less fortunate can avail of the privileges from the municipal/ city as well as referrals to agencies to avail and apply for assistance such as scholarship, short-term employment, medical services, fire aid, PhilHealth, legal assistance from Public Attorney's Office (PAO), etc.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit	io ala, i minoalan, iogai aba			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All				
	FREQUIREMENTS		WHERE TO SECURE		
For Ambulance Conduction – Non-Eme	rgency Cases				
Barangay Certification of Indigency (Origin	al copy)	Barangay Hall			
Certification from the City Assessor's Offic	e (non-ownership of real property) (Original	City Assessor's Office			
copy)					
Latest Medical Certificate (Photocopy)		Attending Doctor or Physic	ician		
For Philhealth					
Barangay Certification of Indigency (Origin	al copy)	Barangay Hall			
Photocopy of Valid ID		Client			
Birth Certificate of Applicant		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	1. Refer the client to CSWDO personnel	None	1 minute	Support Staff	
Evaluation Section of the City Social	available.				
Welfare and Development Office.					
2. Undergo one-on-one interview (May be	2.1 Processing of Document	None			
	2.2 Conduct an interview/assessment of the	None	25 minutes		
home visit)	client and prepare the requested certification.	None	20 minutes	Josephine G. Villanueva	
	2.3 Approve and sign the Certificate of	None	1 minute		
	Indigency				
3. Wait for the document	3. Register the name and purpose in the	None	1 minute	Support Staff	
	logbook			''	
4. Receive the Certificate of Indigency	4. Release the Certificate of Indigency	None	1 minute	Support Staff	
	Fill-out Client Satisfacti	on Rating Form		· ·	
	TOTAL	None	29 minutes		

NOTE: If it requires home visitation, the client will get the document after one day.





8. ISSUANCE OF SOLO-PARENT ID

The City Social Welfare and Development Office (CSWDO) facilitates the issuance of Solo Parent ID. It is a requirement in availing of the benefits and privileges due to a Solo Parent as provided by R.A. No. 8972 known as the Solo Parent Act of 2000. Pursuant to the IRR of R.A. No. 8972, the social worker shall inform the solo parent of the status of his/her application within thirty (30) working days from the filing of such and shall require him/her to visit the agency/institution providing the assistance.

OFFICE OR DIVISION	CSWDO – Protective Service				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All solo-parent residents (with dependent minor	child/ren)			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Solo-Parent Application Form		City Social Welfare Office)		
1 x 1 ID Picture (1 piece)		Client			
Minor's Birth Certificate (Photocopy)		PSA/ City Civil Registrar's	s Office		
Barangay Certification of being Solo pare		Barangay Hall			
Certificate of Employment, if employed (C	Driginal copy)	Employer			
COMELEC Certification (Original copy)		COMELEC			
Any of the following proofs of being a sole					
Death Certificate, if the partner is deceas		PSA/ City Civil Registrar's	s Office		
Annulment Paper, if annulled (Photocopy		Court			
Detention Paper, if the partner is detained		Bureau of Jail Management and Penology (BJMP)			
Adoption Paper, if the child is adopted (P		Court/Attorney			
Affidavit of Being a Solo Parent, if abando		Attorney			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	1. Initial interview and verify the complete	None	20 minutes	Ramonita Garcia	
complete documents to Solo-parent	submitted documents.				
Section of the City Social Welfare and					
Development Office					
2. Undergo one-on-one phone interview	2. Assessment through a phone interview and/	None	Within 15 days	Pilar B. Laurente	
and/ or home visit, if necessary (May be	or home visit if it's necessary.				
required to sketch the residence for					
home visit	0.4 Descention of Oals Descent ID	News		Damara Dianald	
3. Wait for the availability of the ID	3.1 Preparation of Solo Parent ID	None	3 minutes	Gemma Dionaldo	
	3.2 For signature	None	1 minute	Josephine G. Villanueva	

CITIZEN'S CHARTER



4. Register the name and other information in the logbook and receive		None	2 minutes	Gemma Dionaldo
the ID.				
	Fill-out Client Satisfacti	on Rating Form		
	TOTAL	None	15 working days, 26	
			minutes	

NOTE: If home visitation (for further assessment), an applicant for Solo-parent I.D will not be able to receive his/her I.D within the said period.

9. ISSUANCE OF PRE-MARRIAGE COUNSELING CERTIFICATE

Issuance of PMC Certificate to 18 to 25 years old would-be-couples who have undergone Pre-marriage Orientation and Counseling (PMOC) pursuant to the provisions of the Family Code and Presidential Decree 965 which requires applicants for a marriage license to receive instruction on family planning and responsible parenthood.

OFFICE OR DIVISION	CSWDO – Crisis Intervention Unit				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	18-25 years old would-be couples who have und	dergone Pre-marriage Ori	entation and Counseling	(PMOC)	
CHECKLIST (DF REQUIREMENTS		WHERE TO SECUR	RE	
Pre-marriage Orientation Certificate (Origi	nal copy)	Population Developmer	t Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the certificate	1.1 Process the document.	None			
	1.2 Verify the document and prepare the certificate.	None	1 minute	Rose Anne Monzon; Katherine Grace Padilla	
	1.3 For signature	None	1 minute	Pilar Laurente	
2. Receive the certificate	2. Release the certificate	None	1 minute	Rose Anne Monzon; Katherine Grace Padilla	
	Fill-out Client Satisfaction	n Rating Form			
	TOTAL	None	3 minutes		





LOCAL ECONOMIC DEVELOPMENT AND INVESTMENT PROMOTIONS OFFICE EXTERNAL SERVICES







1. ASSESS AND ISSUE CERTIFICATE OF REGISTRATION FOR INVESTMENT INCENTIVE GRANT

This service is open to all new and existing enterprises who would fall under any of the priority areas of investment in the City of Imus. With this, enterprises are given a fiscal incentive in terms of business tax exemption for a specified period of years and non-fiscal incentives such as aid in the local government services.

OFFICE OR DIVISION	Local Economic Development and Investment Promotions Office - Investment Services Division
CLASSIFICATION	Highly Technical
TYPE OF TRANSACTION	G2B - Government to Business
WHO MAY AVAIL THE	NEW ENTERPRISE who meets the following requirements:
SERVICE	 It must be compliant with all the requirements mandated under existing laws, local and national under the Philippine Constitution; The prospective investor's place of operation or production shall be located within the City of Imus; The prospective investment must engage in any of the areas or activities cited in the priority areas of investment; That the enterprises must have a capitalization of at least One Million Pesos (P1,000,000.00); provided that the amount of capitalization shall be based on the total additional project cost, excluding the value of the land where the entity's office, plant and equipment are situated, as stated in the investor's project study submitted to and approved by the Board. In case of corporation, capitalization shall mean fully paid-up capital of a minimum Five Million Pesos (P5,000,000.00); It must employ 70% of its total labor/manpower from the qualified bona fide residents of the city; Foreign companies intending to apply for registration must comply with the Foreign Investment Act of 1991; Project must not negatively impact the environment, whether in terms of pollution or resource use; Registered with Securities and Exchange Commission (SEC), Department of Trade and Industry (DTI) or Cooperative Development Authority (CDA).
	 EXISTING ENTERPRISE who meets the following qualifications: The business enterprise must be compliant with all the requirements mandated under existing local rules and regulations; The intended expansion or diversification of the existing enterprise must engage in economic activity identified as an investment priority area by the Board; The existing enterprise whose place of operation or production is already located within the territorial jurisdiction of the city, but which intends to undertake any of the following activities: Relocate its principal office to the City of Imus; Expand its existing production capacity or construct new buildings and other civil works for the installation of new machinery and equipment or improvements thereof which result in an increase in production capacity.



	of the City of Imus Inve the investor's project s o The expansion or dive o The expansion or dive	ersification shall have an additional project estment Incentives Code of 2017, provide study submitted to and approved by the ersification project will provide employment ersification will include an environment m	led that such expansion of Board; ent to bona fide residents nanagement plan.	or diversification as stated in
	OF REQUIREMENTS		ERE TO SECURE	
Application form (3 original) Project Study of the proposed is technically, financially, and e	investment showing that the project economically viable (1 original)	Imus LEDIPO To be provided by the Client		
Certificate of Registration (1 photocopy)		For Sole Proprietor- Department of Tra For Partnerships, One-Person Corpora Commission For Cooperatives- Cooperative Develo	ation, Corporations- Secu	urities and Exchange
For existing enterprises, a latest financial statement of the applying firm (1 copy)		To be provided by the Client		
For the corporate type of owner the person to file the application	ership, a board resolution authorizing n (1 original)	To be provided by the Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requirements at the office of Imus LEIPO	1.1 Receive the requirements and check for completeness.1.2 Issue the Order of Payment if all requirements were given	None	15 minutes	Investment Services Division Staff
2. Pay the Non-Refundable Fee at the Satellite Office – The District Imus	2. Issue the Official Receipt	a. Micro – Php 1, 000.00 b. Small – Php 5, 000.00 c. Medium – Php 10, 000.00 e. Large with Capitalization of P100,000,001.00 – P1,000,000,000.00 – Php 15, 000.00 f. Large with Capitalization Above 1, 000,000,001.00 – Php 20, 000.00	10 minutes	Collection Officer City Treasurer's Office
3. Present Official Receipt	3.1 Attach OR to the submitted documents.	None	5 minutes	Investment Services Division Staff

CITIZEN'S CHARTER



	3.2 Issue the Acknowledgement Form to the client			
4. Receive Certificate of Registration and Board Resolution or Notice of Disapproval	4.1 Processing of Investment Incentive Grant by forwarding Pre- Evaluation Form to the Board for evaluation and approval	None	15 days (For enterprise with capitalization of 1M – 100M); 25 days (For enterprise with capitalization of above 100M)	Investment Services Division Staff
	4.2 Conduct ocular visit, evaluation and consultation with the Board for the incentive grant.	None	10 days	Imus Investment Board
	4.3 Issue Certificate of Registration and Board Resolution or Notice of Disapproval	None	5 days	Investment Services Division Staff
	TOTAL	Based on the size of the enterprise	30 days and 30 minutes (For enterprise with capitalization of 1M – 100M) 40 days and 30 minutes(For enterprise with capitalization of above 100M)	

NOTE: Based on the availability of the Imus Investment Board and Executive Committee







2. REGISTRATION OF BUSINESS NAME

Business Name Registration (BNR) is mandated by Act 3883, otherwise known as the Business Name Law, which regulates the use in business transactions of names other than true names; wherein a person intending to engage in business is required to initially register a name, other than its true name with the DTI, before such name is used in any business transactions.

OFFICE OR DIVISION CLASSIFICATION		un Contore
	DTI Regional and Provincial Offices – Negos Simple	70 Centers
TYPE OF TRANSACTION	G2B - Government to Business	
	Individuals/sole proprietorship	
	OF REQUIREMENTS	WHERE TO SECURE
. Business Name Registration – N		
	cation (may also be done online end-to-end	
through the Business name		
https://bnrs.dti.gov.ph)		
Accomplished Application Form for G	Srant (1 original)	Imus LEDIPO
1.Applicant must be at least 18 years		
	Form signed by the applicant of the BNR	DTI Regional and Provincial Offices Negosyo Centers
3.One (1) valid government-issued IE		
4.Additional requirements for non-Ph		
of the authorized non-Philippine	ears old (where the laws of the home country national provides for the legal or contract age ized no-Philippine national shall submit proof	
b. Clear certified copy of the Alien C	Certificate of Registration	Bureau of Immigration
engage in business in the Philipp Republic Act. No. 7042 (Foreign	Gole Proprietorship/Certificate of Authority to pines issued by the concerned DTI Office per Investment Act) as amended by Republic Act ration Law) or such other applicable laws, as	Concerned DTI Office

CITIZEN'S CHARTER

5.Additional requirement for refugee	•			
	e Certificate of Recognition issued by the			
Department of Justice – Re	Department of Justice			
(DOJ-RSPPU) showing				
refugee/stateless person of				
registration and submission of				
••	pplication form is no longer required since the			
	equivalent to the duly accomplished physical			
	ation for the BN registration is subject to the			
	r the Rules and by clicking the "I Agree" button,			
• •	nderstood and accepted all such terms and			
• • •	undertakings as posted on the web-enabled			
BN registration system.				
	hilippine nationals. Refugees, and stateless			
persons shall be acted upon submission of the abovementioned supporting				
documentary requirements				
Additional requirements if filer is				
1.Authorization letter from the owner				
2.Vald ID of the authorized represer	tative			
For renewal of registration				
1.same requirements as that for nev				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
•	1.1 Receive, verify and process application	None	Upon submission of	
application form	form. (If incomplete, immediately return the		completed	BN Processor/ NC
	application to applicant and point out		documents and	Business Counsellor, if
	deficiencies.)		approval of application under	through NC
			normal	
2. Pay registration fee	2.1 Receive payment and issue official	-	circumstances,	
	receipt	based on territorial	estimated processing	
		scope:	time is fifteen (15)	Cashier/Special Collecting
		Borongoy	minutes	Officer (SCO)
		Barangay:		
		₱200.00		

CITIZEN'S CHARTER



		Scope		
	Fill-out Client Satisfa	<u> </u>	15 minutes	
3.Claim Certificate of BNR	3.1 Print and issue Certificate of BNR			BN Processor/ NC Business Counsellor, if through NC
		City/ Municipality: ₱ 500.00 Regional: ₱1,000.00 National: ₱2,000.00 Plus, Documentary Stamp Tax of ₱30.00 per registration Surcharge for Renewal - Additional 50% of registration fee if filed within ninety-one (91) days to one hundred eighty days (180) days after the expiration date		





CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE
II. Business Name Registration – Issuance of Affirmative/Negative Certification and Authentication or Certified True Copy of the BN Certificate of registration				
• •	cation only for authentication/certified true stration (Affirmative/Negative Certification online end-to-end)			
	ated Application Form signed by the owner	DTI Regional and Prov	rincial Offices Negosyo (Centers
One (1) valid government-issued ID				
Additional requirements if filer is				
1.Authorization letter from the owner				
2.Vald ID of the authorized represen				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish and submit other BN- Related application form	1.1 Receive, verify and process application form. (If incomplete, immediately return the application to applicant and point out deficiencies.)		Upon submission of completed documents and approval of application under	BN Processor/ NC Business Counsellor, if through NC
2. Pay the corresponding fee	2.1 Receive payment and issue official receipt	 a. Affirmative/ Negative Certification Php 50.00 +DST Php 30.00 b. Cancellation Certification – Documentary Stamp tax (DST) – Php 30.00 c.Authentication or Certified True Copy – 	normal circumstances, estimated processing time is fifteen (15) minutes	Cashier/Special Collecting Officer (SCO) If online application, through available online payment modes. (applicable to BN Certification only)

CITIZEN'S CHARTER



		Php 50.00 + DST Php 30.00 (per copy)		
Certification or Authenticated or	3.1 Print and Issue Affirmative/ Negative certification or duly marked and signed Authenticated or Certified True Copy of BN Certificate of Registration			BN Processor/ NC Business Counsellor, if through NC
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	Depending on the	15 minutes	
		Other BN-Related		
		Request		







3. ISSUANCE OF BMBE CERTIFICATE OF AUTHORITY

The processing and issuance of Barangay Micro Business Enterprises (BMBEs) CA is in compliance with RA 9178 or commonly known as Barangay Micro Business Enterprises (BMBEs) Act of 2002, wherein incentives and benefits is to be given to BMBEs in support entrepreneurial talents and integrate those in the informal sector to the mainstream economy as amended by RA 1064.

OFFICE OR DIVISION	DTI Regional and Provincial Offices – through the Negosyo Centers				
CLASSIFICATION	Simple	in the Hogeeye Contore			
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE	Barangay micro business enterprises that have an asset size of not more than Three Million Pesos (PhP 3,000,000.0 including those arising from loans but excluding land on which the plant and equipment are located and engaged in the production, processing or manufacturing of products or commodities, including agro-processing, trading, and services be excluding practice of profession (e.g. Accountant, Lawyer, Doctor, among others.)				
CHECKLIST	OF REQUIREMENTS			RE	
		WHERE TO SECURE - DTI Regional and Provincial Offices		les/BMBE+Registration+Appl tion+form.pdf prietorship	
		Cooperative Development Authority (CDA) – for cooperative			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit filled-out BMBE application form and other documentary requirements	1.1 Upon receipt of application, check the completeness of documentary requirements.	None	1 hour	NC Business Counsellor/BMBE Processor	
		None	4 hours		





	TOTAL	None	8 hours	
	Fill-out Client Satisfaction	Rating Form		
2				Processor
Authority				Counsellor/BMBE
2.Claim BMBE Certificate of	2.1 Issue the BMBE Certificate of Authority	None	30 minutes	representative NC Business
				his/her duly authorized
				Provincial Director or
	BMBE CA			
	1.3.3 Approve and countersign the	None	2 110013	Processor
		None	2 hours	NC Business Counsellor/BMBE
	1.3.2 Print the BMBE CA			
		None	5 minutes	Processor
	information.			Counsellor/BMBE
	BMBE CA template and confirm the			NC Business
	1.3.1 Encode the information on the	None	25 minutes	
	1.3 Process the application:	Neze		
	supporting documents.			
	the application form and submitted			
	a BMBE based on declared information in			Processor and Applicant
	1.2 Evaluate and verify the application to determine the eligibility and qualification as			NC Business Counsellor/BMBE





4. PROVIDE BUSINESS INFORMATION ASSISTANCE

This service provides all information needed by an entrepreneur in doing business. The service aims to simplify complex business information such as mandatory compliance with local and national requirements.

OFFICE OR DIVISION	Local Economic Development and Investment Promotions Office - Business Development Division				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE	Potential Business Owners and Leaders who	will operate business in	the City of Imus.		
	Existing Business Owners and Leaders in the City of Imus				
CHECKLIST	ST OF REQUIREMENTS WHERE TO SECURE				
Accomplished Form (1 original)		Imus LEDIPO			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit form and Inquire	1. Accommodate inquiries and concerns	None	10 minutes	Business Development	
concern(s) at Imus LEDIPO	Division Staff			Division Staff	
Fill-out Client Satisfaction Rating Form					
	TOTAL None 10 minutes				







GENDER AND DEVELOPMENT UNIT EXTERNAL SERVICES







www.cityofimus.gov.ph

1. SCHEDULING OF APPPOINTMENT TO THE CITY GAD FOCAL POINT PERSON

Organizing meetings and appointments is an important GAD Unit task. It ensures work arrangements flow smoothly. Internal and external clients are brought together in a structured way and decisions are made when needed to achieve the unit's goal.

OFFICE OR DIVISION	Gender and Development Unit				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Gove	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST C	DF REQUIREMENTS		WHERE TO SECURI	E	
Request Letter addressed to the City	etter addressed to the City GAD Focal Person Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request letter and wait	1.1 Assess the request letter.	None	45 minutes	Admin Staff assigned in the	
for the scheduled meeting.				unit	
	1.2 Inform the City GAD Focal Point Person regarding the request.1.3 Finalize the schedule.	None	1 day (stop time)	Kristel Lovella D. Capiña;	
2. Attend the scheduled meeting.	2. Inform the client on the final schedule.	None	5 minutes	GAD Unit personnel	
	Fill-put Client Satis	faction Rating Form		·	
	TOTAL	None	1 day, 50 minutes		

NOTE: Schedule of meeting depends on the availability of the City GAD Focal Point Person.





2. PROVISION OF TECHNICAL ASSISTANCE AND SERVICES

GAD Unit is committed to provide timely, strategic, and appropriate technical assistance on GAD. It also establishes proper mechanisms to respond to the numerous requests for technical assistance on GAD, especially on GAD mainstreaming and GAD Planning and Budgeting.

OFFICE OR DIVISION	Gender and Development Unit				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Go	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All	-			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Request Form		Admin Committee Officers			
Request Letter addressed to the C	City GAD Focal Person	Client			
Government-issued ID		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requisition letter	1. Assess the request letter and check for the availability of the documents.	None	3 minutes	Kristel Lovella D. Capiña, Karen Joy A. Peregrino;	
2. Preparation of Documents	2.1 Produce the facsimile of the requested documents.	None	3 minutes	Kristel Lovella D. Capiña, Karen Joy Peregrino;	
	2.2 Certify the documents as true copies		2 minutes		
3. Claim of documents	3. Release of Documents	None	2 minutes	Kristel Lovella D. Capiña; Karen Joy A. Peregrino;	
	Fill-out Client Sat	isfaction Rating Form	1		
	TOTAL	Based on assessment	10 minutes		

NOTE: Signing of the permit depends on the availability of the City GAD Focal Point Person.





3. POLICY AND PLANNING REVIEW SERVICES

GAD Unit is responsible for leading development of rules, policies, and procedures in such a way that stakeholders will trust and value the resulting documents because their concerns and needs have been considered respectfully.

OFFICE OR DIVISION	Gender and Development Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Gov	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government		
WHO MAY AVAIL THE SERVIC	All			
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECURI	
Request Form		Admin Committee Office	r	
Request Letter addressed to the	City GAD Focal Person	Client		
Government-issued ID		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requisition letter	1.1 Receive and log request.1.2 Refer to Executive Order.	None	5 minutes	Kristel Lovella D. Capiña; Karen Joy A. Peregrino, Leonardo Lacson;
	1.3 Assign request to concerned committee.			
2. Prepare the Documents	1.1 Conduct preliminary assessment and research.1.2 Prepare policy comments and recommendations.	None	5 minutes	Kristel Lovella D. Capiña; Karen Joy A. Peregrino, Leonardo Lacson;
	1.3 Transmit the policy review, resolution and feedback			
		faction Rating Form	1	
	TOTAL	Based on assessment		

NOTE: Signing of the requested pertinent documents depends on the availability of the City GAD Focal Point Person.







4. PROJECT, PLANS AND ACTIVITIES ENDORSEMENT

Project planning is at the heart of the GAD PPAs cycle. The plans are documented, the deliverables, requirements are defined, and the project schedule is created. This helps the unit and its external suppliers to ensure the delivery and implementation of the project on time, within budget, and within schedule.

OFFICE OR DIVISION	Gender and Development Unit	Gender and Development Unit			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B –	Government to Business, G20	<u> Government to Goverr</u>	nment	
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Request Form		Admin Committee Officers			
Request Letter addressed to the 0	City GAD Focal Person	Client			
Government-issued ID		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requisition letter	1.1 Receive and log request.1.2 Review the legal basis.	None	5 minutes	Kristel Lovella D. Capiña Karen Joy A. Peregrino;	
	1.3 Assess the projects.				
2. Prepare the Documents	1.1 Conduct preliminary assessment and research.	None	5 minutes	Kristel Lovella D. Capiña Karen Joy A. Peregrino;	
	1.2 Prepare policy comments and recommendations.				
	1.3 Transmit the policy review, resolution and feedback.				
		Satisfaction Rating Form			
	TOTAL	Based on assessment	10 minutes		

NOTE: Signing of the pertinent documents depends on the availability of the City GAD Focal Point Person.





IMUS CITY PUBLIC LIBRARY EXTERNAL SERVICES







www.cityofimus.gov.ph

1. RESEARCH SERVICE ASSISTANCE

The service assists the clients in research through Card Catalog or Online Public Access Catalog (OPAC) for browsing of books and other library materials or assign desktop computer for computer/internet use.

OFFICE OR DIVISION	Imus City Public Library				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST	ST OF REQUIREMENTS WHERE TO SECURE				
Valid ID		From the client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Register on the Logbook	1. Logbook is in the entrance of the library	None	3 minutes	Annabelle A. Rusit	
	Alvin V. Sampot				
Fill-out Client Satisfaction Rating Form					
	TOTAL	None	3 minutes		

2. ISSUANCE OF LIBRARY ID

This service assists the clients in applying a Library ID for additional privileges that the library is offering when it comes to library resources and other reading materials such as borrowing of fiction books, magazines and journals for home use, etc.

OFFICE OR DIVISION	Imus City Public Library			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST	T OF REQUIREMENTS WHERE TO SECURE			
Two (2) Copies 1x1 Picture	From the client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the Application Form and	1. Application Form is provided by the	None	10 minutes	Kristine Anne D. Bautista
present a valid ID	assigned staff			Micah Ella B. Malicsi
Fill-out Client Satisfaction Rating Form				
	TOTAL	None	10 minutes	





CITY INFORMATION OFFICE EXTERNAL SERVICES







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1. MEDIA ACCREDITATION

Media accreditation process enables publications, journalists, and photographers to be part of the media partners of the LGU on its programs, events and activities.

activities.					
OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE		n; All reporters, writers and photographers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Publication / Broadcast Media Fire					
Letter of intent to cover events of the	e City Government of Imus;	Publication / Broadcast Media Firm			
(For Sole Proprietorship)					
Copy of business registration with th (1 copy – original and photocopy for		Department of Trade and Industry			
(For Partnership and Corporation) Certified True Copy of SEC registrat Incorporation, By-Laws and Latest G	ion, Articles of Partnership /	Securities and Exchange Commission			
Copy of Mayor's Permit with Official original and photocopy for verificatio		Business One-Stop Shop (BOSS)			
Copy of Bureau of Internal Revenue copy – original and photocopy for ve		Bureau of Internal Revenue			
Notarized proof / affidavit that the Pu circulation for at least six (6) months to the CIO);	ublication has been consistently in (with sample copies to be submitted	Publication / Broadcast Media Firm			
Notarized proof / affidavit that the Pu circulation of at least 2,000 copies of	• •	Publication / Broadcast Media Firm			
Notarized proof / affidavit from the P Publication has a weekly circulation	ublishing and Printing Office that the of at least 2,000 copies or more;	Publication / Broadcast Media Firm			
or Editor indicating the name and du writers/photographers;	-	Publication / Broadcast Media Firm			
Published articles or taped broadcas	st within the past two (2) months;	Media Personnel			

CITIZEN'S CHARTER

indicating the membership and sign and/or officer on membership; Photographers are required to subm within the past two (2) months, copy past two (2) months and a copy of the	reporter/writer/photographer belongs ed by the organization's secretary nit original photographs published of photographs published within the	Media Organization Media Personnel		
photographs) CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1. Assess the publication requirements.	None	10 minutes	Ma. Ana Elaiza S. Lardizabal; Information Officer III Bernadette A. Asuncion Communication Equipment Operator I
2. Undergo personal interview	2. Evaluate the publication	None	10 minutes	Ervin Ace H. Navarette City Information Officer
3. Get accreditation document.	3. Prepare accreditation document.	None		
	Fill-out Client S	Satisfaction Rating Form		
	TOTAL	None	20 minutes	





2. INSTITUTIONALIZATION OF INFORMATION QUERIES OR COMPLAINTS

Provide accurate and adequate information to every inquiry and endorse every inquiry or complaint to appropriate offices.

· · · · ·	se every inquiry or comple	aint to appropriate onices.		
City Information Office	City Information Office			
Highly Technical				
G2C - Government to Citizen, G2G - G	Sovernment to Governme	nt		
All constituents of the City Government	of Imus			
REQUIREMENTS		WHERE TO SECUR	E	
I client through the City Government of cial page, official email address, or			r's official page, official email	
AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1 Assess the content of the inquiry or complaint.	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
1.2 Prepare the information to be sent to the client	None		Romain Jershy C. Papa Public Relations Officer	
			Claire Antioquia Private Secretary II	
			John Barry A. Prado Information Technology Officer	
			Ervin Ace H. Navarette City Information Officer	
2.1 Compose a response to the client / endorse the inquiry or complaint to the appropriate office	None	20 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
			Romain Jershy C. Papa Public Relations Officer	
			Claire Antioquia Private Secretary II	
	City Information Office Highly Technical G2C - Government to Citizen, G2G – G All constituents of the City Government REQUIREMENTS I client through the City Government of cial page, official email address, or AGENCY ACTION 1.1 Assess the content of the inquiry or complaint. 1.2 Prepare the information to be sent to the client 2.1 Compose a response to the client / endorse the inquiry or complaint to	City Information Office Highly Technical G2C - Government to Citizen, G2G – Government to Government All constituents of the City Government of Imus REQUIREMENTS I client through the City Government of I client through the City Government of cial page, official email address, or AGENCY ACTION FEES TO BE PAID 1.1 Assess the content of the inquiry or complaint. 1.2 Prepare the information to be sent to the client None 2.1 Compose a response to the client / endorse the inquiry or complaint to	Highly Technical G2C - Government to Citizen, G2G – Government to Government All constituents of the City Government of Imus REQUIREMENTS WHERE TO SECUR I client through the City Government of cial page, official email address, or City Government of Imus's official page, City Mayo address, or official website. AGENCY ACTION FEES TO BE PAID PROCESSING TIME 1.1 Assess the content of the inquiry or complaint. None 5 minutes 1.2 Prepare the information to be sent to the client None 20 minutes 2.1 Compose a response to the client / endorse the inquiry or complaint to None 20 minutes	

CITIZEN'S CHARTER

3. Receive response	 2.2 Check and approve of the response to the client 3. Send a reply to the client regarding the inquiry or complaint 	None	10 minutes 5 minutes	John Barry A. Prado Information Technology Officer Ervin Ace H. Navarette City Information Officer Ma. Ana Elaiza S. Lardizabal; Information Officer III Romain Jershy C. Papa Public Relations Officer
				Claire Antioquia Private Secretary II
				John Barry A. Prado Information Technology Officer
		atisfaction Rating Form	40 minutes	
	TOTAL	None	40 minutes	



CITIZEN'S CHARTER

CITY INFORMATION OFFICE INTERNAL SERVICES







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1. LAYOUT AND PRINTING OF TARPAULIN

Create promotional materials for public awareness and public participation on the City Government of Imus programs and projects.

OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All officer under the City Government of Im	US			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR		
Accomplished Request Form (hard copy and/or online request form) with or without a request letter		Requesting Party (Mer Tarpaulin) / City Inform	morandum 2022-26- Reque	est for Official Printing of	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a request form with or without a request letter to the office	1.1 Accommodate request	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
	1.2 Assess request and check the availability of the requested date	None	5 minutes		
2. Wait for the availability of the tarpaulin	2.1 Designate the work	None	5 minutes	Ervin Ace H. Navarette City Information Officer	
	2.2 Create the layout / visual content	None	40 minutes	Ronard A. Diaz; Artist Illustrator II	
				Thea Coleen B. Castillo Artist Illustrator	
	2.3 Check and approve the layout	None	5 minutes	Ervin Ace H. Navarette City Information Officer	
	2.4 Checking and approval of the requesting party	None	5 minutes	Requesting Party	
	2.5 Send the layout to the printing press (for tarpaulin request)	None	3 minutes	Ronard A. Diaz; Artist Illustrator II	
				Thea Coleen B. Castillo Artist Illustrator	



CITIZEN'S CHARTER

	2.6 Printing of layout	None	(stop time)	Printing Press
	2.7 Tarpaulin pick-up	None	20 minutes	Jesse Brent D. Trinidad Driver I
3. Receive the printed material	3. Releasing of printed material	None	3 minutes	Anthony C. Fontanilla Messenger
	Fill-out Client Satis	faction Rating Form		
	TOTAL	None	1 hour and 31 minutes	







2. SCHEDULING FOR EVENT COVERAGE

Photo and video documentation of the programs and activities of the City Government of Imus.

OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Im	nus			
CHECKLIST C	F REQUIREMENTS		WHERE TO SECUR	E	
Accomplished Request Form (hard c without a request letter	opy and/or online request form) with or	Requesting Party (Mem	orandum 2022-00 - Reques	st for Event Coverage / CIO	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a request form with or without a request letter to the office	1.1 Accommodate request	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
	1.2 Assess request and check the availability of the requested date	None			
	1.3 Designate work	None	5 minutes	Ervin Ace H. Navarette City Information Officer	
	1.4 Schedule the event	None	5 minutes	Juvelen O. Alcova; Photographer III Glenn A. Calica Photographer I	
	Fill-out Client Sati	sfaction Rating Form			
	TOTAL	None	15 minutes		

CITIZEN'S CHARTER



3. VIDEO EDITING

Create audio-visual presentati	on for the City Government of Imus program	s and activities.			
OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All officer under the City Government of Im	us			
	OF REQUIREMENTS		WHERE TO SECUR	E	
Request letter attached with accomp storyline of the said video	lished sequence treatment and/or	Requesting Party			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit request letter to the office	1.1 Accommodate request1.2 Assess request and check the availability of the requested date	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
2. Wait for the availability of the video	2.1 Process request2.2 Review the sequence treatment and storyline	None	20 minutes	Ervin Ace H. Navarette; City Information Officer Francesca F. Mandac Information Officer I	
	2.3 Edit the video	None	(stop time)	Glo Allyson Keiko P. Melo Video Editor / Videographer	
	2.4 Check and approve the video	None	10 minutes	Ervin Ace H. Navarette; City Information Officer	
	2.5 Checking and approval of the requesting party	None	10 minutes	Requesting Party	
3. Receive the edited video	3. Release the final video	None	5 minutes	Ma. Ana Elaiza S. Lardizabal; Information Officer III	





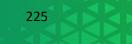
			Glo Allyson Keiko P. Melo Video Editor / Videographer		
Fill-out Client Satisfaction Rating Form					
TOTAL None 40 minutes					

*Short Videos (1-3 minutes) – one (1) day; Videos more than three (3) minutes – minimum of three (3) days depending on the storyline and content of the video. NOTE:

- For short videos (1-3 minutes), the request must be submitted at least five (5) working days before the date of submission (for video entries) or date of event, and ten (10) working days for video presentation longer than three (3) minutes.
- The requesting office must bring a storage device (DVD-R, Flash Drive, or Hard Drive) upon claiming the final edit of the video.







4. SOCIAL MEDIA POSTING

Create and revise social media posts and captions for the City Government of Imus social media pages and its offices.

OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Ir	nus			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECUR		
Request Letter for Publication Material, revision for narratives and captions (Hard Copy and/or Email Requests)		Requesting Party (Mem	orandum 2022-12- Reques	st for Social Media Posting)	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit request letter to the office	1.1 Accommodate request	None			
	1.2 Assess request and check the availability of the requested date	None	5 minutes	Ma. Ana Elaiza S. Lardizaba Information Officer III	
	1.3 Designate work	None	5 minutes	Ervin Ace H. Navarette City Information Officer	
	1.4 Create publication material and/or revise caption and narratives	None	40 minutes	Ronard A. Diaz; Artist Illustrator II	
				Thea Coleen B. Castillo; Artist Illustrator	
				Francesca F. Mandac Information Officer I	
	1.5 Approve publication material and/or caption and narratives	None	10 minutes	Ervin Ace H. Navarette City Information Officer	
	1.6 Schedule of posting on the City Government of Imus's social media pages	None	5 minutes	Romain Jershy C. Papa Public Relations Officer Claire Antioquia Private Secretary II	
				John Barry A. Prado	

CITIZEN'S CHARTER

				Information Technology Officer	
Fill-out Client Satisfaction Rating Form					
TOTAL None 1 hour and 5 minutes					

5. PROVISION OF ZOOM LINK

Provide a zoom meeting link for virtual programs, meetings, and activities of the City Government of Imus.

OFFICE OR DIVISION	City Information Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G - Gover	rnment to Government			
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imu	JS			
CHECKLIST (OF REQUIREMENTS		WHERE TO SECUR	E	
Accomplished Request Form (hard copy and/or online request form) with or without a request letter Requesting Pa			morandum 2022-43- Reques	st for Zoom Link Request / City	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a request form with or without a request letter to the office	1.1 Accommodate request				
	1.2 Assess request and check the availability of the requested date	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
2. Wait for the availability of Zoom Link	2. Designate work	None	5 minutes	Ervin Ace H. Navarette City Information Officer	
3. Wait for link	3. Schedule and endorse the link of the program to the requesting party	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III	
	Fill-out Client Satis	faction Rating Form			
	TOTAL None 15 minutes				





6. GRAPHIC DESIGN FOR VARIOUS OFFICES

Create promotional materials for programs and projects of offices of the City Government of Imus.

OFFICE OR DIVISION	City Information Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All officer under the City Government of Imus					
	OF REQUIREMENTS		WHERE TO SECU			
Accomplished Request Form (hard copy and/or online request form) with or without a request letter		Requesting Party (Me / City Information Offic	•	st for Official Printing of Tarpaulin)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit a request form with or without a request letter to the office	1.1 Accommodate request	None	5 minutes	Ma. Ana Elaiza S. Lardizabal Information Officer III		
	1.2 Assess request and check the availability of the requested date	None	5 minutes			
2. Wait for the design	2.1 Designate the Work	None	5 minutes	Ervin Ace H. Navarette City Information Officer		
	2.2 Create the visual content (logos, LED wall backdrop, sticker, ID layout, or other types of visual design)	None	40 minutes	Ronard A. Diaz; Artist Illustrator II		
				Thea Coleen B. Castillo Artist Illustrator		
				Janna Alliah V. Angeles Videographer/Video Editor		
	2.3 Check and approve of the design	None	5 minutes	Ervin Ace H. Navarette City Information Officer		
	2.4 Checking and approval of the requesting party	None	5 minutes	Requesting Party		
	2.5 Apply revision or changes from requesting party	None	3 minutes	Ronard A. Diaz; Artist Illustrator II		

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	TOTAL	None	1 hour and 11 minutes	
	Fill-out Client Satis	faction Rating Form		
				Ma. Ana Elaiza S. Lardizabal Information Officer III
				Janna Alliah V. Angeles Videographer/Video Editor
				Thea Coleen B. Castillo Artist Illustrator
3. Receive the digital or printed design	3. Release final digital or printed design	None	3 minutes	Ronard A. Diaz; Artist Illustrator II
				Artist Illustrator Janna Alliah V. Angeles Videographer/Video Editor
				Thea Coleen B. Castillo





CITY TOURISM AND HERITAGE OFFICE EXTERNAL SERVICES







1. PROVISION OF RELEVANT INFORMATION AND MATERIALS (PHOTOGRAPHS, TEXTBOOKS, AND DOCUMENTS) This service provides information for the clients that conduct research on city's culture and history.

OFFICE OR DIVISION	City Tourism and Heritage Office	/ Tourism and Heritage Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Governme	nt to Government			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	E	
Letter Request		Client			
Identification Card		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a letter or inquire directly	1.1 Assess request and consult the Department Head (if necessary)	None	2 minutes	Christian Rey O. Sison Cecilia V. Picache, Danica V. Doma	
	1.2 Check the availability of research materials or research person	None			
2. Get necessary data	 2. Provide the necessary materials and information; *** Refer to other concerned departments (if necessary) 	None	5 minutes	Cecilia V. Picache, Danica V. Doma Bradley Myles Wency C. Ramos	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	7 minutes		

NOTE: Processing time varies depending on the availability of the requested information of document.





2. REQUEST ON TOUR GUIDING SERVICES TO HISTORICAL PLACES IN THE CITY

Schedule and assist request of clients regarding tour guiding services in different historical places in the city.

OFFICE OR DIVISION	City Tourism and Heritage Office	·			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Governme	nt to Government			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	E	
Letter Request		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit letter request to the office.	1.1 Assess request and check the availability of the requested date.	None	5 minutes	Christian Rey O. Sison Pinky L. Rembulat	
	1.2 Approval of the department head	None	5 minutes	Emanuel R. Paredes	
2. Get the schedule.	2.1 Give the final schedule.	None	5 minutes	Christian Rey O. Sison Pinky L. Rembulat	
	2.2 Assign personnel for tour guiding				
	Fill-out Client Satisfaction Rating Form				
	TOTAL	None	5 minutes		







3. ASSISTANCE ON TOURISM ACCREDITATION

Assist businesses in the preparation of Department of Tourism Accreditation

OFFICE OR DIVISION	City Tourism and Heritage Office	ity Tourism and Heritage Office			
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2B - Government to Business				
WHO MAY AVAIL THE SERVICE	All business in line with tourism				
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECURE	E	
Business Permit		Business One-Stop Shop (Ground Floor – Imus City Government Center)			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Inquire and present business permit for DOT Accreditation.	1.1 Explain the importance of DOT Accreditation for businesses.	None	3 minutes	Christian Rey O. Sison Pinky L. Rembulat	
	1.2 Assist business owners on the documents needed for the accreditation.	None	5 minutes		
	Fill-out Client Satisfaction Rating Form				
	TOTAL None 8 minutes				

4. INQUIRIES ON CITY TOURISM/CULTURAL ACTIVITIES

Provide relevant information regarding the schedule of tourism/cultural activities.

OFFI	CE OR DIV	ISION	City Tourism and Heritage Office					
CLAS	SSIFICATIO	N	Simple					
TYPE	OF TRAN	SACTION	G2C - Government to Citizen, G2G - Governme	nt to Government				
WHO	MAY AVA	IL THE SERVICE	All					
		CHECKLIST	F OF REQUIREMENTS		WHERE TO SECUR	E		
Letter	r Request			Client	Client			
	CLIEN ⁻	T STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Activi	Inquire ties	Tourism/Cultural	1. Accommodate inquiries and concerns on tourism/cultural activities.	None	5 minutes	Cecilia Picache, Danica V. Doma, Bradley Myles Wency C. Ramos		
	Fill-out Client Satisfaction Rating Form							
	TOTAL None 5 minutes							





5. RELEASING OF PHOTO DOCUMENTATION AND LAYOUT

Provide soft copies of photos and videos of various events in the city.

OFFICE OR DIVISION	City Tourism and Heritage Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G – Governme	ent to Government		
WHO MAY AVAIL THE SERVICE	All			
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	E
Letter Request		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire on the status of the	1. Check if photos /lay outs are now ready for	None	3 minutes	Arnel P. Ilagan,
photos/ lay-outs	release.			Hannah Kaye A. Rodriguez,
				Harold A. Morota
2. Provide the USB.	2.1 Scan the USB.	None	5 minutes	Arnel P. Ilagan,
				Hannah Kaye A. Rodriguez,
	2.2 Copy the requested soft copy files.	None	10 minutes	Harold A. Morota
3. Get the soft copy files.	3. Release the soft copies of photos/layouts.	None	3 minutes	Arnel P. Ilagan,
				Hannah Kaye A. Rodriguez,
				Harold A. Morota
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	21 minutes	

NOTE: The processing time for copying of files depends on the size of the photos or videos.





CITY TOURISM AND HERITAGE OFFICE INTERNAL SERVICES







1. REQUEST FOR PHOTO COVERAGE AND DOCUMENTATION OF EVENTS

The city departments and offices can request for the documentation of their events.

OFFICE OR DIVISION	City Tourism and Heritage Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen, G2G - Governme	ent to Government			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIS	T OF REQUIREMENTS WHERE TO SECURE				
Letter Request		Client			
Request Form		City Tourism and Heritage Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit letter and fill-out Photo and Event Coverage Request Form.	1.1 Receive letter and assess the request form.	None	1 minutes	Arnel P. Ilagan, Hannah Kaye A. Rodriguez, Harold A. Morota	
	1.2 Approve request	None	5 minutes	Emanuel R. Paredes	
2. Receive confirmation of the coverage schedule.	2. Assign personnel to document the event	None	5 minutes	Christian Rey O. Sison	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL None 11 minutes				





CITY DISASTER RISK REDUCTION AND MANAGEMENT OFFICE EXTERNAL SERVICES







1. EMERGENCY AMBULANCE ASSISTANCE

Immediate request for an ambulance and initial treatment of an injured or sick person. (Ex. Emergency Medical, Road Crashes and Trauma Injuries)

OFFICE OR DIVISION	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly- Technical	Highly- Technical		
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL OF THE SERVICE	All			
CHECKLIST OF	REQUIREMENTS		WHERE TO SECUR	RE
Hospital to Hospital coordination for train	nsfer of patients			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Emergency Medical Team (thru phone, radio or walk-in)	 1.1 Collect pertinent details such as complete name, age address, type of incident, exact location, destination, callers name and contact no. etc. 1.2 Determine the nature/level of response caller/patient's status and information 	None	2 minutes	On-duty personnel at the dispatching section
2. Wait for an ambulance	2. Dispatch a Response Team to the target location	None	5 minutes	On-duty personnel at the dispatching section; EMS Team
	TOTAL	None	7 minutes	

NOTE: Arrival time of ambulance varies (location and situation-dependent). The period of dispatch for hospital transfer might take longer. It depends on prior coordination between hospitals





2. AMBULANCE REQUEST FOR NON-EMERGENCY/CONDUCTION

Request for non-emergency ambulance transport (Ex. Dialysis treatment, Chemo Treatment, check-ups, transport hospital to hospital, etc.)

request for non-emergency ambalance		anneni, check-ups, itan	sport nospital to nospital,	
OFFICE OR DIVISION	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly- Technical	Highly-Technical		
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL OF THE SERVICE	All			
CHECKLIST O	FREQUIREMENTS		WHERE TO SECUR	E
Certification		City Social Welfare an	d Development Office	
Hospital to Hospital coordination for the	e transfer of patients		•	
Patients for discharge must be billed ou	It before dispatch of EMS			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Emergency Medical Team for non-emergency dispatch (thru phone, radio or walk-in)	•	None	3 minutes	On-duty personnel at the dispatching section
2. Wait for an ambulance	2. Dispatch a Response Team to the target location	None	5 minutes	On-duty personnel at the dispatching section; EMS Team
	TOTAL	None	8 minutes	

NOTE: Arrival time of ambulance varies (location and situation-dependent). For non-emergency or conduction services, dispatch shall be scheduled depending on the availability of an ambulance





3. AMBULANCE REQUEST FOR TRANSPORTATION OUTSIDE CAVITE

Request for non-emergency ambulance transport (Ex. Going to other Provinces or Regions)

OFFICE OR DIVISION	City Disaster Risk Reduction and Managem	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly- Technical	Highly- Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens			
WHO MAY AVAIL OF THE SERVICE	ALL				
CHECKLIST O	F REQUIREMENTS		WHERE TO SECU	RE	
Written request addressed to the City N	layor	Requesting Individua	l		
Endorsement/Approval letter coming fro	om the City Mayor	Office of the City May	yor		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Request for Emergency Medical Team for non-emergency ambulance transport to other provinces or regions	endorsement letter from the City Mayor	None	2 minutes	On-duty personnel at the dispatching section	
(thru phone, radio, or walk-in)	1.2 Assess the request and collect pertinent details of the request1.3 Approve and schedule the request		1 minute	Operations and Warning Officer	
2. Wait for an ambulance	2. Dispatch a Response Team to the target location	None	5 minutes	On-duty personnel at the dispatching section; EMS Team	
	TOTAL	None	8 minutes		

NOTE: Arrival time of ambulance varies (location and situation-dependent). For non-emergency or conduction services, dispatch shall be scheduled depending on the availability of an ambulance.





4. AMBULANCE REQUEST FOR MEDICAL STANDBY

Request for Medical Team and ambulance stand-by during the conduct of events, especially those with high risk of accidents, within the jurisdiction of Imus. (Ex. Sporting event, social events etc.)

OFFICE OR DIVISION	City Disaster Risk Reduction and Manage	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly-Technical				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	All				
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	RE	
Written request addressed to the OIC of	of CDRRM Office	Requesting individual /	organization		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a Letter of Request	1.1 Receive letter	None	1 minute	Reception Personnel	
				On-duty personnel at the	
	1.2 Assess the request	None	1 minute	dispatching section,	
				Operations and Warning	
	1.3 Approve and schedule the request	None	1 minute	Officer	
2. Receive confirmation via call/e-	2. Dispatch EMS Team to the target	None	5 minutes	On-Duty Personnel at the	
mail.	location			Dispatching Section;	
				EMS Team	
	TOTAL None 8 minutes				

5. INQUIRY ON MONITORED ALERTS AND WARNINGS

Inquiries on Weather Forecasts, storm signals, class suspensions, etc.

OFFICE OR DIVISION	City Disaster Risk Reduction and Manager	ment Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL OF THE SERVICE	VICE All			
CHECKLIST OF	CHECKLIST OF REQUIREMENTS WHERE TO SECURE		E	
N/A		N/A		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire for concern/s through	1. Receive inquiry, advise/answer clients	None	2 minutes	On-duty personnel at the
CDRRMO Hotlines, Radio	based on CDRRMO Monitoring System			dispatching section &
Communications or Social Media				monitoring section
	TOTAL	None	2 minutes	

6. REQUEST FOR SEMINARS, TRAININGS, WORKSHOPS, AND SIMULATION DRILLS

Request asking for DRRM related Trainings, First-aid, and Basic Life Support training.

OFFICE OR DIVISION	City Disaster Risk Reduction and Manager	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly- Technical	Highly- Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	All				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Written request addressed to the OIC o	f CDRRM Office	Requesting individual /	organization		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a Letter of Request	1.1 Receive letter	None	2 minutes	Reception personnel Admin & Training Officer	
	1.2 Assess the request and verify the availability of the schedule	None	3 minutes	Admin & Training Officer	
		None	3 minutes		
	1.3 Approve and schedule the request				
2. Receive confirmation through call or	2. Prepare, send, and communicate	None	3 minutes	Admin & Training Officer	
email	confirmation through call or email				
	TOTAL	None	11 minutes		







7. SEARCH, RESCUE AND RETRIEVAL ASSISTANCE

Request for planned and precise search and rescue and/ or retrieval operations. (Ex. Collapse structure, High angle rescue, water search and rescue, etc)

OFFICE OR DIVISION	City Disaster Risk Reduction and Manage	City Disaster Risk Reduction and Management Office				
CLASSIFICATION	Highly- Technical	lighly- Technical				
TYPE OF TRANSACTION	G2C – Government to Citizens	32C – Government to Citizens				
WHO MAY AVAIL OF THE SERVIC	E All					
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
None		N/A				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Call for assistance	 1.1 Receive request details 1.2 Determine the nature/level of response caller/patient's status and information 1.3 Forward dispatch details to the dispatch and communications section 	None	2 minutes	On-duty personnel at the dispatching section		
2. Wait for SAR Team to arrive	2. Dispatch Response Team to the target location	None	10 minutes	On-duty personnel at the dispatching section;SAR/EMS Team		
	TOTAL	None	12 minutes			

NOTE: Arrival time of SAR / EMS Team varies (location and situation-dependent). Does not include SWAT Rescue-related incidents





8. REQUEST FOR PNP/BFP ASSISTANCE

Provide for immediate PNP/BFP assistance to our constituents. (Ex. Grass fire, Industrial fire, Residential Fire, Police assistance for vehicular accidents and mauling etc.)

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OFFICE OR DIVISION	City Disaster Risk Reduction and Manager	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	All				
CHECKLIST OF	F REQUIREMENTS		WHERE TO SEC	URE	
None		N/A			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Request for PNP/BFP assistance thru phone, radio or walk-in	1.1 Collect all pertinent details	None	2 minutes	On-duty personnel at the dispatching section	
	1.2 Determine the nature/level of response caller/patient's status and information	None			
	1.3 Forward details to PNP or BFP	None			
2. Wait for Fire Rescue Team to arrive	2. Dispatch Response Team to the target location if needs arise	None	5 minutes	On-duty personnel at the dispatching section; Fire Rescue Team	
	TOTAL	None	7 minutes		

NOTE: Arrival time of Fire Rescue Team varies (location and situation-dependent)





OFFICE OR DIVISION	City Disaster Risk Reduction and Manage	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	All	All			
CHECKLIST OI	F REQUIREMENTS		WHERE TO SECUR	RE	
Barangay Certification	Designated Barangay				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Barangay Certification	1. Receive Barangay Certification and conduct a short interview	None	2 minutes	OIC - CDRRMO	
2. Receive Certification	2.1 Prepare Certification	None	2 minutes	Admin and Training Division Staff.	
	2.2 Issue Certification	None	1 minute	Admin and Training Division Staff.	
	TOTAL	None	5 minutes		

9. ISSUANCE OF CERTIFICATE FOR THE AREAS AFFECTED BY CALAMITY

NOTE: Certifications can be issued only when the City is under the State of Calamity





10. REQUEST FOR IMUS CCTV COPY OF FOOTAGE

Request to review CCTV Footage and Copy of the incident footage.

	je and Copy of the incident footage.					
OFFICE OR DIVISION	City Disaster Risk Reduction and Manager	ment Office				
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	Victims of incidents	/ictims of incidents				
CHECKLIST C	FREQUIREMENTS		WHERE TO SECUR	RE		
PNP Blotter		PNP				
Valid IDs		Client				
Barangay Clearance	Designated Barangay					
Submit written request	Office of the City Mayor					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit all requirements	1.1 Receive, and assess documents submitted	None	2 minutes	Research & Planning Officer		
	Submitted			Research, Planning &		
	1.2 Approve request	None	3 minutes	Monitoring Division Staff		
2. Viewing of the CCTV Footage	2. Review of CCTV Footage based on the	None	1 hour	Research & Planning		
	given time, date and location of the client			Officer		
				Research, Planning & Monitoring Division Staff		
3. Receive certification	3. Issue Certification	None	1 minute	OIC - CDRRMO		
4. Receive Copy	4. Release Copy	None	2 minutes	Research & Planning		
				Officer; Research, Planning		
				& Monitoring Division Staff		
	TOTAL	None	1 hour and 8			
			minutes			

***NOTE:** Time depends on the viewing of the CCTV coverage







11. OTHER PUBLIC ASSISTANCE SERVICES

This service includes the following:

- Missing Person
- Request for a copy of Hazard Maps/Plans
 Reporting of Power Interruptions

OFFICE OR DIVISION	City Disaster Risk Reduction and Manager	ity Disaster Risk Reduction and Management Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVICE	All				
CHECKLIST OF REQUIREMENTS WHERE TO SECURE					
Picture of Missing Person and information	on	Client			
Letter of Request for Hazard Maps / Pla	ins	Client			
Customers Account Number of MERAL	CO	Client			
Name and address reflected on the billing	ng statement				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirement	1.1 Receive and assess the document submitted.1.2 Announce missing person	None	2 minutes	On-duty personnel at the dispatching section	
2. Submit a Letter of Request for Maps	2. Check files and print/email requested maps	None	1 minute	Research & Planning Officer	
3. Call for CDRRMO Assistance	3.1 Get Customer Account No., Name, Contact number, and address3.2 Call MERALCO to follow up on power interruptions	None	2 minutes	On-duty personnel at the dispatching section	
	TOTAL	None	5 minutes		







12. EMERGENCY RESPONSE/ INITIAL FIRST AID (CITY HALL COMPLEX) Emergency medical services are requested within the vicinity of the New City Hall Complex (Ex. High Blood Pressure, Injuries, and others)

OFFICE OR DIVISION	City Disaster Risk Reduction and Management Office			
CLASSIFICATION	Highly- Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL OF THE SERVICE	All			
CHECKLIST C	F REQUIREMENTS WHERE TO SECURE			RE
N/A		N/A		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Walk-in request	 1.1 Receive request details 1.2 Determine the nature/level of response caller/patient's status and information 1.3 Forward dispatch details to the dispatch and communications section 	None	2 minutes	On-duty personnel at the Reception area
2. Wait for an ambulance	2. Dispatch a Response Team to the target location	None	2minutes	On-duty personnel at the CDRRMO Office First Aid Station Personnel.
	TOTAL	None	4 minutes	







13. REQUEST FOR BLOOD BAGS

Blood bag requests for emergency and non-emergency cases.

OFFICE OR DIVISION	City Disaster Risk Reduction and Manage	ity Disaster Risk Reduction and Management Office				
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens				
WHO MAY AVAIL OF THE SERVIC	E ALL	ALL .				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
Doctor's Blood Request Form		Hospital where the part	tient is admitted			
Cooler with ice		Client Will Provide				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Walk-in request	 1.1 Receive request details 1.2 Receive, and assess documents submitted. 1.3 Coordination with Red Cross for the availability of blood bags. 	None	4 minutes	On-duty personnel at the Reception area		
2. Receive form	2. Issue original form with a signature from OIC - CDRRMO	None	1 minute	OIC - CDRRMO		
	TOTAL	None	5 minutes			







CITY OF IMUS COOPERATIVE, LIVELIHOOD AND ENTREPRENEURIAL, DEVELOPMENT OFFICE

EXTERNAL SERVICES







1. REQUEST FOR COOPERATIVE DOCUMENTARY PRINTOUTS

Clients may request for the cooperative documentary printouts for the formulation of cooperative policies and compliance with cooperative development authority requirements.

OFFICE OR DIVISION	CICLEDO – Cooperative Division				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents and non-residents of the City of Imus				
CHECKLIS	ST OF REQUIREMENTS WHERE TO SECURE				
Duly Accomplished Request Form –	1photocopy	CICLEDO – Cooperative Division			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request	1. Receive the request and refer the client to	None	2 minutes	Adela C. Cabrera	
	the concerned personnel				
2. Undergo the interview with the	2. Interview client and print the requested	None	10 minutes	Jacquilyn V. Lara	
concerned personnel;	document				
3. Receive the document	3. Release the document	None	1 minutes	Jacquilyn V. Lara	
	Fill-out Client Satisfaction Rating Form				
	TOTAL None 13 minutes				







2. REQUEST FOR FINANCIAL ASSISTANCE

Cooperatives operating in the City of Imus may request for financial assistance to other cooperative related activities.

OFFICE OR DIVISION	CICLEDO – Cooperative Division	ICLEDO – Cooperative Division			
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	Duly registered cooperatives operating in the Cit	ty of Imus			
CHECKLI	ST OF REQUIREMENTS		WHERE TO SECURI	E	
Proof of Sangguniang Panlungsod	Accreditation (1 photocopy)	Client/ Cooperative M	ember		
Request Letter (1 photocopy)		Client/ Cooperative M	ember		
Pertinent attachments for purpose	of assistance (1 original copy of each document)	Client/ Cooperative M	ember		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1.1 Receive and inspect the requirements	None	2 minutes	Adela C. Cabrera	
	1.2 Forward the document to the Office of the City Mayor for Approval	None			
	1.3 Transmit to the Sanggunian Panglungsod for the resolution.	None	7 Days	Administrative Unit	
	1.4 Process the voucher.	None			
	1.5 Message the client for the availability of check	None			
2. Receive the check.	2. Release the check.	None	2 minutes	City Treasurer's Office	
	Fill-out Client Satisfac	tion Rating Form		•	
	TOTAL	None	1 week and 4 minutes		

NOTE: Processing of Vouchers varies.





3. SCHEDULING OF COOPERATIVE TRAINING AND SEMINAR

Officers of cooperatives operating in the City of Imus must comply the training and seminar mandated by the Cooperative Development Authority.

OFFICE OR DIVISION	CICLEDO – Cooperative Division			t	
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	Duly registered cooperatives operating in the Ci	Duly registered cooperatives operating in the City of Imus			
CHECKLI	T OF REQUIREMENTS WHERE TO SECURE				
Request Letter (1 photocopy)		Client/ Cooperative Member			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request	1. Receive the request and refer the client to the concerned personnel	None	2 minutes	Kristine Joy A. Nuestro	
2. Undergo the interview	2. Interview the client	None	20 minutes	Jacquilyn V. Lara	
3. Confirm the schedule of the training/seminar	3. Record the schedule	None	2 minutes	Jennifer Gandia	
	Fill-out Client Satisfac	ction Rating Form			
	TOTAL	None	24 minutes		
NOTE: Period of actual conduct of	trainings and seminars vary depending on the type	of sominar			

NOTE: Period of actual conduct of trainings and seminars vary depending on the type of seminar







4. SCHEDULING OF NEEDS ANALYSIS FOR ORGANIZATION OF COOPERATIVES (PRIMARY/SECONDARY/LABORATORY) Assistance to would-be cooperatives by conducting needs analysis and orientation in coops as mandated by Republic Act 9520 otherwise known as the PCC of 2008.

OFFICE OR DIVISION	CICLEDO – Cooperative Division			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Groups/Individuals intending to organize cooperatives			
CHECKLIS	OF REQUIREMENTS WHERE TO SECURE			
Request letter addressed to the City	Mayor or Department Head (1 photocopy)) Client/Cooperative Member		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the request	1. Receive the request and refer the client to	None	2 minutes	Adela C. Cabrera
	the concerned personnel			
2. Undergo the interview	2. Interview the client	None	55 minutes	Jacquilyn V. Lara
3. Confirm the schedule	3. Schedule the Needs Analysis and	None	2 minutes	Jacquilyn V. Lara
	Orientation			
Fill-out Client Satisfaction Rating Firm				
	TOTAL	None	59 minutes	

Note: Interview time varies.







5. SCHEDULING OF INTERVENTION FOR AILING DISTRESSED COOPERATIVES

Provide assistance in implementing plans and programs for distressed cooperatives and newly organized cooperatives.

OFFICE OR DIVISION	CICLEDO – Cooperative Division				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	Duly registered cooperatives operating in the Cit	Duly registered cooperatives operating in the City of Imus			
CHECKLIS	ST OF REQUIREMENTS WHERE TO SECURE				
Letter Request (1 photocopy)	by) Client/ Cooperative Member				
CDA – Certificate of Registration (1 copy) Client/ Cooperative Member					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request	1. Receive the request and refer the client to	None	2 minutes	Adela C. Cabrera	
	the concerned personnel				
2. Undergo the interview	2. Assess the background of cooperative and	None	55 minutes	Jacquilyn V. Lara	
	the need for intervention				
3. Confirm the schedule	3. Record the schedule	None	2 minutes	Jennifer Gandia	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	59 minutes		

Note: Intervention time varies.







6. ASSISTANCE IN SECURING BUSINESS PERMITS FOR COOPERATIVES

Cooperatives operating in the City of Imus are provided assistance for the immediate processing of their business permits.

OFFICE OR DIVISION	CICLEDO – Cooperative Division				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2B – Government to Business	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Duly registered cooperatives operating in the Cit	ty of Imus			
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	<u>E</u>	
Mayor's Permit – Old Copy (1 photo	сору)	Client/Cooperative Me	ember		
Barangay Endorsement (1 photocop	py)	Barangay Hall – resp	ective Barangay area		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements	1.1 Receive the request and refer the client to the concerned personnel.	None	2 minutes	Adela C. Cabrera Gabrielle Casillano	
1.2 Process documents for the renewal of business permits to the concerned offices (BPLO, TO)		· · ·	30 minutes	Adela C. Cabrera Gabrielle Casillano	
1.3 Forward the document to the office of the City Mayor for approval		None	3 days	Adela C. Cabrera Gabriella Casillano	
2. Received the documents	2. Release the documents	None	2 minutes		
	Fill-out Client Satisfac	tion Rating Form		•	
	TOTAL	Based on assessment	3 days, 34 minutes		

NOTE: Fees to be paid vary if the cooperative has penalties. Approval of documents vary on the availability of the signatory.





7. CONDUCT LIVELIHOOD AND ENTREPRENEURIAL SKILLS TRAINING (BARANGAY BASED LIVELIHOOD CARAVAN)

Constituents may avail and request this service for those who need to undergo livelihood and entrepreneurial skills training that can be conducted in barangay or training center.

WHO MAY AVAIL THE SERVICE	Individuals who needs to undergo livelihood and skills training. Cooperatives, members of cooperatives			
CHECKLIS	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
None	None			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire concerns.	1. Accommodate inquiries and concerns.	None	3 minutes	Bernardita E. Del Rosario
Fill-out Client Satisfaction Rating Form				







8. PROVIDE ASSISTANCE IN PROMOTING PRODUCTS AND SERVICES

Business people/entrepreneurs, interested individuals, cooperatives and members of cooperatives will be invited and encourage to join the trade fairs to promote their products and services.

OFFICE OR DIVISION	CICLEDO – Livelihood and Entrepreneurial Division				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2B – Government to Business				
WHO MAY AVAIL THE SERVICE	Interested individuals, cooperatives, members of	Interested individuals, cooperatives, members of cooperatives			
	Business people/entrepreneurs				
CHECKLIST		WHERE TO SECURE			
Invitation Letter (1 copy)	Livelihood and Entrep	reneurial Division			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit invitation letter	1.1 Receive invitation letter and gather needed materials/information.	None	2 minutes	Bernardita E. Del Rosario, Nelson C. Villanueva	
	1.2 Provide client with needed information in the form of advice or briefing.	None	5 minutes		
2. Confirm the schedule of Trade Fair	nfirm the schedule of Trade 2. Record the schedule		2 minutes	Nelson C. Villanueva	
	Fill-out Client Satisfac	tion Rating Form			
TOTAL None 9 minutes					







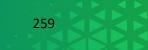
9. SCHEDULING OF LIVELIHOOD AND ENTREPRENEURIAL TRAINING AND SEMINAR

Business people/entrepreneurs, interested individuals, cooperatives and members of cooperatives will undergo trainings and seminars for the improvement of their livelihood business dealings to become successful entrepreneurs.

OFFICE OR DIVISION	CICLEDO – Livelihood and Entrepreneurial Division			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Interested individuals, cooperatives, members of cooperatives			
	Business people/entrepreneurs			
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	E
Invitation Letter (1 copy)		Livelihood and Entrep	reneurial Division	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit invitation letter	1.1 Receive invitation letter and gather needed materials/information.	None	2 minutes	Bernardita E. Del Rosario, Nelson C. Villanueva
	1.2 Provide client with needed information in the form of advice or briefing.	None	5 minutes	
2. Confirm the schedule of Training and Seminar	Ŭ		2 minutes	Nelson C. Villanueva
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	9 minutes	





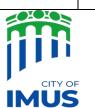


10. REQUEST FOR CREDIT WINDOW FACILITY

Pursuant to Imus City Ordinance No. 03-124 s. 2019 otherwise known as "Imus City Credit Window Facility" shall allocate funds as loan assistance to qualified business enterprise and cooperatives thru a credit window facility

OFFICE OR DIVISION CICL	CICLEDO – Livelihood and Entrepreneurial Division			
CLASSIFICATION High	Highly-Technical			
	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE Wou	Would be/existing entrepreneurs.			
	perative, members of cooperatives			
	REQUIREMENTS	WHERE TO SECURE		
For would-be entrepreneurs (1 photoco	py of each document)			
Accomplished Loan Application Form		CICLEDO Office - Livelihood and Entrepreneurial Division		
Barangay Certificate / Clearance		Respective Barangay		
Livelihood Caravan attendance or equivale	ent training	CICLEDO Office - Livelihood and Entrepreneurial Division		
Business Proposal		Client		
Other documents which may show genuin	e intent and capacity to implement	Client		
entrepreneurial activity.				
For existing entrepreneurs (1 photocop	y of each document)			
Accomplished Loan Application Form		CICLEDO Office - Livelihood and Entrepreneurial Division		
Barangay Certificate / Clearance		Respective Barangay		
Livelihood Caravan attendance or equivalent training		CICLEDO Office - Livelihood and Entrepreneurial Division		
Business Proposal		CICLEDO Office - Livelihood and Entrepreneurial Division		
DTI Registration		Client/DTI Office		
BIR Registration		Client/BIR Office		
Other documents which may show genuin entrepreneurial activity.	e intent and capacity to implement	Client		
For Cooperatives (1 photocopy of each	document)			
Accomplished Loan Application Form		CICLEDO Office - Livelihood and Entrepreneurial Division		
Certificate of Accreditation from the Sango	juniang Panlungsod	Sangguniang Panlungsod		
Business Proposal		Client		
DTI Registration		Client/DTI Office		
BIR Registration		Client/BIR Office		
Other documents which may show genuin	e intent and capacity to implement	Client		





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CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit letter of intent and accomplished loan application form	1. Acknowledge receipt of the request and all required documents, with an initial evaluation and screening of the information submitted and advice the client for the credit investigation	None	2 minutes	Dr. George G. Tumamak Jr.
2. Client awaiting updates	2.1 Conduct credit investigation & business financial standing and consequently complete the Background/Credit Information form.	None	10 days	Michael S. Loyola Bernardita E. Del Rosario Nelson C. Villanueva
	2.2 Interview client if he/she is qualified to avail the service.	None		
	2.3 Evaluate & endorse the application for approval.	None		
	2.4 Process documents for check release to concerned offices (CAO, CTO)	None		
	2.5 Inform the client on the status of the request	None		
3. Accept credit assistance	3. Release credit assistance	None	2 minutes	City Treasurer's Office
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	10 days and 4 minutes	

NOTE: Processing of Vouchers varies. For credit window facility, the processing lasts for at least two weeks.







TRICYCLE REGULATORY UNIT EXTERNAL SERVICES







1. ISSUANCE OF CERTIFICATE OF FRANCHISE

OFFICE OR DIVISION Tricycle Regulatory Unit **CLASSIFICATION** Simple G2C – Government to Citizen **TYPE OF TRANSACTION** WHO MAY AVAIL THE SERVICE All residents and registered voters of the City of Imus CHECKLIST OF REQUIREMENTS WHERE TO SECURE Application Form (Form 1) **Tricycle Regulatory Unit** Inspection (Form 3) Tricycle Regulatory Unit Driver's Registration (Form 7) Tricycle Regulatory Unit Community Tax Certificate (Cedula) of Tricycle Operator and Driver Tricycle Regulatory Unit LTO Official Receipt (OR)/ Certificate of Registration (CR) Land Transportation Office LTO Authorization if no plate available Land Transportation Office Valid ID of operator with signature Client Professional Driver's License with Restriction 1 of Authorized Driver Land Transportation Office Accredited DOH Drug Testing Center Result of Drug Test (Driver) Previous Certificate of Franchise and Mayor's Permit (f renewal) Client Certificate of Dropping (Change Owner/Motor) Tricycle Regulatory Unit Certificate of Membership or Transfer of Membership Rights TODA FEES TO BE PAID **CLIENT STEPS** AGENCY ACTION **PROCESSING TIME** PERSON RESPONSIBLE 1. Submit required documents (for 1. Check and evaluate the completeness Cherry Chrisel Jarin None 5 minutes Superivising Administrative approval) of the documents. Officer : Christie De Guzman Administrative Officer II 2. Submit Form 1 (Application), 2. Inspect tricycle unit and Professional None 25 minutes Ruben Monzon Form3 (Inspection Form) and Form Driver's license Head – Inspection Team 7 (Driver's Authorization Form) 3. Submit the required documents 3.1Assess the necessary fees. See below 25 minutes Cherry Chrisel Jarin and pay necessary fees. Supervising Administrative Officer: Christie De Guzman Administrative Officer II

The Certificate of Franchise legalizes the operation of tricycle within the City of Imus.

CITIZEN'S CHARTER



	3.2 Encode, and print the Certificate of Franchise and tricycle driver ID signed by the TRU Chairman			Cherry Chrisel Jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II	
4. Receive Certificate of Franchise and Tricycle Driver's ID.	4. Issue Certificate of Franchise and tricycle Driver's ID	None	3 minutes	TRU Personnel	
Fill-out Client Satisfaction Rating Form					
TOTAL Based on assessment 58 minutes					

FEE	NEW	CHANGE OWNER	RENEWAL	CHANGE MOTOR	
Processing	1,500	1,500	*	1,000	* for late
					renewal -
					P 750.00
Filing	100	100	100	100	
Franchise	500	500	500	500	
Supervision	50	50	50	50	
Terminal	50	50	50	50	
Certification	50	50	50	50	
Legal Research	50	50	50	50	
Body Number	300	300	300	300	
Inspection	50	50	50	50	
Documentary	30	30	30	30	
Stamp					
Operator's/Driver	50	50	50	50	
ID /Lost ID					
Certified True					50.00
Сору					
Excess of One					100% of
Year					total
					amount/12
					months
TOTAL	2,730	2,730	1,230	2,230	

CITIZEN'S CHARTER

Certificate of Franchise Fees and Charges

Additional Franchise fee for Tricycle Owner of more than one (1) franchise	Rate
a. 2 nd unit	₱ 0.00
b. 3 rd unit	0.00
c. 4 th unit	1,000.00
d. 5 th unit	1,500.00
e. 6 th unit	2,000.00







2. ISSUANCE OF MAYOR'S PERMIT FOR TRICYCLE FRANCHISE OWNER

This service ensures the registration of tricycle in LTO and posting of Sticker in the tricycle unit.

OFFICE OR DIVISION	Tricycle Regulatory Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All franchise owners			
CHECKLIST (OF REQUIREMENTS		WHERE TO SECUR	E
Certificate of Franchise		Tricycle Regulatory Unit		
Certificate of Registration (CR)		Land Transportation Office	е	
Updated LTO Official Receipt (OR)		Land Transportation Office	e	
Updated LTO Authorization if no pla	te available	Land Transportation Office	е	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Process registration in LTO Imus	1. Processing of request	Based on assessment	(stop time)	Land Transportation Office Imus
2. Submit the required documents and pay necessary fees.	 2.1 Check the completeness of submitted document. 2.2 Assess necessary fees 2.3 Encode, print and issue Mayor's Permit duly approved by the TRU Head. 	Tricycle Permit – Php 200.00 Supervision Fee – Php 80.00 Documentary Stamp – Php 30.00 Penalty – 25% of total fees + 2% every month *Cancellation of Franchise if not paid after 3 months	10 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II
3. Present Mayor's Permit	3. Post the latest sticker to the tricycle unit.	None faction Rating Form	5 minutes	Ruben Monzon Head – Inspection Team
	TOTAL	Based on assessment	15 minutes	







To allow tricycle unit with fran	ichise from other LGU to convey passengers	s to imus City			
OFFICE OR DIVISION	Tricycle Regulatory Unit				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	Franchise Owners from other Local Govern	nment Units			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECURE		
Application Form (Form 17)		Tricycle Regulatory Unit			
Inspection (Form 3)		Tricycle Regulatory Unit			
Driver's Registration (Form 7)		Tricycle Regulatory Unit			
Community Tax Certificate (Cedula)	of Tricycle Operator and Driver	Tricycle Regulatory Unit			
LTO Official Receipt (OR)/ Certificate	e of Registration (CR)	Land Transportation Office	е		
LTO Authorization if no plate availab	le	Land Transportation Office	е		
Valid ID of operator with signature		Client			
Professional Driver's License with R	estriction 1 of Authorized Driver	Land Transportation Office	е		
Result of Drug Test (Driver) Accredited DC		Accredited DOH Drug Tes	ited DOH Drug Testing Center		
Previous Special Permit (if renewal)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit required documents (for approval)	1. Check and evaluate the completeness of the documents.	None	5 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II	
2. Submit Form 17 (Application),Form3 (Inspection Form) and Form 7 (Driver's Authorization Form)	2. Inspect tricycle unit and Professional Driver's license	None	25 minutes	Ruben Monzon Head – Inspection Team	
3. Submit the required documents and pay necessary fees.	3.1 Assess the necessary fees.	TRU Certification – Php 500.00 Body Number – Php 300.00 Special Permit –	25 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II	

3. ISSUANCE OF SPECIAL PERMIT FOR TRICYCLE WITH FRANCHISE FROM OTHER LOCAL GOVERNMENT UNIT (LGU)

To allow tricycle unit with franchise from other LGU to convey passengers to Imus City

CITIZEN'S CHARTER



		Inspection - P 100.00		
		Documentary Stamp –		
	3.2 Encode, and print the Special Permit	Php 30.00		
	and tricycle driver ID signed by the TRU			
	Chairman.			
4. Receive Special Permit and	4. Issue Certificate of Franchise and	None	3 minutes	TRU Personnel
Tricycle Driver's ID.	tricycle Driver's ID		(stop time)	
5. Present Special Permit	5. Post Special Permit Sticker to the	None	5 minutes	Ruben Monzon
	tricycle unit			Head – Inspection Team
	Fill-out Client Satist	faction Rating Form		
	TOTAL	Based on assessment	1 hour, 3 minutes	







4. ISSUANCE OF SERVICE PERMIT FOR PRIVATE, BUSINESS, AND SCHOOL SERVICE To regulate the Private, Business and School Service in the use of public streets

OFFICE OR DIVISION	Tricycle Regulatory Unit	ricycle Regulatory Unit			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents of City of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Application Form (Form 15)		Tricycle Regulatory Un	it		
Inspection (Form 16)		Tricycle Regulatory Un	it		
Driver's Registration (Form 7)		Tricycle Regulatory Un	it		
Community Tax Certificate (Cedula)	of Tricycle Operator and Driver	Tricycle Regulatory Un	it		
Updated LTO Official Receipt (OR)		Land Transportation O			
Certificate of Registration (CR)		Land Transportation O	ffice		
LTO Authorization if no plate availab	le	Land Transportation O	ffice		
Valid ID of operator with signature		Client			
Professional Driver's License with Restriction 1 of Authorized Driver or Non- Professional if tricycle will be used for private service only		Land Transportation Office			
Result of Drug Test (Driver)	• •	Accredited DOH Drug Testing Center			
	hool that the tricycle is going to give service	Schools and parents of children			
to the child					
Copy of Business Permit (if tricycle v	vill be used for business)	Business Permits and Licensing Office, 1 st Floor, Imus City Hall			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit required documents.	1. Check and evaluate the completeness of the documents.	None	5 minutes	Cherry Chrisel jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II	
2. Submit form 15 (Application), Form16 (Inspection Form) and Form 7 (Driver's Authorization Form)	2. Inspect tricycle unit and Professional Driver's license	None	25 minutes	Ruben Monzon Head – Inspection Team	
3. Submit the required documents and pay necessary fees.	3.1 Assess the necessary fees.	See below	25 minutes	Cherry Chrisel Jarin	

CITIZEN'S CHARTER



	3.2 Encode, and print the Service Permit			Supervising Administrative
	and tricycle driver's ID signed by the TRU			Officer;
	Head.			Christie De Guzman
				Administrative Officer II
4. Receive Service Permit and	4. Issue Service Permit and tricycle Driver's	None	3 minutes	TRU Personnel
Tricycle Driver's ID.	ID		(stop time)	
5. Present Service Permit	5. Post Special Permit Sticker	None	5 minutes	Ruben Monzon
				Head – Inspection Team
	Fill-out Client Satisfact	ion Rating Form		
	TOTAL	None	1 hour, 3 minutes	

Service Permit for Private, Business and School Service Fees and Charges

U	
TYPE OF APPLICATION	FEES
Private Use (Imus)	330.00
Private Use (another Municipality)	530.00
School Service (Imus)	530.00
School Service (another Municipality)	830.00
Business (Imus)	1,030.00
Business (another Municipality)	1,530.00







5. ISSUANCE OF PEDALED/E-BIKE/BICYCLE PERMIT

To regulate the Pedaled/E-bike/Bicycle in the use of public streets

OFFICE OR DIVISION	Tricycle Regulatory Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of City of Imus			
	REQUIREMENTS		WHERE TO SECURE	
Application Form (Form 11)		Tricycle Regulatory Unit		
Previous Pedaled Permit (if renewal)		Client		
Certification from PODA (if new PODA	A member)	PEDICAB OPERATOR D	RIVER ASSOCIATION (PODA)
Proof of Purchase (if new)		Client		· · · · · · · · · · · · · · · · · · ·
Community Tax Certificate (Cedula) o	f the owner	Tricycle Regulatory Unit		
Barangay Clearance of the Owner	Respective Barangay			
Authorization letter if the driver will tra	er will transact in behalf of the owner Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit required documents and pay necessary fees.	 1.1 Check and evaluate the completeness of the documents. 1.2 Assess necessary fees. 1.3 Receive payment. 1.4 Encode and print Pedaled Permit. 	Bicycle – Php 130.00 Pedicab (Padyak) – Php 255.00 Pedicab (E-bike) – Php 355.00 E-bike (Private)– Php 330.00	30 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie De Guzman Administrative Officer II
2. Receive Pedaled Permit and Plate/Sticker	2. Issue Pedaled Permit and Plate/Sticker duly approved by the TRU Head	None	3 minutes	TRU Personnel
		faction Rating Form	22 minutes	
	TOTAL	Based on assessment	33 minutes	







6. ISSUANCE OF CERTIFICATE OF DROPPING

To cancel/drop the granted authority of public convenience to operate a motorized tricycle with franchise.

OFFICE OR DIVISION	Tricycle Regulatory Unit			
	, , ,			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All franchise owners			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECURE	
Original Certificate of Franchise/ Ma	yor's Permit	Client		
Original Official Receipt (OR)/ Certifi	icate of Registration (CR)	Land Transportation Offic	e	
Notarized Deed of Sale (if change o	wner) with two (2) valid ID's with signature	Client		
of both parties				
Notarized Extra Judicial Partition (if t	the owner died)	Notarial Services		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the required documents -	1.1 Check and evaluate the completeness	Php 300.00	30 minutes	Cherry Chrisel Jarin
Personal appearance of Franchise	of the documents.			Supervising Administrative
Owner and payment of necessary				Officer;
fess.	1.2 Assess necessary fees.			Christie De Guzman
				Administrative Officer II
	1.3 Receive payment.			
	1.4 Encode and print Certificate of			
	Dropping.			
2. Receive Certificate of Dropping	2. Issue Certificate of Dropping	None	3 minutes	TRU Personnel
	Fill-out Client Satis	faction Rating Form		
	TOTAL	Based on assessment	33 minutes	





7. REDEMPTION OF DRIVER'S LICENSE OR VEHICLE PLATE

The process involves verification of the Ordinance Violation Receipt (OVR) issued by the apprehending Enforcer and timely release of confiscated Driver's License and/or Vehicle Plate

OFFICE OR DIVISION	Tricycle Regulatory Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All traffic violators who have been iss	ued the OVR for specific vio	lations of tricycle/transpo	ort law/s and/or city ordinance/s
CHECKLIST OF	REQUIREMENTS		WHERE TO SECUR	RE
Blue Copy of the OVR		Apprehending Officer		
Official Receipt of payment		Tricycle Regulatory Unit		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Present the blue copy of the OVR;	original copy of the OVR and the driver's license/other relevant documents are already transmitted by the issuing/apprehending officer/unit; 1.2 Assess the applicable fee/penalty based on the indicated violation;	None	10 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie de Guzman Administrative Officer II
2. Receive the Order of Payment (OP)	2. Release Order of Payment (OP)	None	2 minute	TRU Personnel
3. Proceed to the Collection Officer and pay the necessary fees.	3. Collection officer receives the payment and issues an Official Receipt based on the presented Payment Order (OP)	will depend on the nature	5 minute	TRU Personnel
4. Present the Official Receipt	4. Releasing officer records the details of the OR and releases the driver's license and/or vehicle plate	None	3 minute	TRU Personnel
	TOTAL	Based on assessment	20 minutes	





8. REDEMPTION OF IMPOUNDED VEHICLE

The process involves verification of the Ordinance Violation Receipt (OVR) issued by the apprehending officer/traffic police officer and timely release of confiscated vehicle key/s. Client is then referred to the vehicle impound facility for redemption of confiscated vehicle/s.

· · · · · · · · · · · · · · · · · · ·					
OFFICE OR DIVISION	Tricycle Regulatory Unit	ricycle Regulatory Unit			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE	All traffic violators who have been issued	All traffic violators who have been issued the Ordinance Violation Receipt (OVR); has no driver's license and/or does not			
	carry with him/her the vehicles registration	on papers			
CHECKLIST OI	F REQUIREMENTS		WHERE TO SECUR	E	
Blue Copy of the OVR		Apprehending Officer			
Official Receipt of payment		Tricycle Regulatory Unit			
Impounding Release Receipt		Tricycle Regulatory Unit			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the blue copy of the OVR;	 1.1 Releasing officer verifies if the original copy of the OVR and the driver's license/other relevant documents are already transmitted by the issuing/apprehending officer/unit; 1.2 Assess the applicable fee/penalty based on the indicated violation 	None	10 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie de Guzman Administrative Officer II	
2. Receive the Order of Payment (OP)	2. Receive payment and release Official Receipt (OR)	None	1 minute	TRU Personnel	
3. Proceed to the Collection Officer for payment of penalty	3. Collection officer receives the payment and issues an Official Receipt based on the presented Payment Order (OP)	Applicable fee/penalty will depend on the nature of the traffic violation/s as assessed	1 minute	TRU Personnel	
4. Present the Official Receipt (OR)	4.1 Record the OR details and issue the Impounding Release Receipt;	None	1 minute	TRU Personnel	
	4.2 Prepare the Order of Release;				

CITIZEN'S CHARTER



5. Proceed to the TRU impounding area to retrieve the vehicle	4.3 Direct guide the client on how to claim the vehicle at the city impounding area5. Check the requirement and payment, release the vehicle	None	5 minutes	Ruben Monzon Head – Inspection Team
	Fill-out Client Sat	tisfaction Rating Form		
	TOTAL	Based on assessment	21 minutes	







9. ADJUDICATION OF COMPLAINTS AGAINST TRAFFIC ENFORCER

The Tricycle Regulatory Unit practices a fair and just implementation of traffic laws and/or city ordinances. All forwarded complaints are given utmost and careful attention.

OFFICE OR DIVISION	Tricycle Regulatory Unit				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	Any and all traffic violators who believe t	Any and all traffic violators who believe that they were unfairly and/or unjustly charged with a traffic violation by the			
	apprehending traffic enforcer.				
CHECKLIST OF	F REQUIREMENTS		WHERE TO	SECURE	
Verbal or written complaint prepared	, ,	Prepared by the con	•		
Blue copy of the Ordinance Violation	Receipt (OVR)	Apprehending enfor	cer		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Make a verbal complaint officer in front of the mediation officer	1. Merit of the complaint is assessed after the complainant has narrated his/her side of the incident	None	5 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie de Guzman Administrative Officer II	
2. Confront the apprehending officer in front of the mediation officer	2. Summon the apprehending officer for a dialogue with the complainant for possible resolution of the problem	None	10 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie de Guzman Administrative Officer II	
3. Redeem his/her violation per covering OVR following Frontline Service Procedures	3. Upon resolution of the problem, request the complainant to redeem his/her violation	None	5 minutes	Cherry Chrisel Jarin Supervising Administrative Officer; Christie de Guzman Administrative Officer II	
*** In meritorious cases, file a formal complaint with the Office of the City Mayor or the City Administration Office	*** Office of the City Mayor or City Administration Office forward the complaint to the TRU	None	1 day (arbitrary)	Staff at the Office of the City Mayor	
4. Follow-up action on his/her complaint	4. Follow the procedures 1 to 3 above	None	-	TRU Personnel	
	TOTAL	NONE	2 days		





10. INQUIRIES

To deal with their inquiries and conce	erns regarding the status of their franchise unit				
OFFICE OR DIVISION	Tricycle Regulatory Unit				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
VHO MAY AVAIL THE SERVICE All Imuseños					
CHECKLIST	LIST OF REQUIREMENTS WHERE TO SECURE			RE	
Valid ID	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Inquire concerns	1. Accommodate inquiries and concerns	None	5 minutes	Cherry Chrisel Jarin	
				Supervising Administrative	
				Officer;	
				Christie de Guzman	
				Administrative Officer II	
Fill-out Client Satisfaction Rating Form					
	TOTAL None 5 minutes				







CITY VETERINARY SERVICES OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

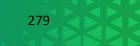
1. MASS RABIES VACCINATION AND ANIMAL REGISTRATION

A service providing mass rabies vaccination in all barangays and subdivisions within the city – Ordinance Nos. 03-85-S-2017 or "An Ordinance Enacting the Revised City of Imus Anti-Rabies Act of 2017", Section 2. It is the policy of the city to protect and promote the right to health of the people. Toward this end, a system for the control, prevention of the spread and eventual eradication of human and animal rabies shall be provided and the need for responsible pet ownership established.

OFFICE OR DIVISION	City Veterinary Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	WHO MAY AVAIL THE SERVICE Pet owners in City of Imus				
CHECKLIST	LIST OF REQUIREMENTS WHERE TO SECURE				
Vaccination records of pet if any (to	(to be presented on vaccination Date) City Veterinary Services Office				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Bring pets at the designated	1. Coordinate to barangay captain/s for the	None	5 minutes	Jonadel L. Ramirez;	
venue	schedule of rabies vaccination			Haydee D. Olita	
	Fill-out Client Satisfaction Rating Form				
	TOTAL None 5 minutes				







2. ANIMAL VACCINATION (WALK-IN CLIENT)

A service provided to the residents of the City of Imus to intensify efforts towards animal disease prevention and control specifically rabies.

OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Highly - Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All pet owners of Imus			
	OF REQUIREMENTS		WHERE TO SECUR	RE
Vaccination card/s of pets if any		City Veterinary Service		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Bring pet for vaccination	1. Check and evaluate health status of dog or animal	None	5 minutes	Dr. Maribel Depayso – Reyes ; Gilbert G. Remulla
2. Register the owner and pet profile	2.1 Register, Record and File owner and pet profile.	None	3 minutes	Jonadel L. Ramirez; Haydee D .Olita
	2.2 Update Vaccination Record	None		
	2.3 Vaccinate the animal	None	5 minutes	Dr. Maribel Depayso – Reyes Gilbert G. Remulla
	2.4 Release animal to the owner and advice client of the post vaccination care of the animal.	None	2 minutes	
3. Claim vaccination and registration	3. Issue vaccination certificate Card/Booklet.	None	3 minutes	Jonadel L. Ramirez; Haydee D. Olita
	Fill-out Client Satisfaci	ton Rating Form	1	
	TOTAL	None	18 minutes	







3. ANIMAL CONSULTATION/TREATMENT

This is a service providing assistance to pet owners with regards to their pets most especially those that need medical attention.

	City Veterinery Corrigen Office				
OFFICE OR DIVISION	City Veterinary Services Office				
CLASSIFICATION	Highly-Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All pet owners of Imus (For large animal lives	<i>tock animals</i> the City Vet	erinary will visit the location	on).	
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
None		N/A			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Bring pet for consultation and treatment	1.1 Interview the owner	None	3 minutes	Jonadel L. Ramirez	
	1.2 Inspect sick animal1.3 Do basic procedure to establish a tentative diagnosis	None None	10 minutes	Dr. Maribel Depayso – Reyes	
	1.4 Administer appropriate medicine to the animal (if available)	None			
2. Receive medicine and prescription	2. Give prescription and instructions.	None	3 minutes	Dr. Maribel Depayso – Reyes	
	Fill-out Client Satisfac	iton Rating Form		I	
	TOTAL	None	16 minutes		





4. SPAY AND NEUTER SERVICES

A service provided to help control animal population in the City of Imus and provide a longer and healthier life to the pets. It is also a solution that will help in the eradication of rabies disease.

OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All pet owners in the City of Imus			
CHECKLIST	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
Any valid ID as proof of Imus resider	icy.	City Veterinary Service	es Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Visit the City Veterinary Office to avail of the service.	1. Interview client if pet is qualified for the procedure.	None	5 minutes	Jonadel L. Ramirez; Haydee D. Olita
2. Sign waiver if fully understood	2.1 Explain the content of the waiver to client.2.2 Schedule the surgery and advise owner on the pre-operative care of the pet.	None	3 minutes (stop time)	Jonadel L. Ramirez; Haydee D. Olita
3. Bring pet on the scheduled time of surgery	3.1 Conduct the surgery3.2 Prescribe medicine and advise client on	None	1 hour	Dr. Maribel Depayso – Reyes
	the post-operative care of the patient			
	Fill out Customer Fe	eedback Form	1	
	TOTAL	None	1 hour, 8 minutes	

NOTE: Surgery depends on the condition of the dog





5. PET MICROCHIPPING

A service provided to tag pets by inserting a microchip that is roughly a size of a grain that carries a unique identification number for each animal. This serves as a lifetime identification of the animal.

	••••			
OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All pet owners in the City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Vaccination card/s as proof that pet	is rabies vaccinated	City Veterinary Service	es Office or any private v	eterinary clinics
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Bring Pet to the City Veterinary Services Office (or specified venue during events).	1.1 Interview client.	None	3 minutes	Jonadel L. Ramirez; Haydee D. Olita
	1.2 Evaluate pet if fit for the procedure.	None	5 minutes	Dr. Maribel Depayso – Reyes
	1.3 Insert microchips on the pet.	None	2 minutes	
				Dr. Maribel Depayso –
	1.4 Explain to pet owners on how to register their pets to the system of petdentity.	None	2 minutes	Reyes
				Jonadel L. Ramirez; Haydee D. Olita
	Fill out Customer Fo	eedback Form	11	
	TOTAL	None	12 minutes	





6. ISSUANCE OF VETERINARY HEALTH CERTIFICATE (VHC)

A service providing Veterinary Health Certificate to clients as compliance to the requirements of the Bureau of Animal Industry if animal is to be travelled to other regions to prevent the spread of animal diseases especially rabies, avian influenza and African swine fever.

OFFICE OR DIVISION	City Veterinary Services Office				
CLASSIFICATION	Highly-Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE					
	OF REQUIREMENTS		WHERE TO SECUR		
	is rabies vaccinated (cats and dogs) and New	City Veterinary Service	s Office or any private ve	eterinary clinics	
Castle Disease vaccination certifica	te for avians				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Bring Animal/s to the City Veterinary Services Office.	1.1 Interview client	None	3 minutes	Haydee D. Olita	
	1.2 Evaluate the health status of the animal	None	3 minutes	Dr. Maribel Depayso – Reyes	
	1.3 If fit, collect blood and nasal/cloacal sample if animal/s presented is avian/s.	None	3 minutes/bird	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla	
	1.4 Advise owner on the proper handling of samples before they will bring it to the Bureau of Animal industry for testing.	None	2 minutes	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla	
	1.5 Advise owner to claim the Veterinary Health Certificate after 14 days.	None	2 minutes	Haydee D. Olita	
	Fill out Customer Fe		I	1	
	TOTAL	None	13 minutes		



7. ASSISTANCE TO ANIMAL IMPOUNDING OPERATION

A service provided to collect stray animals in all barangays to prevent spread of rabies and as one way of animal population control. Implementation of Ordinance Nos. 2011-117 Sec. 10, "Impounding, Field Control and Disposition of Animal.

		inan			
OFFICE OR DIVISION	City Veterinary Services Office	ity Veterinary Services Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens			
WHO MAY AVAIL THE	All residents/ Non-Residents of Imus; Baranga	y or Homeowner's Assoc	ciation Officers		
SERVICE					
CHECKL	KLIST OF REQUIREMENTS WHERE TO SECURE				
None		City Veterinary Services Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Ask assistance in the	1.1 Ask for location & other specifications	None	10 minutes	Jonadel L. Ramirez;	
impounding of stray animals				Haydee D. Olita	
though phone call or personal	1.2 Check availability of the city pound team &	None			
visit.	inform them of the site/location of stray animals				
	to be impounded.				
	1.3 Dispatch the impounding team	None			
	Fill out Customer F	eedback Form			
	TOTAL	None	10 minutes		

NOTE: Period of impounding operation will vary depending on various factors.







8. CLAIMING OF IMPOUNDED ANIMALS

A service provided to claim or redeem impounded animals. Implementation of Ordinance Nos. 03-85-S-2017, Sec. 24 – Penalties.

OFFICE OR DIVISION	City Veterinary Services Office		-0-2017, 0ec. 24 - 1 ene	
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	Owners of Impounded stray animals			
	OF REQUIREMENTS		WHERE TO SECURE	
Proof of ownership		Client		
Official receipt from City Treasurer's	s Office	City Treasurer's Office		
Updated Community Tax Certificate		City Treasurer's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Proof of Ownership 1	. Check the requirement.	None	3 minutes	Jonadel L. Ramirez; Haydee D. Olita
2. Claim the Order of Payment 2	. Release Order of Payment	None	2 minutes	Jonadel L. Ramirez; Haydee D. Olita
Office and pay the required fee.	. Receive payment and issue Official Receipt (OR)	Releasing P500.00 Additional penalties: Fine (1 st offense) P1,000.00 Fine (2 nd Offense) P2,000.00 Fine (3 rd Offense) P 3,000.00 If animal is unvaccinated, Fine (1 st offense) P 2,000.00 Fine(2 nd Offense) P 3,000.00 Fine (3 rd Offense) P 5,000.00	15 minutes	City Treasurer's Office
4. Present Requirements 4	. Check the completeness of requirements	None	3 minutes	Jonadel L. Ramirez; Haydee D. Olita

CITIZEN'S CHARTER

5. Claim Release Stub	5. Issue Release Stub	None	2 minutes	Jonadel L. Ramirez; Haydee D. Olita	
6. Present Release Stub	6. Release Pet/ Animal	None	10 minutes	Jay S. Maliksi; Kervin E. Tapawan; Jose G. Travero	
Fill out Customer Feedback Form					
	ΤΟΤΑΙ	Based on assessment	35 minutes		







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9. ADOPTION PROGRAM

A service opting all qualified impounded dogs for adoption give them a second chance to live and find a permanent and loving owner.

OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All interested and qualified adopters			
	IST OF REQUIREMENTS WHERE TO SECURE			RE
Any valid ID		City Veterinary Service		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present photocopy of any valid	1. Validate & photocopy the identification	None	2 minutes	Jonadel Ramirez;
ID	card presented			Haydee Olita
2. Choose dog/cat to adopt	2. Show the dogs/cats opt for adoption	None	1 hour	Kervin Tapawan; Jose Travero
3. Fill-out the adoption form and sign the adoption agreement	3.1 Assess if adopter is qualified and capable to adopt	None	2 minutes	Haydee Olita; Jonadel Ramirez
	3.2 Explain briefly the adoption program and agreement	None	3 minutes	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla
	3.3 Vaccinate pet with anti-rabies vaccine and advise owner to have the dog vaccinated with other core vaccines.	None	2 minutes	
4. Receive the adopted pet	4. Award dog/cat to the owner	None	2 minutes	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla
	Fill out Customer Fe	eedback Form		
	TOTAL	None	1 hour, 11 minutes	

NOTE: Depends on how long the adopter will choose an animal to adopt.





10. ANIMAL DEWORMING

A service providing dewormers or anthelminthic drugs to animals to rid them of parasites such as roundworms, flukes, tapeworms and others; also, to boost their immune system and improve their health status. Vitamins is administered specially to emaciated animals.

OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE All owners of livestock				
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				RE
None	N/A			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Arrange schedule with City Veterinarian	1. Schedule the proposed activity	None	5 minutes	Jonadel L. Ramirez; Haydee D. Olita
Fill out Customer Feedback Form				
	TOTAL None 5 minutes			







11. SCHEDULING OF BREEDING SUPPORT SERVICES

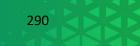
A service providing assistance to farmers to improve the quality of livestock through artificial insemination, proper management and introduction of new techniques or innovations.

OFFICE OR DIVISION	City Veterinary Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	Livestock Owners				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
None	N/A				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Go directly or call the City Veterinary Office to coordinate concerns on livestock production	1. Get the necessary information of the owner especially the exact location of the animal and farmer	None	2 minutes	Jonadel L. Ramirez; Haydee D. Olita	
2. Wait for the update of the office.	2. Coordinate with the Provincial Veterinarian for insemination	None	5 minutes	Jonadel L. Ramirez; Haydee D. Olita	
	Fill out Customer Feedback Form				
	TOTAL	None	7 minutes		
NOTE: Doponds on the number of ar	imals to be incominated				

NOTE: Depends on the number of animals to be inseminated







12. ANTE – MORTEM & POST - MORTEM

Inspection of animals before & after slaughter to ensure that all animals accepted are fit for slaughter; free form diseases; clean safe to eat meat & meat byproducts.

OFFICE OR DIVISION	City Veterinary Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	Meat Dealers/Traders			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
None	-	N/A		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure all necessary requirements for slaughter	 Check completeness of all necessary requirements presented. 	None	5 minutes	CSU on duty
2. Bring animals for slaughter at the City Slaughterhouse	2. Receive & record the number of animals.	None	3 minutes	CSU on duty
	 Inspect all the animals if fit for slaughter (ante – mortem inspection) 	None	5 minutes	Ronnie M. Sapin; Magfelio Lopez
	 Slaughter/Butcher all animals that passed the inspection & accepted for slaughter. 	None	15 minutes	Butchers
	 Inspection of carcasses (post – mortem inspection) if fit to consume. 	None	5 minutes	Magfelio Lopez; Melvin Romilla
	6. Record dressed weight of animals.	None	1 minute	Alrex B. Legion; Lorenzo Santiago; Juanito Del Rosario Jr.
	7. Issuance of Meat Ispection Certificate.	None	3 minutes	Magfelio Lopez; Jamaica Quiba Menguito Melvin Romilla
	8. Carcasses ready for dispatch.	None		
	Fill out Customer Fe		1 -	
	TOTAL	None	37 minutes	

NOTE: Depends on the number of animals to be inspected





13. POST ABATTOIR INSPECTION

Inspection of meat and meat by – products in all Private/Public markets in the City of Imus to ensure that they are slaughtered in an accredited slaughterhouse.

OFFICE OR DIVISION	City Veterinary Services Office		, ,	
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	Meat Vendors/Traders			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
None	-	N/A		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
 Secure all necessary permits for meat stalls operation. 	 Coordinate to all concern Departments thru phone calls & request letters. (EEMO, PNP, CSU for assistance). 	None	15 minutes	Gilbert G. Remulla
	 Conduct inspection in all meat stalls in the City. 	None	3 hours	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla; Kervin E. Tapawan; Jose G. Travero; Jay S. Maliksi
	 Confiscation of all unfit meat & meat- by products if there is and giving of final warning to all violators. 	None	45 minutes	Dr. Maribel Depayso – Reyes; Gilbert G. Remulla
	 Blotter incidence to the nearest police station in the area. 	None	10 minutes	
	 Donate fit to eat meat & meat-by products to charitable institutions in 	None	1 hour	Gilbert G. Remulla
	the City.			Gilbert G. Remulla; Kervin E. Tapawan;
	Dispose all unfit meat & meat- byproducts by burying.			Jose G. Travero; Jay S. Maliksi
	Fill-out Client Satisf	action Report		
	TOTAL	None	2 hours, 13 minutes	





CITY AGRICULTURE SERVICES OFFICE EXTERNAL SERVICES







1. REGISTRATION TO REGISTRY SYSTEM FOR BASIC SECTOR IN AGRICULTURE (RSBSA)

This is to register farmers as basic requirements in availing Agri-Fishery related government services particularly for programs and projects of the Department of Agriculture and other National Government Agencies.

	5				
OFFICE OR DIVISION	City Agriculture Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government' G2C – G	overnment to Citizen			
WHO MAY AVAIL THE SERVICE	All farmers in the City of Imus (Rice, Vegetab	le and Livestock Farmer	/Growers)		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
Duly Accomplished RSBSA Form		City Agriculture Service	es Office		
Barangay Certification		Residence Barangay			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill out the RSBSA Form.	1. Issuance of RSBSA Form.	None	2 minutes	Dan Kevin P. Mojica Paul John C. Rodrin Jessica-An M. Morales Desierin R. Alcantara May Ann C. Villa	
2. Undergo interview with the assigned Agricultural Extension Worker.	2. Conduct interview to Farmers.	None	5 minutes	Dan Kevin P. Mojica Paul John C. Rodrin Jessica-An M. Morales Desierin R. Alcantara May Ann C. Villa	
3. Secure Barangay Certificate (Residence and Farm Location).	3. Receive/review and encode the accomplished RSBSA Form	None	10 minutes	Jessica-An M. Morales Dan Kevin P. Mojica	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	17 minutes		





2. ISSUANCE OF PALAY

Provision of high quality of palay seeds to the farmers for the increase of production and help them to cope with the lowest price of their paddy output.

OFFICE OR DIVISION	City Agriculture Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government' G2C – G	overnment to Citizen			
WHO MAY AVAIL THE SERVICE	All farmers in the City of Imus included in the	master list registered to	Registry System for Bas	ic Sector in Agriculture	
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
Duly Accomplished Client Form		City Agriculture Service			
Request Slip		City Agriculture Service	es Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1. Assess the requirements.	None	2 minutes	Dan Kevin P. Mojica	
				Prescilda D. Igtiben	
2. Undergo interview with the		None	5 minutes	Dan Kevin P. Mojica	
assigned Agricultural Technologist.	needed time for planting and area covered			Paul John C. Rodrin	
	by the farmer.			Jessica-An M. Morales	
				Desierin R. Alcantara	
3. Submit the approved request slip	3. Receive the request slip and issue the	None	15 minutes	Sernan S. Lozada	
and receive the seeds.	seeds.			Christopher L. Sayurin	
	Roy M. Araojo				
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	22 minutes		

NOTE: Available during Wet Season (Month of April – May)/Dry Season (Month of October-November)







3. APPLICATION TO CROP INSURANCE PROGRAM

This program insures farmers to Philippine Crop Insurance Corporation for the protection of their crops during calamities.

OFFICE OR DIVISION	City Agriculture Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government' G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All registered Farmers to Registry System for	Basic Sector in Agricult	ure (RSBSA)		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Duly Accomplished Insurance Applic	ation Form	City Agriculture Service	es Office		
Photocopy of Valid ID					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Undergo interview with the	1. Conduct interview and assessment.	None	10 minutes	Dan Kevin P. Mojica	
assigned Agricultural Extension				Paul John C. Rodrin	
Worker.				Jessica-An M. Morales	
				Desierin R. Alcantara	
2. Fill out Crop Insurance	2. Assist the Farmer in filling up Crop	None	5 minutes	Dan Kevin P. Mojica	
Application Form.	Insurance Application Form.			Paul John C. Rodrin	
				Jessica-An M. Morales	
				Desierin R. Alcantara	
3. Submit the duly accomplished	3. Receive the Crop Insurance application	None	2 minutes	Dan Kevin P. Mojica	
Crop Insurance Application Form.	form.			Paul John C. Rodrin	
				Jessica-An M. Morales	
				Desierin R. Alcantara	
4. Report to the assigned	4. Assess damages and issue claim for	None	60 minutes	Dan Kevin P. Mojica	
Agricultural Extension Worker (In	indemnity application form.			Paul John C. Rodrin	
case of damages due to natural				Jessica-An M. Morales	
calamities, pest infestation or plant				Desierin R. Alcantara	
diseases)					
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	1 hour and 17		
			minutes		







4. ISSUANCE OF VEGETABLE SEEDS

Provision and distribution of quality seeds to farmers; different Schools; Homeowner's Associations, NGO's for Urban/Backyard Gardening; and other clients for sustainable food production.

F						
OFFICE OR DIVISION	City Agriculture Services Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Businesses				
WHO MAY AVAIL THE SERVICE	All residents in the City of Imus/Schools/Hom	eowners Associations a	nd all Farmers			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E		
Request Letter (for Gulayan sa Paar	alan Program and Communal Garden)	Client				
Duly Accomplished Client Form		City Agriculture Servic	es Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the requirements.	1. Assess the requirements.	None	1 minute	Prescilda D. Igtiben May Ann C. Villa Desierin R. Alcantara		
2. Undergo interview with the assigned Agricultural Extension Worker.	1 0	None	5 minutes	Prescilda D. Igtiben May Ann C. Villa Desierin R. Alcantara		
3. Fill out the Clients' Form.	3. Assist the client in filling out the form.	None	3 minutes	Prescilda D. Igtiben May Ann C. Villa Desierin R. Alcantara		
4. Receive the vegetable seeds.	4. Issue the Vegetable Seeds.	None	1 minute	Prescilda D. Igtiben May Ann C.Villa Desierin R. Alcantara		
	Fill-out Client Satisfac	tion Rating Form				
	TOTAL	None	10 minutes			





5. ISSUANCE OF ORGANIC/INORGANIC FERTILIZER

Issues organic/non-organic fertilizer as part of the intervention coming from the National government in support to the Plant Plant Plant program in attaining the food sufficiency and sustainability.

······································	···· y ·					
OFFICE OR DIVISION	City Agriculture Services Office	City Agriculture Services Office				
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C -	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Businesses				
WHO MAY AVAIL THE SERVICE	All residents in the City of Imus/Educationa	I Institutions and Homeow	ners Associations/All far	mers in the City of Imus		
CHECKLI	ST OF REQUIREMENTS		WHERE TO SECUR	RE		
Request Letter		Client				
Duly Accomplished Client Form		City Agriculture Service	es Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the request letter.	1. Receive/check the letter.	None	2 minutes	Robert R. Marges Prescilda D. Igtiben May Ann C. Villa		
2. Undergo interview.	2. Conduct interview to clients.	None	5 minutes	May Ann C. Villa Jessica-An M. Morales Paul John C. Rodrin Dan Kevin P. Mojica		
3. Receive the fertilizer.	3. Distribute the fertilizer.	None	5 minutes	Sernan S. Lozada Christopher L. Sayurin Roy M. Araojo		
	Fill-out Client Satisf	9	1			
	ΤΟΤΑ	L None	12 minutes			

NOTE: Upon availability of fertilizer.





6. FIELDWORK ACTIVITIES

Conduct regular weekly field work activities, monitors and render technical assistance to the farmers. Provide proper advise and suggestions to maintain and assure the increase on their production of crops

and assure the morease on their pro-						
OFFICE OR DIVISION	City Agriculture Services Office					
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Businesses				
WHO MAY AVAIL THE SERVICE	All farmers in the City of Imus					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
Request Letter		Client				
Duly Accomplished Client Form		City Agriculture Service	es Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Request farm visitation.	1. Schedule farm visitation.	None	1 minute	All A.E. W's		
2. Assists A.E.W. in the farm.	2.1 Conducts/Monitors/Assess in their area of production.2.2 Render technical assistance.	None	45 minutes	Dan Kevin P. Mojica Paul John C. Rodrin Jessica-An M. Morales Desierin R. Alcantara Prescilda D. Igtiben May Ann C. Villa		
3. Report technical problems.	3. Provides recommendations/advice as needed.	None	45 minutes	All A.E.W's		
	Fill-out Client Satisfac	tion Rating Form				
	TOTAL	None	91minutes			





7. PROVIDE TRAINING ASSISTANCE/ESTABLISHMENT OF COMMUNITY/INSTITUTIONAL GARDENING/ORGANIC FARMING

This is to strengthen the skills and knowledge for establishing the standard of competency; Establishment of Community/ Institutional Garden through Organic Farming and to develop vegetable production through naturally grown practices.

OFFICE OR DIVISION	City Agriculture Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	overnment to Citizen, G	2B – Government to Bus	sinesses	
WHO MAY AVAIL THE SERVICE	All residents in the City of Imus; All farmers in	the City of Imus.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
Request Letter		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1. Assess the kind of training needed.	None	10 minutes	Robert R. Marges Prescilda D. Igtiben May Ann C. Villa Desierin R. Alcantara Jessica-An M. Morales Paul John C. Rodrin Dan Kevin P. Mojica Janette Paula E. Ortiz	
2. Wait for schedule.	2. Schedule the training and provide instructions for the needed preparations.	None	5 minutes	Robert R. Marges	
	Fill-out Client Satisfac	tion Rating Form	1		
	TOTAL	None	15 minutes		





8. PROVIDE SOIL ANALYSIS

This is to determine the soil nutrient levels and fertilizer recommendations needed for a high yielding produce and best quality of crops.

OFFICE OR DIVISION	City Agriculture Services Office	<u> </u>	<u> </u>		
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Businesses				
WHO MAY AVAIL THE SERVICE	All residents in the City of Imus; All farmers in	n the City of Imus.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Request Letter		Client			
Duly Accomplished Client Form		City Agriculture Servic			
Soil Sample		Area requested by Far			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the Request Letter.	1.1 Assess the requirements.1.2 Interview and schedule the client for soil	None	5 minutes	Robert R. Marges Prescilda D. Igtiben	
2 Assist the sesion Assisulturist in	sampling.	Nana	CO minutos	Debert D. Merree	
2. Assist the assign Agriculturist in the barangay for the collection of soil sample for testing and analysis.		None	60 minutes	Robert R. Marges Dan Kevin P. Mojica Paul John C. Rodrin	
	2.2 Analyze the soil sample, draft the fertilizer recommendation, and notify the client on the availability of the result.		75 minutes	Jessica-An M. Morales Desierin I. Rodrin May Ann C. Villa	
3. Receive the result of soil analysis.		None	5 minutes	Robert R. Marges Dan Kevin P. Mojica Paul John C. Rodrin Jessica-An M. Morales Desierin I. Rodrin May Ann C. Villa	
	Fill-out Client Satisfac	0			
	TOTAL	None	145 minutes		

NOTE: May take up days depending on the dryness of the soil sample.





9. ISSUANCE OF SEEDLINGS

The seedlings were used for tree planting activities and can provide cooling as shade trees and habitat to various species.

OFFICE OR DIVISION	City Agriculture Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Businesses			
WHO MAY AVAIL THE SERVICE	All farmers, homeowners, associations, educational institutions, government organizations and non-government			
	organizations in the City of Imus.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Request Letter		Client		
Duly Accomplished Client Form		City Agriculture Service	es Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements.	1. Assess the requirements.	None	2 minutes	Robert R. Marges
				Desierin R. Alcantara
				Prescilda D. Igtiben
				Janette Paula E. Ortiz
2. Undergo interview with the	2.1 Interview the client.	None	5 minutes	Robert R. Marges
assigned Agricultural Technologist.				Desierin R. Alcantara
	2.2 Approve and issue the release slip.			Paul John C. Rodrin
3. Submit the release slip and	3. Receive the release slip and issue the	None	15 minutes	Christoper L. Sayurin
receive the seedlings.	seedlings.			Sernan S. Lozada
				Cristina T. Tanjay
				Roy M. Araojo
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	22 minutes	





10. PROVIDE FARM EQUIPMENT SERVICES (TRACTOR AND THRESHER)

Provision of equipment for land preparation of Rice Production and communal garden as per request of the farmers and other clients in City of Imus.

OFFICE OR DIVISION	City Agriculture Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All farmers in the City of Imus.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E
Application Form		City Agriculture Service	es Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished form.	1. Assess the application form and check the availability of tractor or thresher.	None	5 minutes	Robert R. Marges Jessica-An M. Morales Prescilda D. Igtiben
2. Undergo interview and receive the approved application form.	2.1 Interview the client.2.2 Approval of the request.	None	5 minutes 2 minutes	Robert R. Marges Desierin R. Alcantara
3. Present the approved application form to tractor operator,	3. Receive the approved form and record the schedule of the use of equipment.	None	2 minutes	Christopher L. Sayurin Roy M. Araojo Sernan S. Lozada
	Fill-out Client Satisfac		44 minutes	
	TOTAL	None	14 minutes	





11. REGISTRATION OF AGRICULTURAL MACHINERIES AND FARM EQUIPMENTS (RA 10601: AFMECH LAW)

All owners of agricultural and fisheries machinery and equipment must register these with the agriculture office of the city.

OFFICE OR DIVISION	City Agriculture Services Office		-	
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C	- Government to Citizen		
WHO MAY AVAIL THE SERVICE	All owners of Agricultural machineries and	farmers association		
CHECKLIST C	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
Certificate of Location/Address		Residence Barangay		
Duly Accomplished prescribed Regis		City Agriculture Services C	Office	
Any evidence of acquisition/ownersh		Owner/Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish all the requirements.	1. Receive and assess all the requirements.	None	5 minutes	Robert R. Marges Jessica-An M. Morales Dan Kevin P. Mojica
2. Prepare for inspection of farm machineries.	2. Schedule for inspection.	None	20 minutes	Jessica-An M. Morales Dan Kevin P. Mojica Paul John C. Rodrin Desierin R. Alcantara
3. Secure inspection certificate.	3. Issue inspection certificate.		2 minutes	Jessica-An M. Morales Dan Kevin P. Mojica Paul John C. Rodrin Desierin R. Alcantara
4. Proceed for payment*	4. Issuance of Official Receipt (Treasurers Office)	P100.00: lower than 2 HP P200.00: 2HP to 14 HP P300.00: above 14 HP	5 minutes	City Treasurer's Office
5. Secure Official Receipt.	5. Release Registration Sticker.		2 minutes	Robert R. Marges Prescilda D. Igtiben Jessica-An M. Morales
		faction Rating Form	1	
	TOTAL	None	34 minutes	

NOTE: Approved City Ordinance No. 04-167 Series of 2021 dated June 7, 2021.





12. ACCESS IN FARMERS' INFORMATION TECHNOLOGY SERVICES (FITS) CENTER

Serves as a One-Stop-Information-Shop (OSIS) service facility accessible to many farmers, Entrepreneurs and other clients in City of Imus, Cavite. It provides fast access to information and Technologies in forms appropriate to the client's needs.

OFFICE OR DIVISION	City Agriculture Services Office				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government, G2C – Government	G2G – Government to Government, G2C – Government to Citizen, G2B - Government to Businesses			
WHO MAY AVAIL THE	All residents in City of Imus, farmers, educationa	All residents in City of Imus, farmers, educational institutions and homeowner's associations.			
SERVICE					
CHECKLI	ST OF REQUIREMENTS		WHERE TO SECUR	RE	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. The farmer's and other	1.1 Interview the client on what assistance they	None	5 minutes	Robert R. Marges	
clientele must directly proceed to	need.			Prescilda D. Igtiben	
the FITS Center.				Dan Kevin P. Mojica	
				Jessica-An M. Morales	
	4.0. Occurring of Information Education and	Nama		Des s silds D. Latik au	
	1.2 Securing of Information, Education and	None	10 minutes	Prescilda D. Igtiben	
	Communication (IEC) materials (pamphlets, hand-outs, etc.) that could answer to the			Jessica-An M. Morales	
	clienteles need.				
	chemeles need.				
	1.3 Securing other information/technologies on	None	20 minutes	Prescilda D. Igitben	
	agricultural related thru internet connections.		20 1111000	Dan Kevin P. Mojica	
	1.4 Video Viewing on Agri-Related.				
		None	20 minutes	Prescilda D. Igtiben	
				Jessica-An M. Morales	
2. Receive IEC Materials	2. Record IEC Materials distributed.	None	3 minutes	Prescilda D. Igtiben	
needed.			5 111110165	Jessica-An M. Morales	
	Fill-out Client Satisfact				
	TOTAL	None	58 minutes		





CITY AGRICULTURE SERVICES OFFICE INTERNAL SERVICES







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1. PRICE MONITORING ON BASIC AGRICULTURAL COMMODITY IN PUBLIC MARKET

Conduct price monitoring of prime commodities in the different market in whole City of Imus as part of the mandate of Local Price Coordinating Council of the City Government.

· · · · · · · · · · · · · · · · · · ·				
OFFICE OR DIVISION	CITY AGRICULTURE SERVICES OFFICE			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizen, G2B - Government to Businesses			
WHO MAY AVAIL THE	All residents/consumers in the City of Imus, Cavite.			
SERVICE				
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECUR	RE
None				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1. Conduct price monitoring of basic commodities (Rice, Vegetables, Meat and Fishery and other aquamarine products, egg, sugar, coffee, etc., at City of Imus Public Market and other markets in the City of Imus.	None	60 minutes	Prescilda D. Igitben Desierin I. Rodrin Dan Kevin P. Mojica May Ann C. Villa
	2. Final recording of prices being monitored using the prescribed form used in the prices monitoring,	None	10 minutes	Prescilda D. Igitben Desierin I. Rodrin Dan Kevin P. Mojica May Ann C. Villa
	TOTAL		70 minutes	-







OFFICE ON POPULATION DEVELOPMENT EXTERNAL SERVICES







www.cityofimus.gov.ph

1. SCHEDULING OF PRE-MARRIAGE ORIENTATION AND COUNSELING

All couples applying for Marriage License is required to attend the Pre Marriage-Orientation (PopDev) and Counseling (CSWDO) as mandated by the Law.

			, 6(, ,	
OFFICE OR DIVISION	Office on Population Development				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	Would-be couples applying for marriage licen	se who have completed	the requirements at CC	R Office	
CHECKLIST OF REQUIREMENTS WHERE TO SECURE					
Personal Appearance in Scheduling		Office on Population D	evelopment		
For New Applicant					
Completion Stub and Official Receipt	t	City Civil Registrar and	Treasurer's Office		
Personal Appearance of couples		Office on Population D	evelopment		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit complete Marriage Stub	1. Verify requirements	None	3 minutes	Jhedielle Enrico Figueroa;	
Checklist from City Civil Registrar's				Mary Elizabeth U. Cruz;	
Office				Susan E. Villansana	
2. Fill out Contact Tracing Form,	2. Assist Client in filling out form with	None	25 minutes	Roda S. Miranda	
Logbook / Information Sheet and	simultaneous interview			Mary Elizabeth U. Cruz;	
Registration Book				Susan E. Villansana	
				Jhedielle Enrico S.	
				Figueroa	
3. Scan QR / Fill out Marriage	3. Instruct and guide the client with adequate	None	15 minutes	Jhedielle Enrico Figueroa;	
Expectations form via Google	privacy			Mary Elizabeth U. Cruz;	
Forms				Susan E. Villansana	
4. Receive PMOC Schedule Stub	4. Issue Personal Information Sheet with	None	3 minutes	Jhedielle Enrico Figueroa;	
	time and date of PMOC seminar			Mary Elizabeth U. Cruz;	
				Susan E. Villansana	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	46 minutes		





2. PRE-MARRIAGE ORIENTATION SEMINAR AND ISSUANCE OF CERTIFICATE OF COMPLIANCE

In accordance with Section 15 of RA 10354 and Article 16 of the New Family Code, all would-be couples are required to undergo information and counseling on responsible parenthood and family planning for the issuance of their marriage license from the City Civil Registrar Office after ten (10) days publication period.

publication period.					
OFFICE OR DIVISION	Office on Population Development				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	Would-be couples applying for marriage licen	Would-be couples applying for marriage license			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Personal Appearance of would-be couples, Personal Information Sheet and Marriage Expectations Form Office on Population Development					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Register on the attendance	1. Guide and secure the signatures of the	None	3 minutes	Mary Elizabeth U. Cruz	
logbook.	clients.			Susan E. Villansana	
2. Attend the Pre-Marriage	2. Conduct and facilitate seminar about	None	4 hours	Maria Theresa C. Sañez	
Orientation and Counseling on the	Marriage, Marriage and Relationships,			Jhedielle Figueroa	
scheduled date and time	Legalities and Rights, Family Planning,			Susan E. Villansana	
	Responsible Parenthood, Gender and			Pilar Laurente	
	Development and STIs, HIV and AIDS				
3. Distribution of the Certificate of	3. Issuance of Certificate of Compliance after	None	10 minutes	Jhedielle Enrico Figueroa	
compliance.	the seminar.			Mary Elizabeth U. Cruz	
				Susan E. Villansana	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	4 hours, 13 minutes		





3. SCHEDULING OF POPDEV PROGRAMS (SEMINARS)

Office on Population Development conducts seminars/symposium on Adolescent Health and Youth Development (Prevention of Teenage Pregnancy), Responsible Parenthood, Family Planning and Reproductive Health, Gender and Development.

OFFICE OR DIVISION	Office on Population Development				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	Adolescents aged 10-17, Day Care Parents, 4Ps Beneficiaries, Women of Reproductive Age, different organizations and				
	associations				
CHECKLIST OF REQUIREMENTS	NTS WHERE TO SECURE				
Letter of Request	Letter of Request				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Letter Request	1.1 Receive Letter Request	None	20 minutes	Maria Theresa C. Sañez	
				Jhedielle Enrico Figueroa;	
	1.2 Confirmation of date, time, and place of	None		Susan E. Villansana	
	seminar				
	Fill-out Client Satisfaction Rating Form				
	TOTAL	None	20 minutes		







CITY OF IMUS TRAFFIC MANAGEMENT UNIT EXTERNAL SERVICES







www.cityofimus.gov.ph

1. REDEMPTION OF DRIVER'S LICENSE OR VEHICLE PLATE

The process involves verification of the Ordinance Violation Receipt (OVR) issued by the apprehending traffic enforcer and timely clearing of traffic violation and penalty.

OFFICE OR DIVISION	City of Imus Traffic Management Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizens; G2B – Gove			
WHO MAY AVAIL THE SERVICE	All traffic violators who have been issued the	e OVR for specific viola		
	OF REQUIREMENTS		WHERE TO SECU	URE
Green Copy of the OVR		Issued by the Apprehe		
Order of Payment (OP)		Issued by the CITMU I		
Official Receipt of payment		City Treasurer's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Present the green copy of the OVR to the CITMU releasing officer;	1.1 Releasing officer verifies if the original copy of the OVR and the driver's license/other relevant documents are already transmitted by the issuing/apprehending officer/unit; assess the applicable fee/penalty based on the indicated violation;	None	3 minutes	Ronaldo V. Castro Edward V. Ilano Janice D. Reyes Armando L. Frani
1.2 Attend the voluntary Road Safety Awareness Seminar1.3 Receive the Order of Payment (OP)	Seminar and issue the Certificate of Attendance upon completion		*15 minutes (Voluntary)	
2. Pay the necessary fees.	2. CTO Staff receives the payment and issues an Official Receipt based on the presented Order of Payment (OP)	Based on assessment	4 minutes	CTO Staff
3. Present the Official Receipt to the CITMU Releasing Group	3. Releasing officer records the details of the OR and clears the client from traffic violation and penalty	None	1 minute	Ronaldo V. Castro Edward V. Ilano Janice D. Reyes Armando L. Frani

CITIZEN'S CHARTER



	Per violation total	8 minutes	
TOTAL	indicated on the		
	OVR green copy		

2. REDEMPTION OF IMPOUNDED VEHICLE

The process involves verification of the Ordinance Violation Receipt (OVR) issued by the apprehending officer/traffic police officer and timely release of confiscated vehicle key/s. Client is then referred to the vehicle impound facility for redemption of confiscated vehicle/s.

OFFICE OR DIVISION	City of Imus Traffic Management Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizens; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All traffic violators who have been issued the Ordinance Violation Receipt (OVR); has no driver's license and/or does not			r's license and/or does not
	carry with him/her the vehicles registration pa	ipers		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE
Green Copy of the OVR		Issued by the Apprehe	nding Officer	
Order of Payment (OP)	Order of Payment (OP)		Releasing Group	
Official Receipt of payment		City Treasurer's Office		
Impounding Release Receipt		Issued by the CITMU F	Releasing Group	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Present the green copy of the OVR to the CITMU releasing	5	None	3 minutes	Ronaldo V. Castro Edward V. Ilano
officer;	license/other relevant documents are already transmitted by the issuing/apprehending officer/unit;			Janice D. Reyes Armando L. Frani
1.2 Receive the Order of Payment (OP)	1.2 Assess the applicable fee/penalty based on the indicated violation			





2. Pay the necessary fees.	2. CTO Staff receives the payment and	Applicable	4 minutes	CTO Staff
	issues an Official Receipt based on the	fee/penalty will		
	presented Order of Payment (OP)	depend on the nature		
		of the traffic		
		violation/s as		
		assessed by the		
		CITMU releasing		
		group		
3. Present the Official Receipt (OR)	3.1 Record the OR details and issue the	None	1 minute	Ronaldo V. Castro
to the CITMU Releasing Group	Impounding Release Receipt;			Edward V. Ilano
				Janice D. Reyes
	3.2 Prepare the Order of Release based on			Armando L. Frani
	the documents for approval by the CITMU			
	Head;			
	3.3 Direct guide the client on how to claim			
	the vehicle at the city impounding area			
4.1 Proceed to the city impounding	4. Release impounded vehicle.	None	30 minutes	Officer-in-Charge at the
area and show the Order of				Impounding Area
Release.				
4.2 Retrieve the vehicle				
	TOTAL	Total amount of	38 minutes	
		fee/penalty as		
		assessed by the		
		CITMU releasing		
		group		







3. ADJUDICATION OF COMPLAINTS AGAINST TRAFFIC ENFORCER

The City of Imus Traffic Management Office practices a fair and just implementation of traffic laws and/or city ordinances. All forwarded complaints are given utmost and careful attention by the CITMU Adjudication Board.

	TOTAL	None	20 minutes			
Service Procedures						
covering OVR following Frontline	the complainant to redeem his/her violation					
3. Redeem his/her violation per	3. Upon resolution of the problem, request	None	5 minutes	Janice D. Reyes		
	problem			Janice D. Reyes		
	complainant for possible resolution of the			Ariel A. Santera		
officer in front of the Board	statement and a dialogue with the			Jr. (Ret)		
2. Confront the apprehending	2. Summon the apprehending officer for his	None	10 minutes	Col. Rolando N. Fernandez		
	incident			- 5		
in front of the mediation officer	complainant has narrated his/her side of the	_		Janice D. Reyes		
1. Make a written complaint officer	1. Merit of the complaint is assessed after the	None	5 minutes	Ariel A. Santera		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Green copy of the Ordinance Violatio	•	Issued by the apprehe				
Written complaint prepared by the co	omplainant	Prepared by the compl	ainant			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
	apprehending traffic enforcer.			2		
WHO MAY AVAIL THE SERVICE	Any and all traffic violators who believe that they were unfairly and/or unjustly charged with a traffic violation by the					
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Gover	62C – Government to Citizens, G2B – Government to Business				
CLASSIFICATION	Simple					
OFFICE OR DIVISION	y of Imus Traffic Management Unit					

NOTE: In meritorious cases, file a formal complaint with the Office of the City Mayor or the City Administrative Office. This will take a day at the Office of the City Mayor.





4. MOTORCYCLE ESCORTS AND/OR TRAFFIC MANPOWER ASSISTANCE

The CITMU provides these allied services to VIPS, guests of the city government, motorcades, parades, funeral processions, weddings and other special events.

OFFICE OR DIVISION	City of Imus Traffic Management Unit	ity of Imus Traffic Management Unit			
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	G2G – Government to Government, G2C – Government to Citizens, G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All	All			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Written request containing the nature	e of the event and other relevant details	Prepared by the reques	sting party		
Permit issued by the City Administra	tor's Office	Issued by the City Adm	ninistrator		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1 Submit written request to the CITMU Admin Office	1.1 Assess the feasibility of the request against the availability of the motorcycle escort/s; issues Traffic Assistance Request		5 minutes	Maricel D. Ochoa	
3. Submit written request to the CITMU Admin Office	Slip 2. Endorsed to the City Administrator's Office. Issues Permit after proponent paid the applicable charge/s	Defined by the City Administrator's Office	8 minutes	City Administrator's Office	
3. Submit Permit to CITMU Admin Office	3. Process request and assign motorcycle escorts as applicable	None	5 minutes	Maricel D. Ochoa	
	TOTAL	Based on assessment	18 minutes		





5. TOWING SERVICE/S

The CITMU provides towing services for vehicles involved in traffic crash/accident as per request from private citizen/resident of Imus City and/or other government offices.

OFFICE OR DIVISION	City of Imus Traffic Management Unit				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	overnment to Citizens			
WHO MAY AVAIL THE SERVICE	Anyone whose vehicle is defective or cannot i	run on its own power.			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Written request from concerned part	У	Prepared by the reque	sting party		
Towing Permit		Issued at the CITMU Admin Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID PROCESSING TIME PERSON RESPONSIBL			
1. Make a written request in person	1. Fill-out the Towing Services Form	None	3 minutes	Ronald S. Enardecido	
to CITMU Admin Office	complete with the required details				
2. Make a written request in person	2. Reviews the request and endorses	None	5 minutes	CG Commo Joey Damaso	
to CITMU Admin Office	appropriate action to the Towing Group			D. Velarde (Ret)	
3. Guide the Towing Group to the	3. Towing Group tows the vehicle to the	None	3 hours	Towing Group	
location of the vehicle	specified destination				
	TOTAL	Based on	3 hours, 8 minutes		
		assessment			







6. ISSUANCE OF TRAFFIC CLEARANCE

The CITMU provides Traffic Clearance to private citizen/resident and business establishments as a prerequisite in acquiring Excavation Permit from the City Engineering Office. This is to avoid any untoward traffic incident and to preempt traffic congestion in the area of excavation/activity.

OFFICE OR DIVISION	City of Imus Traffic Management Unit	y of Imus Traffic Management Unit			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Gover	G2C – Government to Citizens, G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Any business establishments and private citizens applying for an excavation permit.				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Written request containing the national	ure of the activity/project and other relevant	Prepared by the reques	sting party		
details					
Photocopy of endorsement from con	npany/contractor (if applicable)	Prepared by the reques	sting party		
Traffic Management Plan (if applicat	Management Plan (if applicable) Prepared by the requesting party				
Barangay clearance		Issued by the barangay from where the activity/project will take place			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit written request and/or	1. Checks the requirements submitted by the	None	3 minutes	Mariel D. Ochoa	
endorsement to the CITMU Admin	requesting party				
Office					
	2. Reviews the request and endorses	None	10 minutes	Col. Rolando N. Fernandez	
endorsement to the CITMU Admin	appropriate action			(Ret)	
Office					
3. Submit request with the Traffic	3. Discuss the conditions and guidelines	None	5 minutes	Mariel D. Ochoa	
Clearance to City Engineering					
Office	requesting party upon issuance				
	TOTAL	None	18 minutes		





CITY OF IMUS SPORTS DEVELOPMENT UNIT EXTERNAL SERVICES







www.cityofimus.gov.ph

1. REQUISITION OF SPORTS MATERIALS/SOLICITATIONS

Granting of request for spo				
OFFICE OR DIVISION	City of Imus Sports Development Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizen			
WHO MAY AVAIL THE SERVICE	Imus residents and organizations			
CHECKL	IST OF REQUIREMENTS		WHERE TO SECURE	
Letter Request addressed to Mayo	Dr	Client		
Photocopy of Requestor's ID		Client		
Barangay/School endorsement		Respective Barangay	/School	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register and submit the request letter to the City Mayor's	1.1 Evaluate the request.	None	1 day	City Mayor's Office
Office.	1.2 Transmit request letter to City Sports Development Unit.	None		
2. Submit the requirements.	2.1 Receive the requirements.	None	2 minutes	Mr. Roberto Pagtakhan
	2.2 Interview client regarding the purpose of their request.	None	5 minutes	Mr. Patrick M. Paulme Unit Head
	2.3 Approval/Disapproval of Request.	None	8 minutes	Mr. Patrick M. Paulme Unit Head
3. If approved, receive Sports Materials/ Solicitation.	3.1 Award Sports Materials/ Solicitation.	None	5 minutes	Mr. Patrick M. Paulme Unit Head
	TOTAL	None	1 day and 20 minutes	





2. USE OF IMUS FITNESS CENTER

The Imus Fitness Center is available to all residents of City of Imus. It is located in Bucandala III, City of Imus, Cavite.

OFFICE OR DIVISION	City of Imus Sports Development Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C -Government to Citizens			
WHO MAY AVAIL THE	All Imus residents			
CHECK	LIST OF REQUIREMENTS		WHERE TO SECUR	E
Photocopy of Voter's ID/ COMEL	EC Certificate / Claim Stub	COMELEC Office - Imu	s	
Barangay Certificate (for non-vot	ers)	Respective Barangay H	Hall	
Duly Filled out the Application Fo	orm	Imus Fitness Center		
1x1 ID Picture		Client		
If minor, you must also submit	:	Client		
Photocopy of Voter's ID/ COMEL	EC Certificate of Parent	COMELEC Office - Imu	JS	
Parental Consent		Client's parents/guardia	ans	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit needed documents.	1.1 Assess the requirements.	None	10 minutes	Mr. Salvador Cambay
	1.2 Provide instructions for use of Gym and ID.			
2. Receive ID and Instructions and use gym.	2.1 Issue Fitness Center ID.	None	5 minutes	Mr. Salvador Cambay
	TOTAL	None	15 minutes	





3. ISSUANCE OF IMUS TRACK OVAL ID

The Imus Track Oval is available to all residents of City of Imus. It is located in Malagasang I-G, City of Imus, Cavite.

OFFICE OR DIVISION	City of Imus Sports Development Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C -Government to Citizens			
WHO MAY AVAIL THE	All Imus residents			
CHECK	LIST OF REQUIREMENTS		WHERE TO SECUR	E
Photocopy of Voter's ID/ COMEL	EC Certificate / Claim Stub	COMELEC Office - Imu	JS	
Barangay Certificate (for non-vot	ers)	Respective Barangay H	Hall	
Duly Filled out the Application Fo	rm	Imus Grandstand and	Frack Oval	
1x1 ID Picture		Client		
If minor, you must also submit		Client		
Photocopy of Voter's ID/ COMEL	EC Certificate of Parent	COMELEC Office - Imu	s	
Parental Consent		Client's parents/guardia	ans	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit needed documents.	1.1 Assess the requirements.	None	10 minutes	Mr. Armando Frani
	1.2 Provide instructions for use of Track Oval and ID.			
2. Receive ID and Instructions and use track oval.	2.1 Issue Grandstand and Track Oval ID.	None	5 minutes	Mr. Armando Frani
	TOTAL	None	15 minutes	





4. RESERVATIONS FOR PUBLIC FACILITY

Reservation to use the Imus Sports Complex and the City of Imus Grandstand & Track Oval (CIGTO) for various recreational, socio-civic, sports, entertainment, and educational purposes.

CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G - Government to Government, G2C	- Government to Citizens, G2B - G	overnment to Businesses	6
WHO MAY AVAIL THE SERVICE	All Imuseños and non-Imuseños			
CHECKLIST O	F REQUIREMENTS	W	HERE TO SECURE	
Request Letter addressed to the City		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLI
1. Submit the request letter at the City Administrator's Office.	1.1 Check for the availability of the Imus Sports Complex or City of Imus Grandstand and Track Oval.	None	5 minutes	Ms. Cecil I. Reyes
	1.2 Assist the client in finalizing the schedule.	None	5 minutes	
	1.3 Assess the requirements and Issue Order of Payment.	None	5 minutes	
2. Pay prescribed fee at City Treasurer's Office.	2.1 Receive payment and issue Official Receipt (OR).	CITY OF IMUS GRANDSTAND AND TRACK OVAL Sports fest (for 6 hours) Commercial/ Private Companies – Php 20,000.00 Other LGU/Gov't Institution – Php 10,000.00 Private Schools / Public Schools Within Imus – Free Outside Imus – Php 8,000.00 Succeeding Hours – Php 1,000.00	10 minutes	City Treasurer's Office
		Fun Run (Min 3 hours) Commercial/ Private Companies Php_10,000.00		

CITIZEN'S CHARTER

Other LGU/Gov't Institution – Php 10,000.00Private Schools / Public SchoolsWithin Imus – Php 5,000.00Outside Imus – Php 10,000.00Residents – Php 5,000.00Non-residents – Php 10,000.00Practice/Training (per hour)Commercial/ Private Companies – Php 1,000.00Other LGU/Gov't Institution – Php 500.00Private Schools / Public SchoolsWithin Imus – Free Outside Imus – Php 50.00 / headResidents – Free Non-residents – Php 50.00/headFootball Tournament (6 hours) Commercial/ Private Companies – Php 20,000.00Other LGU/Gov't Institution – Php 10,000.00Php 10,000.00Outside Imus – Free Non-residents – Php 50.00/headFootball Tournament (6 hours) Commercial/ Private Companies – Php 20,000.00Other LGU/Gov't Institution – Php 10,000.00Php 10,000.00Private Schools / Public SchoolsWithin Imus – Free Outside Imus – Pree Outside Imus – Pree Outside Imus – Pree Outside Imus – Php 15,000.00Residents – Php 10,000.00Non-residents – Php 15,000.00	





		Γ		
		Football Practice – Php 200.00 per head Public Schools within Imus – Free		
		Per bulb – Php 200 per bulb per hour		
		d. Walk-in Residents – Free with Government ID or apply for Grandstand Privileged ID Non-residents – Php 25.00 / head		
		IMUS SPORTS COMPLEX (per hour rates) With Lights, and Exhaust Fan – Php 2,000.00 With Aircon and VIP Rooms – Php 10,000.00		
3. Present Official Receipt (OR).	3.1 Input information on the Templated Form.	None	3 minutes	Ms. Cecil I. Reyes
	3.2 Signature of the City Administrator.	None	2 minutes	Mr. Hertito V. Monzon City Administrator
4. Claim permit.	4.1 Release permit	None	2 minutes	Ms. Cecil I. Reyes
5. Provide copy of Permit and Official Receipt to the City of Imus Sports Development Unit.	5.1 Receive the permit and schedule the event on the Calendar of Activities of either the Imus Sports Complex or the City of Imus Grandstand & Track Oval (CIGTO).	None	3 minutes	Ms. Sofia Louraine Lara
	TOTAL	Based on the assessment	35 minutes	





PUBLIC EMPLOYMENT SERVICE OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ISSUANCE OF MAYOR'S PERMIT TO WORK/OCCUPATIONAL CARD

Any individuals who are newly hired by employers and already employed within the territorial jurisdiction of the City of Imus are required to secure Mayor's Permit to Work/Occupational Card which they must submit to their respective employers as part of their requirements.

•				
OFFICE OR DIVISION	Public Employment Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizen			
WHO MAY AVAIL THE SERVICE	All employed citizens in the City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	JRE
Duly accomplished application slip		Public Employment S	Service Office	
Health Card		Imus Health Center		
NBI or Police Clearance		National Bureau of Ir	vestigation (NBI) or Polic	ce Station
Community Tax Certificate (Cedula)		City Treasurer's Offic	ce	
Referral/Recommendation Letter (If not Ir	nus Resident)	City or Municipality w	here the client resides	
Barangay Certification and Oath of Under	taking (additional requirements for 1st time Job	From respective Bara	angay	
Seekers Act of 2019 - R.A 11261)			0 /	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the Public Assistance	1.1. Assist and assess the requirements.	None	1 minute	Manuel L. Sañez
Information Desk Officer for inquiry and	1.2. Issue ng National Skills Registration			
submit the required documents	Program (NSRP) form 1.			
2. Receive the Order of Payment	2. Release Order of Payment	None	1 minute	Manuel L. Sañez
3. Pay the required fees.	3. Receive the payment and issue the Official	Php 80.00	5 minutes	City Treasurer's Office
	Receipt (O.R) and Documentary Stamp Tax			-
4. Submit the Official Receipt (OR).	4. Process the request	None	4 minutes	Claire Genova,
Register in the logbook and Fill-out the				Jopearl Jill Manuel
NSRP Form 1.				
5. Receive the document	5. Release the document	None	1 minute	Manuel L. Sañez
	Fill-out Client Satisfaction	Rating Form		
	TOTAL	Php 80.00	12 minutes	







2. ISSUANCE OF MAYOR'S CLEARANCE

Document issued to individuals who need for local employment (PNP, BFP, AFP, Coast Guard), On-the-Job Training Student, Firearms License, and other legal purposes. They must be residing in the City of Imus.

	be residing in the City of Imus.			
OFFICE OR DIVISION	Public Employment Services Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C - Government to Citizens; G2G - Govern	ment to Government		
WHO MAY AVAIL THE SERVICE	All residents of City of Imus			
CHECKLIST OF	REQUIREMENTS		WHERE TO SECUR	RE
Duly accomplished application slip		Public Employment Se	ervice Office	
Prosecutor Clearance		Office of the City Pros		
Regional Trial Court (MTC) Clearance		<u> </u>	Office of the Clerk of Cou	
Municipal Trial Court (MTC) Clearance		Municipal Trial Court,	Office of the Clerk of Cou	urt
National Bureau of Investigation (NBI) Cleara	ance	National Bureau of Inv	vestigation (NBI)	
Barangay Clearance		From respective barar	ngay	
Barangay Certification and Oath of Undertaki		From respective barar	ngay	
(additional requirements for 1st time Job See				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the Public Assistance	1.1. Assist and assess the requirements.	None	1 minute	Manuel L. Sañez
Information Desk Officer for inquiry and				
submit the required requirement	1.2. Issue ng National Skills Registration Program (NSRP) form 1.			
2. Receive the Order of Payment	2. Release the Order of Payment.	None	1 minute	Manuel L. Sañez
3. Pay the required fee	3. Receive the payment and issue the Official Receipt (O.R) and Documentary Stamp Tax	Php 80.00	5 minutes	City Treasurer's Office
4. Submit the Official Receipt (OR). Register in the logbook and fill out the	4.1 Process the Mayor's Clearance	None	4 minutes	Claire Genova, Jopearl Jill Manuel
NSRP Form 1.	4.2 Signature of Local Chief Executive (LCE) or Authorized Signatory	None	5 days	Mayor Alex L. Advincula / Authorized Signatory
5. Submit the NSRP Form 1., Register in the logbook and receive the document.	5. Release the document	None	1 minute	Manuel L. Sañez
	•	•		•
	Fill-out Client Satisfaction F	Rating Form		



CITIZEN'S CHARTER

3. ISSUANCE OF APPLICANT REFERRAL LETTER FOR EMPLOYMENT

Applicants undergo a pre-qualification process which consists of job matching and counseling, among others prior to the issuance of a job referral/ recommendation letter addressed to a prospective employer/s.

recommendation letter addressed to a	i prospective employer/s.				
OFFICE OR DIVISION	Public Employment Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizens; G2G - Government to Government				
WHO MAY AVAIL THE SERVICE	All residents of City of Imus				
CHECKLIST OI	FREQUIREMENTS	WHERE TO SECURE			
Accomplish Request Slip		Public Employment S	Public Employment Service Office		
National Skills Registration Program (NSRP)	Form 1	Public Employment S	Public Employment Service Office		
Resume		From Applicant			
Other requirements (Barangay Clearance, NE	BI, Police Clearance, Birth Certificate,	From Applicant			
TOR/Diploma - if company requires)					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Approach the Public Assistance Information Desk Officer for inquiry	1.1 Assess the requirements	None	1 minute	Manuel L. Sañez	
	1.2 Issue PESO Employment Information System (PEIS) form and Request Slip	None	1 minute	Manuel L. Sañez	
2. Accomplish request slip and PESO Employment Information System (PEIS) - NSRP form 1	2. Check the applicant's requirements and inform the available job vacancies that match him/her	None	6 minutes	Regine Velasco	
3. Register in logbook.	3. Prepare the Referral Letter	None	2 minutes	Claire Genova,	
4. Receive the Referral Letter and proceed to the company to process the job application.	4. Issue the applicant's referral letter	None	1 minute	Manuel L. Sañez	
	Fill-out Client Satisfaction Ra	ting Form			
	TOTAL	None	11 minutes		



4. ISSUANCE OF REFERRAL LETTER TO OTHER MUNICIPALITIES AND CITIES

Issued to the applicant as their requirements for processing Mayor's Permit to Work or Occupational Permit to other Municipalities or Cities

OFFICE OR DIVISION	Public Employment Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizens			
WHO MAY AVAIL THE SERVICE	All residents of the City of Imus			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE		
Accomplish Request Slip		Public Employment S	Service Office	
Barangay Clearance		From Respective Bar	rangay	
Government Issued ID		From various govern	ment agencies	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the Public Assistance Information Desk Officer for inquiry	1.1 Assess the requirements.	None	1 minute	Manuel L. Sañez
	1.2 Issue the Request Slip and PESO Employment Information System (PEIS) form and Request Slip	None		
2. Register in the logbook and fill out the PESO Employment Information System (PEIS)-NSRP form 1	2. Prepare the Referral Letter	None	5 minutes	Claire Genova, Raquel Camacho
3. Receive the Referral Letter	3. Issue the Referral Letter	None	1 minute	Manuel L. Sañez
	Fill-out Client Satisfaction Ra	ting Form	1	1
	TOTAL	None	7 minutes	





5. ISSUANCE OF COMPANY ACCREDITATION

To secure the legality of the papers submitted by the company before they are allowed to join in job matching activities, posting job vacancies and

resume browsing.						
OFFICE OR DIVISION	Public Employment Services Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2B - Government to Businesses	G2B - Government to Businesses				
WHO MAY AVAIL THE SERVICI	All companies seeking to join the Imus PESO job	matching activities and so	rting of applicants resume			
	LIST OF REQUIREMENTS	WHERE TO SECURE				
Main Requirements						
Letter of Intent		Company	Company			
Company Profile			Company			
Photocopy of the Latest Business	Permit	LGU (BPLO)				
Photocopy of BIR Certificate		Bureau of Internal Reve				
	DTI Certificate / Cooperative Development Authority		e Commission/ Department	of Trade and Industry,		
(CDA) Registration		Cooperative Development Authority				
Photocopy of Phil.Job.Net Regist		Phil.Job-Net Website (PhilJobNet.gov.ph)				
	ors Accreditation Board (PCAB) License	Philippine Contractors Accreditation Board				
	cal Company/Manpower Agency					
	DOLE Certification		Department of Labor and Employment			
 Certificate of No Pending 						
 Registry of Establishment 						
	Placement Agency (PRPA)					
- D.O 174 (except Construct						
	h total number of manpower requirement	Company				
Additional Requirement for Overseas Company						
Copy of POEA License		Philippine Overseas Employment Administration				
Approved Manpower-Job Order From POEA		Philippine Overseas Employment Administration				
DMW Clearance of No Pending Case		Department of Migrant Workers				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Approach the Public	1. Assists and refer the company representative to	None	1 minute	Manuel L. Sañez		
Assistance Information Desk	the assigned focal person					
Officer for inquiry						





	TOTAL None 2 days and 2 minutes				
Fill-out Client Satisfaction Rating Form					
3. Receive the Certificate of Accreditation	3. Release the Certificate of Accreditation	None	1 minute	Regine C. Velasco	
	2.4 Message the Company for the availability of the Certificate of Accreditation.	None		Regine C. Velasco	
	2.3 Signature of City PESO Manager.	None		Clarita T. Casing	
the requirements	2.2 Conduct validation to DOLE/DMW (if needed).	None			
2. Proceed to the assigned personnel and present/ submit	2.1 Check the completeness and validate the submitted documents.	None	2 days	Regine C. Velasco	

NOTE: If the office needs a further evaluation/assessment, the company/agency will receive their Certificate of Accreditation after 5 days.







6. ISSUANCE OF REFERRAL SLIP FOR ENDORSEMENT TO OWWA ASSISTANCE PROGRAM

All registered members of OWWA can avail of many of their services that range from health care, disability and death benefits, scholarships and financial assistance for education and training, workers assistance and on-site services, and social services and family welfare assistance. A referral slip is issued to OWWA members or their families.

OFFICE OR DIVISION	R DIVISION Public Employment Services Office				
CLASSIFICATION		Simple			
TYPE OF TRANSACTION					
		G2C - Government to Citizens; G2G - Government to Government; G2B – Government to Business All registered members of OWWA and their families resident of the City of Imus			
WHO MAY AVAIL THE SERVIC	KLIST OF REQUIREMENTS				
		OWWA			
Proof of OFW/OWWA Members		POEA			
Overseas Employment Certificat Termination Document	e (OEC)				
		From Applicant			
Passport or Travel Documents	Dicture)	From Applicant			
 2nd page (with Name and Latest Departure and Arr 					
Proof of Relationship to OFW/O		From Applicant	From Applicant		
•				PERSON	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	RESPONSIBLE	
1. Approach the Public	1.1 Assess and verify the requirements.	None	5 minutes	Regine Velasco	
Assistance Information Desk				-	
Officer for inquiry	1.2 Interview the applicant and issue the Case Intake	None			
	Sheet				
2.1 Register in the log book	2.1 Prepare the referral/endorsement slip	None	2 minutes	Regine Velasco	
2.2. Fill out the Case Intake	2.2 Call OWWA representatives for other possible	None	20 minutes	Regine Velasco	
Sheet	assistance (if needed)				
	2.2. Signature of City DESO Managar	None	1 minute	Clarita T. Casing	
	2.3 Signature of City PESO Manager.	None	i minute	Clarita T. Casing	
3. Receive the referral/	3. Issue the referral/endorsement slip and advise the	None	1 minute	Regine Velasco	
endorsement slip and proceed	applicant to proceed to OWWA Office				
to OWWA Office					
	Fill-out Client Satisfaction				
	TOTAL	None	29 minutes		



7. SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS (SPES)

Pursuant to Republic Act No. 7323, as amended by RA 9547 otherwise known as the "Special Program for Employment of Student (SPES)", is an employment-bridging program that aims to provide temporary employment to disadvantaged youth to augment their family's income and help ensure that beneficiaries can pursue their education. SPES enhances the employability of youth, who will eventually come to be the country's future workforce. Along with providing students with experience while earning income, it is also designed to increase employment opportunities for young people in the long term.

OFFICE OR DIVISION	Public Employment Services Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE	Students or out-of-school youth (OSY), Resident of Imus and	at least 15 but no			
CHE	CKLIST OF REQUIREMENTS	WHERE TO SECURE			
SPES Form		PESO Office	PESO Office		
Parent Consent with contact info of g	guardian (for Minor)				
Photocopy of Birth Certificate		Philippine Statis	tics Authority (PSA		
Proof of School Registration (Form 1	38 or certified true copy of Student's Class Card)	School			
Barangay Clearance		From respective			
Barangay Indigency/ CSWD Indigen	cy/ Copy of Latest ITR or Exemption from BIR	From respective	Barangay/ CSWD	/ BIR	
2 pcs of passport-size picture		From Applicant			
For OSY, Out-of-School Youth Certi	fication and Good Moral Character issued by Barangay	From respective barangay			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Approach the Public Assistance Information Desk Officer for inquiry	1. Assist and refer the applicant to the assigned focal person	None	1 minute	Manuel Sañez	
2. Proceed to the assigned personnel and submit the requirements	2.1 Check the qualification of the applicant and the completeness and validity of the documents submitted.	None	3 minutes	Regine Velasco	
	2.2 Issue SPES Form to be accomplished by the applicant.	None	3 minutes		
3. Fill out and submit the accomplished SPES Form and PEIS-NSRP Form 1	3.1 Evaluate the accomplished SPES Form.3.2 Conduct Initial Screening of the applicant.	None	10 minutes	Regine Velasco	
	3.3 Advise the applicant with regards to the schedule of interview, orientation, and signing of contract and deployment Fill-out Client Satisfaction Rating For	m			
	TOTAL	None	17 minutes		



CITY BUILDING OFFICIAL'S OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ISSUANCE OF BUILDING PERMIT FOR CONSTRUCTION OF NEW BUILDINGS AND/OR STRUCTURE

A document issued by the Building Official to an owner/applicant to proceed with the construction, installation, addition, alteration, renovation, conversion, repair, moving, demolition or other work activity of a specific project/building/structure or portions thereof after the accompanying principal plans, specifications and other pertinent documents with the duly notarized application are found satisfactory and substantially conforming with the National Building code of the Philippines (the Code) and its Implementing Rules and Regulations (IRR).

OFFICE OR DIVISION	City Building Official's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G - Government to Government, G2C - Government to Citizens, G2B - Government to Businesses			
WHO MAY AVAIL THE SERVICE	Any person or company who intends to construct a new building/structures in Imus			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE		
Four (4) copies of filled up Unified Applicat	ion Form for Building Permit and FSEC	Window 1 and 3, One Stop Shop for Construction Permits, 2 nd Floor, Imus City Hall		
Filled-up Application Form for Locational C	learance	City Planning and Development Office		
Original Certificate of Title (OCT) / Tran	sfer Certificate of Title (TCT), or Deed of	Registry of Deeds		
Absolute Sale or Lot Locational Plan from	n LRA (if lessee, Contract of Lease), if the			
applicant is not the lot owner, provide eithe	er of the following:			
Deed of Sale or Contract to Sell	-			
Authorization from lot owner				
Proof of relationship to the lot owner				
Four (4) sets of Survey Plans, design plans	s and other documents as follows:	Client		
Architectural Documents				
Civil / Structural Documents				
Electrical Documents				
Mechanical Documents				
Sanitary Documents				
Plumbing Documents				
Electronics Documents				
Geodetic Documents Fire Protection Plan (If applicable)				
Automatic Fire Suppression System				
Wet Stand Pipe				
Dry Stand Pipe				
Kitchen Hood Suppression				
Fire Detection & Alarm System				

CITIZEN'S CHARTER





Three (3) photocopies of Valid Licenses (PRC I.D.) of all involved professionals		Client, professionals	involved in the construct	ion of the building	
Notarized estimated value of the building / structure to be erected as declared by the owner		Client			
Construction Safety and Health Program		Client			
Affidavit of Undertaking		Client			
Soil Test (If applicable)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submission of Application Forms and Documentary Requirements	1.1 Receive and assess the completeness and correctness of the documents.	None	30 minutes	Window 1	
	1.2 Processing of application in the Back Room and Inspection.	None	3.5 days	OSCP – Back Room	
2. Receipt of Order of Payment or Notice of Disapproval	2. Release Oder of Payment or Notice of Disapproval	None	30 minutes (stop time)	Window 1	
3. Payment of Fees and Charges	3. Receive the payment and issue the O.R.	Refer to the 2005 Revised IRR of the National Building Code (P.D. 1096)	5 minutes	Window 2	
4. Claiming of Building Permit	4. Preparation and release of Building Permit		25 minutes	Window 3	
	TOTAL	Based on assessment	5 days		

NOTE: This is in line with the JMC 2018 – 001 and to be processed in the One Stop Shop for Construction Permits. For construction with area of 1500 sq.m. and above, the processing time is 15 days.







2. ISSUANCE OF BUILDING PERMIT FOR THE EXTENSION, ADDITION, RENOVATION, FENCE AND ALTERATION/AMENDATORY OF PLANS

A document issued by the Building Official to an owner/applicant to proceed with the construction, installation, addition, alteration, renovation, conversion, repair, moving, demolition or other work activity of a specific project/building/structure or portions thereof after the accompanying principal plans, specifications and other pertinent documents with the duly notarized application are found satisfactory and substantially conforming with the National Building code of the Philippines (the Code) and its Implementing Rules and Regulations (IRR).

OFFICE OR DIVISION	City Building Official's Office			
CLASSIFICATION	Complex	Complex		
TYPE OF TRANSACTION	G2G (Government to Government), G2C (G	overnment to Citizens), G2B (Government to Businesses)		
WHO MAY AVAIL THE SERVICE	All residents, non-residents and companies	in Imus who already applied for a Building Permit		
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE		
Four (4) copies of filled up Unified Applicat	ion Form for Building Permit and FSEC	Window 1 and 3, One Stop Shop for Construction Permits, 2 nd Floor, Imus City Hall		
Filled-up Application Form for Locational C	Clearance	City Planning and Development Office		
Original Certificate of Title (OCT) / Tran	sfer Certificate of Title (TCT), or Deed of	Registry of Deeds		
•	n LRA (if lessee, Contract of Lease), if the			
applicant is not the lot owner, provide eithe	er of the following:			
Deed of Sale or Contract to Sell	-			
Authorization from lot owner				
Proof of relationship to the lot owner				
Four (4) sets of Survey Plans, design plan	s and other documents as follows:	Client		
Architectural Documents				
Civil / Structural Documents				
Electrical Documents				
Mechanical Documents Sanitary Documents				
Plumbing Documents				
Electronics Documents				
Geodetic Documents				
Fire Protection Plan (If applicable)				
Automatic Fire Suppression System				
Wet Stand Pipe				
Dry Stand Pipe				
Kitchen Hood Suppression				
Fire Detection & Alarm System				

CITIZEN'S CHARTER



Three (3) photocopies of Valid Licenses (hree (3) photocopies of Valid Licenses (PRC I.D.) of all involved professionals		Client, professionals involved in the construction of the building		
Notarized estimated value of the building	Notarized estimated value of the building / structure to be erected as declared by the		Client		
owner					
Construction Safety and Health Program		Client			
Affidavit of Undertaking		Client			
Soil Test (If applicable)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submission of Application Forms and Documentary Requirements	1.1 Receive and assess the completeness and correctness of the documents.1.2 Processing of application in the Back	None	30 minutes	Window 1	
	Room and Inspection.	None	3.5 days	OSCP – Back Room	
2. Receipt of Order of Payment or Notice of Disapproval	2. Release Oder of Payment or Notice of Disapproval	None	30 minutes (stop time)	Window 1	
3. Payment of Fees and Charges	3. Receive the payment and issue the O.R.	Refer to the 2005 Revised IRR of the National Building Code (P.D. 1096)	5 minutes	Window 2	
4. Claiming of Building Permit	4. Preparation and release of Building Permit		25 minutes	Window 3	
	TOTAL	Based on	5 days		
		assessment	-		

NOTE: This is in line with the JMC 2018 – 001 and to be processed in the One Stop Shop for Construction Permits. For construction with area of 1500 sq.m. and above, the processing time is 15 days.





3. ISSUANCE OF OTHER BUILDING PERMITS FOR RENEWAL, DEMOLITION, SIGNAGE AND EXCAVATION OR GROUND PREPARATION PERMIT

A document issued by the Building Official to an owner/applicant to proceed with the construction, installation, addition, alteration, renovation, conversion, repair, moving, demolition or other work activity of a specific project/building/structure or portions thereof after the accompanying principal plans, specifications and other pertinent documents with the duly notarized application are found satisfactory and substantially conforming with the National Building code of the Philippines (the Code) and its Implementing Rules and Regulations (IRR).

(the code) and its implementing rules and			
OFFICE OR DIVISION	City Building Official's Office		
CLASSIFICATION	Simple		
TYPE OF TRANSACTION	G2G (Government to Government), G2C (Government to Citizens), G2B (Government to Businesses)		
WHO MAY AVAIL THE SERVICE	Any person or company who intends to demolish a structure, excavate, install signage and renew the Building		
	Imus		
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE	
For Renewal Permit			
Application form signed by the applicant	t, signed and sealed by professional and	Office of the Building Official, 2 nd Floor, Imus City Hall	
properly filled-out			
Approved Building Permit and Building Pla	ns	Office of the Building Official, 2 nd Floor, Imus City Hall	
For Demolition Permit			
Demolition Permit Form		Office of the Building Official, 2 nd Floor, Imus City Hall	
Sketch plan of area to be demolished or pi	cture of building to be demolished	Client	
	roperty, if the applicant is not the lot owner,	Registry of Deeds	
provide either of the following:			
Deed of Sale or Contract to Sell			
Authorization from lot owner			
Proof of relationship to the lot owner			
Barangay Endorsement		Respective Barangay	
For Sign Permit			
Sign Permit Form		Office of the Building Official, 2 nd Floor, Imus City Hall	
Electrical Permit Form whenever there is a		Office of the Building Official	
Three (3) sets of plans and design of signa	age duly signed by a licensed professional	Client	
Location or vicinity plan		Client	
Lot documents		Client	
For Excavation or Ground Preparation F			
Accomplished Excavation Permit form sign	, ,	Office of the Building Official, 2 nd Floor, Imus City Hall	
One (1) set – Architectural and Structural F	Plan	Client	





		Registry of Deeds		
either of the following: Deed of Sale or Contract to Sell Authorization from lot owner Proof of relationship to the lot owner				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1.1 Verify the requirements.	None	15 minutes	Window 1 and 2
	1.2 Approval of Permit	None	10 minutes	Engr. Alvin Saitanan City Building Official Engr. Josephine Hernandez
	1.2 Assess the fees.	None	10 minutes	OSCP - Backroom
2. Receive Order of payment.	2. Issue the order of payment	None	5 minutes (stop time)	City Treasurer's Office
3. Pay the required fees at the City Treasurer's Office	3. Receive payment and release the official Receipt (OR)	Refer to the 2005 Revised IRR of the National Building Code (P.D. 1096)	2 minutes	Window 2
4. Present the original and photocopy of the Official Receipt and receive the	4.1 Prepare the required Permit.	None	15 minutes	Window 3
permit.	4.2 Release the Permit.	None	3 minutes	
	TOTAL	Based on assessment	1 hour	





4. ISSUANCE OF CERTIFICATE OF OCCUPANCY/USE/OPERATION

A document issued by the Building Official to an owner/applicant certifying a building's compliance with the National Building code of the Philippines (the Code) and its Implementing Rules and Regulations (IRR) and indicating it to be in a condition suitable for occupancy. It is evidence that the building complies substantially with the plans and specifications that have been submitted to, and approved by, the Building Official.

OFFICE OR DIVISION	City Building Official's Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G (Government to Government), G2C (Government to Citizens), G2B (Government to Businesses)			
WHO MAY AVAIL THE SERVICE	Any person or company who was issued	a Building permit may	apply upon completion of	of the building and ready for
	occupancy.			
CHECKLIST OF	REQUIREMENTS		WHERE TO SECUR	RE
Filled-up Unified Application Form for Cer	tificate of Occupancy and FSIC	Window 1 and 3, One City Hall	Stop Shop for Construc	tion Permits, 2 nd Floor, Imus
	cate of Completion using the form in Annex	Client		
	ed and sealed by the duly licensed Architect			
v	n, and one copy of the construction logbook.			
	gh a contract, the Certificate of Completion			
shall be signed by the contractor/Authoriz				
	e (1) photocopy of the Valid Licenses of all involved Professionals (e.g. Professional		nvolved in the construction	on of the building
Tax Receipt and the Professional Regula		0		
Photograph of the completed structure sh	× · · · · · · · · · · · · · · · · · · ·	Client		
Yellow Card issued by Electrical Service		MERALCO		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
• •	1.1 Receive and assess the completeness	None	30 minutes	Window 1
and Documentary Requirements.	and correctness of the documents and inform the inspection schedule.			
(Client should be present during the inspection)	1.2 Processing of application in the back room and inspection of buildings/structures/machineries.	None	3.5 days	OSCP - Backroom
2. Submit the requirements	2.1 Verify the requirements;	None	30 minutes	Window 1
		None		

CITIZEN'S CHARTER



	2.2 Assess the fees and issue the order of payment			
3. Receive Order of Payment or Notice of Disapproval	3. Release Order of Payment or Notice of Disapproval	None	30 minutes (stop time)	Window 1
 Payment of Fees and Charges. 	4. Receive the payment and issue the O.R.	Refer to the 2005 Revised IRR of the National Building Code (P.D. 1096)	2 minutes	Window 2
5. Claim the Certificate of Occupancy	5. Preparation and release Certificate of Occupancy, FSIC, Notice of Assessment, Tax Declaration, CFEI and other submitted documents.	None	25 minutes	Window 3
	TOTAL	Based on assessment	5 days	

NOTE: This is in line with the JMC 2018 – 001 and to be processed in the One Stop Shop for Construction Permits. If the inspector's report stated that there are violations, deviations, addition in the approved Building plans; the application shall be withheld pending compliance of the needed requirements for completion before moving to the next step.







5. ISSUANCE OF ELECTRICAL OR WIRING PERMIT

5. ISSUANCE OF ELECTRICAL OR WIRING P				
OFFICE OR DIVISION City	City Building Official's Office			
	Simple			
TYPE OF TRANSACTION G20	G2G (Government to Government), G2C (Government to Citizens), G2B (Government to Businesses)			nesses)
	esidents and non-residents who own a bu	uilding in Imus and intend to	apply for electrical ar	nd wiring permit
CHECKLIST OF REC	QUIREMENTS	V	VHERE TO SECURE	
Transfer Certificate of Title (TCT) of the lot whe	ere building is erected, if the applicant is	Registry of Deeds		
not the lot owner, provide either of the following	:			
Deed of Sale or Contract to Sell				
Authorization from lot owner				
Proof of relationship to the lot owner				
Electrical/Wiring Permit form duly signed by	an Electrical Engineer or Registered	Office of the Building Offici	al	
Electrician				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON
			TIME	RESPONSIBLE
1. Submit the requirements	1.1 Verify the requirements.	None	5 minutes	Window 1 and 3
	1.2 Assess the fees and issue the	None	5 minutes	OSCP - Backroom
	order of payment			
2. Pay the required fees at the City Treasurer'		Refer to the 2005	2 minutes	Window 2 – OSCP
Office	official Receipt (OR)	Revised IRR of the		
		National Building Code		
		(P.D. 1096)		
3. Present the original and photocopy of th	e 4.1 Prepare the required Permit.	None	10 minutes	OSCP – Backroom
Official Receipt	4.2 Approval of Permit	None	5 minutes	Engr. Alvin Saitanan
·				City Building Official
				Engr. Josephine
				Hernandez
4. Receive the Permit	4. Release the Permit	None	3 minutes	Window 3 - OSCP
	TOTAL	Based on assessment	30 minutes	







6. ISSUANCE OF CERTIFICATE OF FINAL ELECTRICAL INSPECTION (CFEI)

A document issued by the Building Official to an owner/applicant after electrical safety inspection, testing, and verification of the electrical wirings of residential, institutional, commercial, and industrial building before the installation of electric meters by the electric power service provider to ensure their conformance to the provisions of the Philippine Electrical Code.

provisions of the Philippine Electrical Code.				
OFFICE OR DIVISION City	Building Official's Office			
CLASSIFICATION Com	Complex			
TYPE OF TRANSACTION G2G	(Government to Government), G2C (Go	(Government to Citizens), G2B (Government to Businesses)		
	esidents and non-residents who own a bu			•
CHECKLIST OF REQ			WHERE TO SECUR	E
Yellow Card issued by MERALCO with a reques	t to secure for CFEI	MERALCO		
Inspection report of the Electrical Inspector		Office of the Building Offi	cial	
Transfer Certificate of Title of tis erected	he lot where the building	Registry of Deeds		
Proof of ownership if the lot title is not in the nar sell, Deed of Sale, Agreement and Authorization		Client		
For new connection, provide Occupancy Permit		One Stop Shop for Const	truction Permits, 2 nd F	Floor, Imus City Hall
For reconnection/relocation/separation of electric meter base with addition/extension/renovation of building, provide Building Permit		One Stop Shop for Const	truction Permits, 2 nd F	loor, Imus City Hall
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the inspection request form and the yellow card issued by Meralco.	1.1 Receive the yellow card and inspection request form and inform the inspection schedule.		10 minutes	Window 1
	1.2 Inspect the installed Electric Meter Base and wiring connections.		3 days	Engr. Leonardo Aliscad; Engr. Kieran Dela Cruz; Engr. Kit Jasper Paredes; Engr. Daniel Pangilinan
2. Submit the requirements	2.1 Verify the requirements		5 minutes	Window 1





	2.2 Assess the fees.		10 minutes	
3. Receive Order of Payment	3. Issue the order of payment.		5 minutes	OSCP
4. Pay the required fees at the City Treasurer's	4. Receive payment and release the	Refer to the 2005	2 minutes	Window 2 - OSCP
Office	official Receipt (OR)	Revised IRR of the		
		National Building Code		
		(P.D. 1096)		
5. Present the original and photocopy of the O.R. and receive the permit.	5.1 Receive the OR and prepare the document.		10 minutes	Window 1
	5.2 Approve the CFEI		5 minutes	Engr. Alvin Saitanan City Building Official Engr. Josephine Hernandez
6. Receive the document	6. Release the document	None	3 minutes	Window 3
	TOTAL	Based on assessment	4 days	

NOTE: The inspectors will leave the Inspection report in the inspected building indicating the documents or requirements to be submitted for the issuance of CFEI. If the applicant can't comply with the requirements, the application for CFEI shall be withheld.







7. ISSUANCE OF CLEARANCE FOR NEW AND RENEWAL OF BUSINESS PERMIT APPLICATION

	to owner/applicant certifying the co	mpliance of the	structures/building to th	ne National Building C	ode of the Philippines.
OFFICE OR DIVISION	City Building Official's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G (Government to Government), G2C (Govern	ment to Citizens), G2B	(Government to Busin	iesses)
WHO MAY AVAIL THE SERVICE	All business taxpayers in Imus				
CHECKLIST	OF REQUIREMENTS			WHERE TO SECUR	E
Duly accomplished application form			One Stop Shop for Bu	siness Permits, GF Fl	oor, Imus City Hall
Building Permit			One Stop Shop for Bu	siness Permits, GF Fl	oor, Imus City Hall
Occupancy Permit			One Stop Shop for Bu	siness Permits, GF FI	oor, Imus City Hall
CLIENT STEPS	AGENCY ACTI	ON	FEES TO BE PAID	PROCESSING	PERSON
				TIME	RESPONSIBLE
1. Submit the application form.	1. Verify the application.		None	10 minutes	Kristine Marie
					Pakingan;
					Cresencia Parnala;
2. Receive the approved application with the	he 2. Assess the fees.		None	5 minutes	Kristine Marie
assessed fees					Pakingan;
					Cresencia Parnala;
		TOTAL	None	15 minutes	

Note: If the building for the Business Operation was verified to have no Building Permit and Occupancy Permit and have violations on the building construction, the application for Business Permit is withheld. If the building is in compliance, proceed to Step 2.







8. ISSUANCE OF BUILDING PERMIT FOR CONSTRUCTION OF TELECOMMUNICATIONS AND INTERNET INFRASTRUCTURE

A document issued by the Building Official to an owner/applicant to proceed with the construction of telecommunications and internet infrastructure after the accompanying principal plans, specifications and other pertinent documents with the duly notarized application are found satisfactory and substantially conforming with the National Building code of the Philippines (the Code) and its Implementing Rules and Regulations (IRR).

OFFICE OR DIVISION	City Building Official's Office		
CLASSIFICATION	Complex		
TYPE OF TRANSACTION	G2G - Government to Government, G2C - G	overnment to Citizens, G2B - Government to Businesses	
WHO MAY AVAIL THE SERVICE	Any person or company who intends to cons	struct telecommunications and internet infrastructure in Imus	
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE	
Four (4) copies of filled up Unified Applicat	ion Form for Building Permit	Window 1 and 3, One Stop Shop for Construction Permits, 2 nd Floor, Imus City Hall	
Filled-up Application Form for Locational C	learance	City Planning and Development Office - OSCP	
Original Certificate of Title (OCT) / Tran	sfer Certificate of Title (TCT), or Deed of	Registry of Deeds	
Absolute Sale or Lot Locational Plan from	n LRA (if lessee, Contract of Lease), if the		
applicant is not the lot owner, provide eithe	er of the following:		
Deed of Sale or Contract to Sell			
Authorization from lot owner			
Proof of relationship to the lot owner			
Four (4) sets of Survey Plans, design plans	s and other documents as follows:	Client	
Architectural Documents			
Civil / Structural Documents			
Electrical Documents			
Mechanical Documents Electronics Documents			
Geodetic Documents			
Three (3) photocopies of Valid Licenses (P	PRC I.D.) of all involved professionals	Client, professionals involved in the construction of the building	
Notarized estimated value of the building owner	/ structure to be erected as declared by the	Client	
Environmental Compliance Certificate (EC	CC), if the proposed project site is within an	Client	
environmentally critical area;			
Special Use Agreement in Protected Area	s, if the proposed project site is a protected		
area;			





Free and Prior Informed Consent, if the p domain:	proposed project site is within an ancestral			
Land Use Conversion from the Departmen	t of Agrarian Reform (DAR) Central Office, if			
	version of an agricultural land of more than			
	al Office, if the said land is five (5) hectares			
and below;	one Authority (PEZA), if the proposed site is			
••	owned, administered or operated by PEZA;			
Soil Test (If applicable)		Client		
Other requirements as mandated by the Co	onstitution and existing laws.			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Application Forms and	1.1 Receive and assess the completeness	None	30 minutes	Window 1
Documentary Requirements	and correctness of the documents.			
	1.2 Processing of application in the Back Room and Inspection.	None	3.5 days	OSCP – Back Room
2. Receipt of Order of Payment or Notice of Disapproval	2. Release Oder of Payment or Notice of Disapproval	None	30 minutes (stop time)	Window 1
3. Payment of Fees and Charges	3. Receive the payment and issue the O.R.	Refer to the 2005 Revised IRR of the National Building Code (P.D. 1096)	5 minutes	Window 2
4. Claiming of Building Permit	4. Preparation and release of Building Permit		25 minutes	Window 3
	TOTAL	Based on	5 days	
	001 and to be presented in the One Step Sh	assessment		

NOTE: This is in line with the JMC 2018 – 001 and to be processed in the One Stop Shop for Construction Permits. For construction with area of 1500 sq.m. and above, the processing time is 15 days.







CITY PLANNING AND DEVELOPMENT OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ISSUANCE OF LOCATIONAL CLEARANCE OR ZONING COMPLIANCE AND TEMPORARY USE PERMIT (TUP) FOR NEW AND RENEWAL OF BUSINESS PERMIT

A business proprietor who wishes to start his/her own business or renew their existing business permit are required to secure a Mayor's permit or city license from the City Government of Imus.

OFFICE OR DIVISION	City Planning and Development Office - Business One Stop Shop (BOSS)		
CLASSIFICATION	Simple		
TYPE OF TRANSACTION	G2B – Government to Business, G2C – Government to Citizen, G2G – Government to Government		
WHO MAY AVAIL THE SERVICE		who intend to renew or open a new business in the City of Imus	
		WHERE TO SECURE	
For Application of New Business Permit			
Application Form	ocational Clearance or Zoning Compliance	Business One Stop Shop (BOSS) Zoning Representative	
Duly accomplished and notarized Af	fidavit of Parking	Business One Stop Shop (BOSS) Zoning Representative	
Proof of Ownership (Photocopy)		Provided by the property owner.	
Certified True Copy of Transfer Cert	ificate of Title(s) (TCT). If the property (TCT)		
is not registered in the name of the ap	oplicant, provide the necessary requirements:		
Notarized Deed of Sale			
Notarized Deed of Donation			
Notarized Agreement to Purchase an	nd Sell		
Notarized copy of Authorization to U	se the Land from the registered owner		
Notarized Contract of Lease			
Tax Declaration			
Updated Tax Receipt			
Barangay Resolution or Endorsemen	nt	Barangay where the business is located	
Homeowner's Association Resolution	n (HOA) endorsing the project or business, if	Homeowners Association of the said subdivision	
the location of the business is within	a Residential Subdivision.		
DTI or SEC Registration		Department of Trade and Industry (DTI) and Securities and Exchange Commission	
Picture of establishment (front, side	showing the road setback and interior)	Provided by the property owner.	
Personal appearance on the actual of	date of inspection	Participation of the business owner	
Renewal of Business Permit			
Photocopy of previous Business Per	mit and Official Receipt	Provided by the business owner	
New Barangay Endorsement		Barangay where the business is located	





CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1.1 Assess the requirements and verify if inspection is needed	None	15 minutes	Greg Chuangco Roderick Biazon Augusto Bayot Whelvin Ramos Dennis Sauquillo
2. Undergo the inspection	2. Inspect the business site and road setback (if needed)	None	30 minutes	Jojie Cervantes Augusto Bayot
3. Receive assessment of fees and proceed to the BPLO for the processing of request (after inspection or if inspection is not required)	3.1 Approve the application and assess the fees.3.2 Provide assessment fees.	Refer to Article XXI. Section 190 of the 2019 Imus Revenue Code	10 minutes (stop time)	Engr. Guiana F. Monzon Engr. Nenita Casing Greg Chuangco Roderick Biazon Augusto Bayot Whelvin Ramos Dennis Sauquillo
	Fill-out Client Satis	faction Rating Form		
	TOTAL	Based on assessment	55 minutes	

ZONING CLEARANCE FEES

FOR NEW BUSINESS	
Apartments / Townhouses	
Total Floor Area multiplied by 8,000.00/squar	re meter or total Bill of Materials whichever is higher.
P500,000.00 and below	P 1,200.00
Over P500,000.00 and above	P 1,200.00 + 1/10 of 1% of cost in excess of P500,000.00 regardless of the number of doors
Dormitories	
Total Floor Area multiplied by 10,000/square	meter or total Bill of Materials whichever is higher
P2,000,000.00 and below	P 2,500.00
Over P2,000,000.00	P 2,500.00 + 1/10 of 1% of cost in excess of P2,000,000.00 regardless of the number of doors
Institutional	· · · ·





Total Floor Area multiplied by 10,000/square met	ter or total Bill of Materials whichever is higher
Project cost of which is:	
Below P1,000,000.00	P1,200.00
P1,000,000.00 to P2,000,000.00	P2,000.00
Over P2,000,000.00	P2,500.00 + 1/10 of 1% of cost in excess of P2,000,000.00
Commercial, Industrial and Agro-Industrial	
Total Floor Area multiplied by 10,000/square met	ter or total Bill of Materials whichever is higher
Project cost of which is:	
Below P100,000.00	P1,200.00
Over P100,000.00 to 500,000.00	P1,700.00
Over P500,000.00 to 1,000,000.00	P2,500.00
Over P1,000,000.00 to 2,000,000.00	P3,000.00
Over 2,000,000.00	P 5,000.00 + 1/10 of 1% of cost in excess of P2,000,000.00

Special Uses/Special Projects				
(Gasoline Station, Cell Sites, Slaughterhouse, Treatment Plan, etc.)				
Total Floor Area multiplied by 10,000/square meter or to	otal Bill of Materials whichever is higher.			
Below P2,000,000.00	P5,000.00			
Over P2,000,000.00	P5,000.00 + 1/10 of 1% of cost in excess of P2,000,000.00			
RENEWAL OF ZONING CLEARANCE				
1. Apartments / Townhouses	Same as the previous assessment fees			
2. Dormitories	Same as the previous assessment fees			
3. Institutional	3. Institutional Same as the previous assessment fees			
4. Commercial, Industrial and Agro-Industrial	Same as the previous assessment fees			
5. Special Uses/Special Projects	Same as the previous assessment fees			





2. ISSUANCE OF LOCATIONAL CLEARANCE (TPZ/TUP) FOR THE APPLICATION OF BUILDING PERMIT (OSCP) ONE-STOP SHOP CONSTRUCTION PERMIT

Any entity who will engage in a construction activity shall secure a Locational Clearance from the City Zoning Administrator.

OFFICE OR DIVISION	City Planning and Development Office - One-Stop Shop Construction Permit (OSCP)			
CLASSIFICATION	Highly - Technical			
TYPE OF TRANSACTION	G2B – Government to Business, G2C – Government to Citizen, G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Any person, firm or corporation who will unde	lergo construction activities regardless of size and cost of the project can avail this service		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
	ocational Clearance or Zoning Compliance	One-Stop Shop Construction Permit (OSCP) Window 1, 2 and 3		
Application Form				
Duly accomplished and notarized	Affidavit of Parking for application of	One-Stop Shop Construction Permit (OSCP) Window 1, 2 and 3		
commercial, industrial, residential ap	artments and institutional buildings			
One (1) set from the four (4) sets of r	equired documents for the application of the	One-Stop Shop Construction Permit (OSCP) Window 1, 2 and 3		
Building Permit at the Office of the B	uilding Official (OBO)			
Proof of Ownership (Photocopy)		Provided by the property owner.		
Certified True Copy of Transfer Certi	ficate of Title(s) (TCT), if the property (TCT)			
is not registered in the name of the ap	plicant, provide the necessary requirements:			
Notarized Deed of Sale				
Notarized Deed of Donation				
Notarized Agreement to purchase an	d sell			
Notarized copy of authorization to us	e the land from the registered owner			
Tax Declaration				
Updated Tax Receipt				
Barangay Resolution or Endorsemer	ıt	Barangay where the business is located		
Homeowner's Association Resolution	endorsing the project if the project is located	Homeowners Association of the said subdivision		
within the subdivision except for resid	dential purposes			
Complete Engineering Plans duly sig	gned and sealed by the respective Licensed	Provided by the professionals who prepares and signed in the technical plans to be		
Engineers		submitted by the owner		





Specifications, Bill of Materials and Cost Estimates duly signed and sealed by a licensed Civil EngineerLot Plan or consolidated plan of lots signed and sealed by a licensed Geodetic Engineer or ArchitectLot Plan with Technical Description approved by the Bureau of Land (for TCT without Technical Description)		Provided by the professionals who prepares and signed in the technical plans to be submitted by the owner			
		Provided by the professionals who prepares and signed in the technical plans to be submitted by the owner Provided by the professionals who prepares and signed in the technical plans to be submitted by the owner			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID			
1. Submit the requirements in windows 1, 2 and 3	1.1 Check the completeness of the documents.1.2 Encode the received documents.1.3 Issue a claim stub.	None None None	15 minutes	Kristine Marie Pakingan Cresencia A. Parnala Razil Benitez	
	1.4 Evaluate the plans and documents submitted.1.5 Provide assessment fees	None None	10 minutes 3 minutes	Engr. Nenita Casing; Greg Chuangco; Roderick Biazon; Augusto Bayot; Dennis Sauquillo;	
2. Receive order of payment	2. Issue order of payment.	None	2 minutes (stop time)	Engr. Nenita Casing; Greg Chuangco; Roderick Biazon; Augusto Bayot; Dennis Sauquillo;	
3. Pay the required fee at OSCP Window 4.	3. Receive payment and issue Official Receipt (OR)	Refer to Article XXI. Section 190 of the 2019 Imus Revenue Code	3 minutes	Staff from the Treasurer's Office	
4. Present the original and photocopy of the O.R.	4.1 Prepare the Clearance.	None	10 minutes	Cindy T. De Castro Aileen D. Albay	
	4.2 Approve the request.	None	5 minutes	Engr. Guiana F. Monzon	
5. Receive the Zoning Clearance	5. Release Zoning Clearance.	None	2 minutes	Čindy T. De Castro; Aileen D. Albay	

CITIZEN'S CHARTER



Fill-out Client Sa	atisfaction Rating Form		
TOTAL	Based on	50 minutes	
	assessment		

ZONING AND LOCATIONAL CLEARANCE FEES

1. Single Residential Structure Total Floor Area multiplied by 8,000/square meter or total Bill	
Total Floor Area multiplied by 8,000/square meter or total Bill	
	of Materials whichever is higher.
P200,000.00 and below	P 400.00
Over P200,000.00 to P400,000.00	600.00
Over P400,000.00	800.00 + 1/10 of 1% of cost in excess of P400,00.00
2. Apartments / Townhouses	
Total Floor Area multiplied by 12,000.00/square meter or tota	al Bill of Materials whichever is higher.
P500,000.00 and below	P 1,200.00
Over P500,000.00 and above	P 1,200.00 + 1/10 of 1% of cost in excess of P500,000.00 regardless of the
	number of doors
3. Dormitories	
Total Floor Area multiplied by 12,000/square meter or total B	
P2,000,000.00 and below	P 2,500.00
Over P2,000,000.00	P 2,500.00 + 1/10 of 1% of cost in excess of P2,000,000.00 regardless of the
	number of doors
4. Institutional	
Total Floor Area multiplied by 15,000/square meter or total	Bill of Materials whichever is higher
Project cost of which is:	
Below P1,000,000.00	P1,200.00
P1,000,000.00 to P2,000,000.00	P2,000.00
Over P2,000,000.00	P2,500.00 + 1/10 of 1% of cost in excess of P2,000,000.00
5. Commercial, Industrial and Agro-Industrial	
Total Floor Area multiplied by 15,000/square meter or total	Bill of Materials whichever is higher
Project cost of which is:	
Below P100,000.00	P1,200.00
Over P100,000.00 to 500,000.00	P1,700.00
Over P500,000.00 to 1,000,000.00	P2,500.00
Over P1,000,000.00 to 2,000,000.00	P3,000.00
Over 2,000,000.00	P 5,000.00 + 1/10 of 1% of cost in excess of P2,000,000.00







Alteration/Expansion (affected areas/cost only)	
(Gasoline station, cell sites, slaughter house, treatment plan, etc.)	
Total Floor Area multiplied by 15,000/square meter or total Bill of Materials which	chever is higher
Below P2,000,000.00	P 5,000.00
Over P2,000,000.00	500.00 + 1/10 of 1% of cost in excess of P2,000,000.00
Alteration/Expansion (affected areas/cost only)	Same as original application
(Based on Article IX of the Imus Zoning Ordinance)	
Surcharge for Zoning/Locational Clearance	
+ 25% LC fee if the project is more than 25% but less than 50% accomplished	
+ 50% LC fee if the project is more than 50% but less than 75% accomplished	
+ 75% LC fee if the project is more than 75% but less than 100% accomplishe	d
+100% LC fee if the project is 100% accomplished	
9. Violation (where applicable)	
a. Violation of Clearance	
i. As to Use	P 10,000.00
ii. As to Area	P 8,000.00
iii. As to Location	P 10,000.00
 b. Violation as to terms and condition of zoning clearance 	
i. No clearance from National Pollution Control Protection Council	P 10,000.00
ii. No clearance from Department of Environment and Natural Resources	P 10,000.00
iii. No clearance from Department of Health	P 10,000.00
iv. No clearance from Air Transportation Office	P 10,000.00
v. No clearance from NTC	P 10,000.00
vi. No clearance from Natural Resources Water Board	P 10,000.00
vii. No clearance from Traffic Impact Assessment Office	P 10,000.00
viii. Non-compliance with the other government requirements	P 13,000.00
ix. Mis-presentation	P 10,000.00
x. Setback/easement	P 10,000.00
xi. Alteration of plan	P 10,000.00
c. Other violation	
i. Without zoning clearance	P 10,000.00
ii. Expiration of temporary use permit	P 10,000.00
iii. Illegal construction	P 10,000.00







3. ISSUANCE OF ZONING CERTIFICATION

Provide the classification of a parcel of land/property as to the type of land uses based on the approved Zoning Classification of the city.

FIONDE LITE CLASSIFICATION OF			approvod Zorning Oldoomoali	
OFFICE OR DIVISION	City Planning and Development Office - Zoning Administrator			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2B – Government to Business, G2C – Government to Citizen, G2G – Government to Government			
WHO MAY AVAIL THE	All residents, non-residents of the C	City of Imus and companies w	ho wish to verify the Zoning/	Land Use classification of their
SERVICE	lots/parcels of land.			
	REQUIREMENTS		WHERE TO SECURE	
Notarized Application Form for Zo	ning Certification	One Stop Shop Construction	n Permit (OSCP) Window 6 a	ind 7
Photocopy of Transfer Certificate	of Title(s) (TCT)	Provided by the Owner/Appl	licant	
Photocopy of Tax Declaration		Provided by the Owner/Appl	licant	
Photocopy of Updated Tax Receipt	ot	Provided by the Owner/Appl	licant	
Lot Plan or consolidated plan of le	ots (for two or more parcels of land)	Provided by the Owner/Appl	licant	
signed and sealed by a licensed (Jeodetic Engineer			
Lot Plan with Technical Description	on approved by the Bureau of Land	Provided by the Owner/Appl	licant	
(for TCT without Technical Descri	ption)			
Vicinity Map showing the exact loo	cation of the property	Provided by the Owner/Appl	licant	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements and	•	None	10 minutes	Greg Chuangco
receive the order of payment	the location of the lot(s)			Dennis Sauquillo
			3 minutes	Roderick Biazon
	1.2 Assess the fees	None		
2. Receive order of payment	2. Issue Order of Payment	None	2 minutes	Greg Chuangco Dennis Sauquillo
			(stop time)	
3 Pay the required fee at OSCP	3. Receive the payment and issue	Refer to Article XXI	, i ,	Roderick Biazon
3. Pay the required fee at OSCP		Refer to Article XXI.	3 minutes	Roderick Biazon Staff from the Treasurer's
· ·	3. Receive the payment and issue the Official Receipt (OR)	Section 190 of the 2019	, i ,	Roderick Biazon
Window 4	the Official Receipt (OR)	Section 190 of the 2019 Imus Revenue Code	3 minutes	Roderick Biazon Staff from the Treasurer's Office
Window 4 4. Present the original and	the Official Receipt (OR)	Section 190 of the 2019	, i ,	Roderick Biazon Staff from the Treasurer's
Window 4	the Official Receipt (OR) 4.1 Process the request	Section 190 of the 2019 Imus Revenue Code None	3 minutes 5 minutes	Roderick Biazon Staff from the Treasurer's Office Engr. Nenita Casing Cindy De Castro
Window 4 4. Present the original and	the Official Receipt (OR)	Section 190 of the 2019 Imus Revenue Code	3 minutes	Roderick Biazon Staff from the Treasurer's Office Engr. Nenita Casing Cindy De Castro Engr. Guiana F. Monzon
Window 4 4. Present the original and	the Official Receipt (OR) 4.1 Process the request	Section 190 of the 2019 Imus Revenue Code None	3 minutes 5 minutes	Roderick Biazon Staff from the Treasurer's Office Engr. Nenita Casing Cindy De Castro





				Cindy De Castro
Fill-out Client Satisfaction Rating Form				
TOTAL Based on assessment 30 minutes				

4. ISSUANCE OF DEVELOPMENT PERMIT AND ALTERATION PERMIT OF SUBDIVISION

A Development Permit is a permit issued and approved by the Sanguniang Panlungsod before any land development is introduced to any parcel of land.

OFFICE OR DIVISION	City Planning and Development Office - Zoning Administrator				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2B – Government to Business, G2C – Government to Citizen, G2G – Government to Government				
WHO MAY AVAIL THE	All Land Owners or Developers who intend to alter or develop into a subdivision a parcel(s) of land situated in the City				
SERVICE	Imus				
CHECKLIS	T OF REQUIREMENTS	WHERE TO SECURE			
For Development Permit Applie	cation				
Proof of Ownership		Provided by the Owner/Applicant			
	Certificate of Title(s) (TCT) or Deed of Sale or ertified True Copy of Tax Declaration; Updated				
Six (6) sets of Complete Engine	ering Plans Signed & Sealed by a Licensed	Provided by the Owner/Applicant			
Engineer					
Plans, specifications, Bill of Materials and cost estimates duly signed and sealed		Provided by the Owner/Applicant			
by the appropriate licensed profe					
Lot Plan signed and sealed by a li	censed Geodetic Engineer; Consolidated plan	Provided by the Owner/Applicant			
of lots for two or more parcels of	land. For TCT without technical descriptions,				
provide the lot plan with technica	I description approved by the Bureau of Lands				
Photocopy of PRC ID and late	est Professional Tax Receipt (PTR) for the	Provided by the Owner/Applicant			
Licensed Professionals					
Soft copy of the Site Developmen	nt Plan of Subdivision (CD or Flash Drive)	Provided by the Owner/Applicant			
Two (2) Copies of project descrip	tion (1 ha. and above)	Provided by the Owner/Applicant			
Project Profile					
Audited Financial Statement for t	he last 3 preceding years				
Income Tax Return for the last 3					
Certificate of Registration from S					
Articles of Incorporation or partne	ership				

CITIZEN'S CHARTER

O 11 1 11 1					
Corporation by-laws and impler	nenting amendments below), Statement of Capitalization & Source of				
Income	below), Statement of Capitalization & Source of				
Traffic Impact Assessment (TIA) for subdivision 30 has. and above.		Provided by the Owner/	Applicant		
Barangay Resolution where the	subdivision is located	Barangay where the bus	siness is located		
Certified True Copy of Envi	ronmental Compliance Certificate (ECC) or	Department of Environm	nent and Natural Resour	ces (DENR)	
Certificate of Non-coverage (CN	NC) whichever is applicable				
Permit to Drill from National Wa	ter Resources Board (NWRB)	National Water Resourc	es Board (NWRB)		
For Alteration Permit Applica	tion				
Request Letter for the Alterati	on of the approved subdivision indicating the	Provided by the Owner/	Applicant		
reasons for the alteration					
Five (5) sets - Site Develop	ment Plan showing the previously approved	Provided by the Owner/	Applicant		
subdivision and the proposed a	Itered plan of the subdivision				
Five (5) sets - complete engine	eering plans if there is a major alteration in the	Provided by the Owner/	Applicant		
road Right of Ways					
For Certificate of Completion	Application				
Received letter from the Hous	ing and Land Use Regulatory Board (HLURB)	Housing and Land Use Regulatory Board (HLURB)			
informing the LGU for the applic	cation of a Certificate of Completion (COC) filed				
by the developer					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements	1.1 Evaluate the requirements, transmit the	None	2 hours	Engr. Nenita Casing;	
	application to the Sanggunian and schedule the site inspection.			Greg Chuangco; Roderick Biazon	
	1.2 Conduct an ocular inspection of the site.	None	1 day	Roderick Biazon	
		NONC	T day		
	1.3 Prepare the Evaluation Report of the	None	2 hours	Greg Chuangco;	
	subdivision and submit to the Sanggunian			Roderick Biazon	
	Panlungsod.			Engr. Nenita Casing;	
				Greg Chuangco;	
				Roderick Biazon;	
				Cindy de Castro;	
	1.4 Approve the application	None	30 days	Vice Mayor and Sanggunia	

CITIZEN'S CHARTER

2. Receive order of payment	2. Prepare assessment fees and Issue order of payment	None	5 minutes	Engr. Nenita Casing; Greg Chuangco; Roderick Biazon;
3. Pay the required fee at the City Treasurer's Office and OSCP window 4	3. Receive the payment and issue the O.R.	Refer to Article XXI. Section 190 of the 2019 Imus Revenue Code	3 minutes	Staff from the Treasurer's Office
4. Present the original and photocopy of the O.R.	4.1 Prepare the document for approval	None	14 days	Engr. Nenita Casing; Greg Chuangco; Cindy de Castro
	4.2 Approve the request	None	3 days	Mayor Alex L. Advincula Vice Mayor Homer T. Saquilayan Coun. Darwin Marti M. Remulla
5. Receive the document	5. Release the document	None	2 minutes	Engr. Nenita Casing; Greg Chuangco
	Fill-out Client Satis	action Rating Form		
	TOTAL	Based on assessment	48 days 4 hours 10 minutes	

DEVELOPMENT PERMIT AND ALTERATION PERMIT OF SUBDIVISION FEES

 Subdivision Projects

 Projects under P.D. 957

 Approval of Subdivision Plan (including townhouses)

 Preliminary Approval & Locational Clearance (PALC) / Preliminary Subdivision
 P1,000.00/ha. or a fraction thereof

 Development Plan (PSDP)
 P1,000.00/ha. regardless of density

 Final Approval and Development Permit
 P2,500.00/ha. regardless of density

 I. Inspection Fee
 P2,000.00/ha. regardless of density

 ii. Fee on Floor Area of houses and building sold with Lot
 Refer to Zoning / Locational Clearance Fee

 Alteration of Plans (affected areas only)
 Same as original application





Socialized Housing	P1,000.00/ha.	
Economic Housing	P1,000.00/ha.	
	F 1,000.00/11a.	
Inspection Fee		
Socialized housing	P1,000.00/ha.	
Economic Housing	P1,000.00/ha.	
Final Approval & Development Permit		
Processing Fee		
Socialized housing	P1,000.00/ha.	
Economic housing	P1,500.00/ha.	
Inspection Fee	· · ·	
Socialized housing	P1,000.00/ha.	
Economic housing	P1,000.00/ha.	
Fee on Floor Area of houses and building sold with Lot	Refer to Zoning / Locational Clearance Fee	
Alteration of Plan (affected area only)	Same as Final Approval and Development Permit	
Approval of Industrial Subdivision		
Preliminary approval & Locational Clearance	P1,000.00/ha. or a fraction thereof	
Inspection Fee	P1,500.00/ha.	
Final approval & Development Permit	P1,500.00/ha	
Fee on Floor Area of Building sold with Lot	Refer to Zoning/ Locational Clearance Fee	
Alteration of plan (affected areas only)	Same as original application	
Approval of Commercial Subdivision		
Preliminary Approval & Locational Clearance	P1,000.00/ha. or a fraction thereof	
Inspection Fee	P1,500.00/ha.	
Final Approval & Development Permit	P2,500.00/ha.	
Fee on Floor Area of Building sold with Lot	Refer to Zoning/ Locational Clearance	
Approval of Farm lot Subdivision		
Preliminary Approval & Locational Clearance	P1,000.00/ha. or a fraction thereof	
Inspection Fee	P1,000.00/ha	
Final Approval & Development Permit	P1,500.00/ha	
Fee on Floor Area of Building sold with Lot	Refer to Zoning / Locational Clearance Fee	





Alteration of plan (affected areas only)	Same as original application		
Approval of Memorial Parks/Cemetery Projects			
Preliminary Approval & Locational Clearance			
For Memorial Projects	P1,000.00/ha.		
For cemeteries	P1,000.00/ha.		
Inspection Fee			
For Memorial Projects	P1,500.00/ha.		
For cemeteries	P1,000.00/ha		
Final Approval & Development Permit			
Processing Fee			
For Memorial Projects	P10.00/sq. m.		
For Cemeteries	P 5.00/sq. m.		
Alteration of plan (affected areas only)	Same as Final Approval and Development Permit		

City License Fee for Development

The subdivision owner and business establishment/land owner whose project involves horizontal developments (roads, bridges, drainage system, etc.) shall pay upon application for Development Permit/Zoning/Locational Clearance a Municipal License Fee of five pesos and fifty centavos per square meter (P10.00/sq.m.) of the total land area of the proposed project and an annual fee of one thousand one hundred pesos per hectare (P1,500.00/ha.) or fraction thereof for verification and inspection until the construction of roads, bridges, drainage system, installation of electric post and water system are completed.

ZONING CERTIFICATION FEE

Application/Request for		
Zoning Certification	P500.00/ha.	
Certification of Town Plan/Zoning Ordinance Approval	P120.00	
c. Others:		
i. Availability of records/public request of copies/research works P200.00		
ii. Certification of no record on file	P200.00	
iii. Others:	P200.00	
vi. Certified true/Xerox copy of documents P100.00/page		
Certification for Subdivision Verification		
1. For subdivision less than five (5) hectares	P2,000.00	





2.	More than 5 hectares to less than 10 hectares	P3,000.00
3.	Over 10 hectares	P500.00/ha.
4.	Memorial parks/cemetery	P1,000.00/ha.
Resea	rch/Service Fee (50% discount for students)	
1.	Request of colored Zoning Map	P100.00/pc
2.	Certified True Copy (Map, Land Use, Subdivision Plan, etc.)	P200.00/pc
3.	Photocopy of Documents/Data	P50.00 minimum and P5.00/page in excess of 10 pages
4.	Hard copy from CD	P300.00 minimum & P5.00/page in excess of 5 pages
5.	Electronic/Digital File	P300.00

NOTE: The requesting party must leave his/her identification card to the Planning staff upon availing of the original copy of the documents. Once the original documents were returned to the CPDO office, his/her identification card will also be returned to him. Original copies of documents are allowed only to be out of the office of the CPDO within the day.

RENEWAL OF ZONING CLEARANCE

Apartments/Townhouse	
For the first three (3) Units	P 1,200.00/ha.
Three (3) Units and above	P 1,200.00+400.00 for every door/unit
Dormitories	
For the first three (3) Units	P 1,200.00
Three (3) Units and above	P 1,200.00+200.00 for every door/unit
Institutional	
For the first three (3) Classroom	P1,200.00
Three (3) Classroom and above	P1,200.00+400.00 for every door/Classroom
Commercial, Industrial and Agro-Industrial	
For the first three (3) Units	P 1,2000.00/pc
Three (3) Units and above	P1,200.00+500.00 for every door/unit
c Area below 100 sqm.	P 1,200.00
d Area above 100 sqm but not more than 200 sqm.	P 2,000.00
e Area above 200 sqm. But not more than 500 sqm.	P 3,000.00
f More than 500 sqm.	P5,000.00+10.00/sqm in excess of 500 sqm.

CITIZEN'S CHARTER



Special Uses/Special Projects	
Gasoline station, cell sites, slaughter house, treatment plan, etc)	Same as original assessment

5. ISSUANCE OF CERTIFIED TRUE COPY OF PLANS, MAPS AND OTHER DOCUMENTS

A certified true copy is an official copy of an important document issued by this office.

1,	City Depains and Development Office			
OFFICE OR DIVISION	City Planning and Development Office - Zoning Administrator			
	Simple	<u> </u>		
TYPE OF TRANSACTION	G2B – Government to Business, G2	C – Government to Citizen, G	2G – Government to Govern	ment
WHO MAY AVAIL THE SERVICE				
	REQUIREMENTS	_	WHERE TO SECURE	
Photocopy of the documents to be c		Zoning Administrator		
	nd authorization letter in case of	Provided by the Owner/Appli	cant	
representatives				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
 Submit the requirements 	1.1 Receive and evaluate the	None	10 minutes	Engr. Nenita Casing;
	authenticity of the documents			Greg Chuangco;
				Roderick Biazon;
	1.2 Assess the fees.	None	5 minutes	Dennis Sauquillo
2. Receive the order of payment	2. Issue the order of payment	None	2 minutes	Engr. Nenita Casing;
			(stop time)	Greg Chuangco;
				Roderick Biazon;
				Dennis Sauquillo
3. Pay the required fee at the City		Php 55.00/pc Certified	3 minutes	City Treasurer's Office
Treasurer's Office/OSCP Window 4	the O.R.	True Copy of documents;		
		Php125.00/ pc Certified		
		True Copy of map and		
		Subdivision Plan		
4. Present the Official Receipt (O.	4.1 Receive the O. R.	None	8 minutes	CPDO Staff
R.)				
,	4.2 Sign the documents	None		Engr. Guiana F. Monzon
5. Receive the documents	5. Release the document.	None	2 minutes	CPDO Staff
	Fill-out Clien	t Satisfaction Rating Form		· ·
	TOTAL	Based on assessment	30 minutes	





6. PROVIDE DATA & PROFILE OF THE CITY

Profile of the City and other relevant data from social, economic, environmental and institutional sector can be requested to this office.

OFFICE OR DIVISION	City Planning and Development Office - Zoning Administrator			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business, G2C – Government to Citizen, G2G – Government to Government			
WHO MAY AVAIL THE	All			
SERVICE				
CHECKLIST O	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			
Request letter addressed to the	e City Mayor or City Planning and	Applicant		
Development Coordinator				
Valid Identification Cards (ID)		Applicant		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements and	1.1 Verify the availability of the data	None	10 minutes	Gina Camerino;
request of the data needed.	needed			Princess Polo
2. Receive order of payment	2. Prepare assessment fees and	None	3 minutes	Gina Camerino;
	Issue order of payment		(stop time)	Princess Polo
3. Pay the required fee at the	3. Receive the payment and issue	See fees below	3 minutes	City Treasurer's Office
City Treasurer's Office	the Official Receipt (O.R.)			
4. Present the Official Receipt	4.1 Receive the Official Receipt	None	15 minutes	Gina Camerino;
(OR)	(OR)			Princess Polo
	4.2 Process the request			
5. Receive the document	5. Release the document	None	2 minutes	Gina Camerino;
				Princess Polo
	TOTAL	Based on assessment	33 minutes	
Research/Service Fee (50% disc	ount for students)			
 Certified True Co 	py of Documents	P 55.00/pc		
2. Certified True Co	py (Map, Land Use, Subdivision Plan, e	etc.) P125.00/pc		

Ζ.	Certified The Copy (Map, Land Ose, Subdivision Plan, etc.)	Ρ125.00/pc
3.	Photocopy of Documents/Data	P50.00Minimum and 1.00/page in excess of 10 pages
4.	Hard copy from CD	P50.00 minimum & P5.00/page in excess of 5 pages
5.	Electronic/Digital File	P250.00

NOTE: The requesting party must leave his/her identification card to the planning staff upon availing of the original copy of the documents. Once the original documents were returned to the CPDO office, his/her identification card will also be returned to him. Original copies of documents are allowed only to be out of the office of the CPDO within the day.

CITIZEN'S CHARTER



OFFICE OF THE CITY MAYOR EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ISSUANCE OF MAYOR'S CERTIFICATION

Mayor's Certification is a formal attestation/verification/confirmation of certain characteristics of a person or organization.

Office of the City Mayor				
Simple				
G2C – Government to Citizen, G2B – Government to Business				
All Residents of the City of Imus				
F REQUIREMENTS	WHERE TO SECURE			
n the reception	Office of the City Mayor			
irriage				
ation seminar conducted by Philippine	PSA			
Ordination issued by the church	Issuing Church			
	Church			
ence				
	Church			
existence of the church in the area)	Respective Barangay			
	Client			
present status of the requesting party)	Respective Barangay			
Affidavit of no income		City Legal Office		
Photo copy of Valid ID		Client		
Exemption				
y Mayor	Client			
Present endorsement from FIHAI for validity of request		Respective Home Owners Association		
	Client			
tance)				
Medical Certificate		Local Health Office		
Valid Identification Card		Client		
Photo copy of Valid ID CLIENT STEPS AGENCY ACTION		Client		
AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1 Assess the submitted	None	5 minutes	Ernie Tambunting; Princess Gayamo;	
requirements.			Fincess Gayamo,	
1.2 Issue order of payment.				
	Simple G2C – Government to Citizen, G2B – G All Residents of the City of Imus F REQUIREMENTS In the reception Bree ation seminar conducted by Philippine Officers Ordination issued by the church Exemption y Mayor or validity of request AGENCY ACTION 1.1 Assess the submitted requirements.	Simple G2C - Government to Citizen, G2B - Government to Business All Residents of the City of Imus F REQUIREMENTS In the reception Office of the City Mayor urriage ation seminar conducted by Philippine Officers Ordination issued by the church Issuing Church Church ence of the Religious Sector Church existence of the church in the area) Present status of the requesting party) Respective Barangay Client present status of the requesting party) Respective Barangay Client present status of the requesting party) Respective Home Owners Client validity of request Respective Home Owners Client tance) Local Health Office Client Client Client Client Client Client Client Client Client Client<	Simple Contract G2C - Government to Citizen, G2B - Government to Business All Residents of the City of Imus FREQUIREMENTS WHERE TO SECURE Ithe reception Office of the City Mayor Intersception PSA Ordination issued by the church Issuing Church Church Church Intersception Church Intersception Church Intersception Respective Barangay City Legal Office City Legal Office Cilent Client Intersception Intersception Y Mayor Client Intersception Local Health Office Client Client Intersception Local Health Office Client Client Intersception Siniutes Interscepti	





2. Pay the required fee at the City	2. Receive the payment and issue the	Mayor's Certification	3 minutes	City Treasurer's Office
Treasurer's Office	O.R.	(Local) –		
		Php 50.00		
		Mayor's Certification for		
		Red Ribbon –		
		Php 150.00		
		Documentary Stamp		
2 Dresent the Official Dessint	2.4 Obeels the Official Descipt	Php 30.00	2 minutes	Drin agen Coursers of
3. Present the Official Receipt	3.1 Check the Official Receipt.	None	3 minutes	Princess Gayamo;
(OR).				Ernie Tambunting
	3.2 Process the request.	None	5 minutes	Ernie Tambunting
	3.3 Review the document.	None	3 minutes	Atty. Cristian P. Saba Arturo Pangilinan
	3.4 Present the document to the City Mayor or Chief of Staff for signature.	None	1 day	Atty. Cristian P. Saba
	3.5 Release the document.	None	2 minutes	Princess Gayamo; Ernie Tambunting
		lient Satisfaction Rating For	ſm	
Note: Turn Around Times dependence	TOTAL	Based on purpose	2 days	

Note: Turn Around Time depends on the availability of the City Mayor.





2. ISSUANCE OF MAYOR'S CLEARANCE

Mayor's Clearance is a document issued to an individual or organization that needs verification for foreign/local employment, firearms license, marriage requirements and other legal purposes.

requirements and other legal purpo	JSES.			
OFFICE OR DIVISION	Office of the City Mayor			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business			
WHO MAY AVAIL THE	All Residents of the City of Imus			
SERVICE				
	OF REQUIREMENTS		WHERE TO SECURE	
Sign up in Electric Registration fro	om the reception	Office of the City Mayor		
Barangay Clearance		Respective Barangay		
Police Clearance		Imus Main Police Station		
MTC Clearance		Municipal trial courts (Loca	/	
RTC Clearance		Regional trial courts (Loca	,	
Prosecutor Clearance		Prosecutors Office at old (City Hall	
Photocopy of Valid ID		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirement.	1.1 Assess the submitted requirement.	None	5 minutes	Princess Gayamo;
				Ernie Tambunting
	1.0 logue order of nourment			
	1.2 Issue order of payment			Princess Gayamo; Ernie Tambunting
2. Pay the required fee at City	2. Receive the payment and issue the	Mayor's Clearance for	3 minutes	City Treasurer's Office
Treasurer's Office.	O.R.	LTOPF –	3 minutes	City Treasurer's Office
Treasurer's Office.	0.1.	Php50.00		
		Mayor's Clearance for		
		Overseas Employment		
		Php150.00		
		Mayor's Clearance for		
		Tax Document for		
		Foreign Countries –		
		Php50.00		
		Mayor's Clearance for		
		Other Purposes –		
		Pho50.00		
		Php50.00		

CITIZEN'S CHARTER

	TOTAL	Based on purpose	2 days	
	Fill-out the Client	t Satisfaction Rating Form		
	3.5 Release the document	None	2 minutes	Princess Gayamo; Ernie Tambunting
	3.4 Present the document to the City Mayor for signature.	None	1 day	Atty. Cristian P. Saba Arturo Pangilinan
	3.3 Review the document.	None	3 minutes	Arturo Pangilinan Atty. Cristian P. Saba
	3.2 Process the request.	None	5 minutes	Princess Gayamo; Ernie Tambunting
3. Present the Official Receipt OR).	3.1 Check the receipt.	None	3 minutes	Princess Gayamo; Ernie Tambunting
		Documentary Stamp Php 30.00		

Note: Turn Around Time depends on the availability of the City Mayor.







3. ISSUANCE OF MAYOR'S PERMIT

Mayor's Permit is a document issued to an individual or organization stating the permission or approval to establish, operate or conduct any business, trade or activity within the city.

or activity within the city.				
OFFICE OR DIVISION	Office of the City Mayor			
CLASSIFICATION S	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business			
OFFICE OR DIVISION	Office of the City Mayor			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
Sign up in Electric Registration fro	om the reception	Office of the City Mayor		
For Mayor's Permit for MERAL				
Certificate Final Electrical Inspect	ion	Office of the Building Official		
Meralco Yellow Card		City Engineering Office		
Meralco Application Requirement	S	City Engineering Office		
Mayor's Routing Slip		City Engineering Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1.1 Assess the submitted requirements.	None	5 minutes	Princess Gayamo Ernie Tambunting
	1.2 Issue order of payment			
2. Pay the required fee at City Treasurer's Office	2. Receive the payment and issue the O.R.	Mayor's Permit for Meralco Application – Php 50.00	3 minutes	City Treasurer's Office
		Mayor's Permit for Fireworks – Php50.00		
3. Present the Official Receipt (OR).	3.1 Check the receipt.	None	3 minutes	Princess Gayamo; Ernie Tambunting
	3.2 Process the request.	None	5 minutes	Princess Gayamo; Ernie Tambunting
	3.3 Review the document.	None	3 minutes	Atty. Cristian P. Saba Arturo Pangilinan
		None	1 day	Atty. Cristian P. Saba

CITIZEN'S CHARTER

3.4 Present the document to the City			Arturo Pangilinan
Mayor for signature.	None	2 minutes	Princess Gayamo;
3.5 Release the document.			Ernie Tambunting
Fill-out th	ne Client Satisfaction Ratin	ig Form	
TOTAL	Based on purpose	2 days	

Note: Turn Around Time depends on the availability of the City Mayor







4. ISSUANCE OF MAYOR'S ENDORSEMENT/REFERRAL

Mayor's Endorsement/Referral is a correspondence provided to individuals or organizations seeking employment, sponsorship, or any form of assistance.

Office of the City Mayor	<u> </u>				
Simple					
G2C – Government to Citizen					
Office of the City Mayor					
OF REQUIREMENTS		WHERE TO SECURE			
n the reception	Office of the City Mayor				
nce					
e	Attending physician				
	Client				
or	Client				
	Client				
	Issuing School				
Request letter address to the mayor		Client			
Request letter address to mayor		Client			
	Respective barangay				
ation (First time Job seeker)					
seeker)					
Request letter address to mayor Barangay clearance					
	Respective barangay				
	Imus main police station				
	Client		-		
	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.1 Assess the submitted requirements	None	5 minutes	Princess Gayamo; Ernie Tambunting		
1.2 Process the document	None	5 minutes	Princess Gayamo; Ernie Tambunting		
1.3 Review the document	None	3 minutes	Atty. Cristian P. Saba; Arturo Pangilinan		
	Office of the City Mayor Simple G2C – Government to Citizen Office of the City Mayor OF REQUIREMENTS In the reception Ince e or or ation (First time Job seeker) seeker) AGENCY ACTION 1.1 Assess the submitted requirements 1.2 Process the document	Office of the City Mayor Simple G2C - Government to Citizen Office of the City Mayor OF REQUIREMENTS In the reception OF REQUIREMENTS In the reception Office of the City Mayor Corr Client Respective barangay Imus main police station Client Client Client AGENCY ACTION FEES TO BE PAID 1.1 Assess the submitted requirements None 1.2 Process the document	Simple G2C - Government to Citizen Office of the City Mayor Office of the City Mayor OF REQUIREMENTS Office of the City Mayor In the reception Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the City Mayor Image: the comparison of the city mayor Office of the city mayor Image: the comparison of the city mayor Office of the city mayor Image: the comparison of the city mayor		

CITIZEN'S CHARTER



	1.4 Present the document to the City Mayor	None	1 day	Atty. Cristian P. Saba;
	for the signature			Arturo Pangilinan
2. Get the document.	2. Release the documents	None	2 minutes	Princess Gayamo
				Ernie Tambunting
	Fill-out Client S	Satisfaction Rating Form		
	TOTAL	None	1 day, 15 minutes	

Note: Turn Around Time depends on the availability of the City Mayor.

5. ISSUANCE OF MAYOR'S AUTHENTICATION

Mayor's Authentication is issued to certify the authenticity of original or photocopied documents for submission to local or international agencies.

OFFICE OR DIVISION	Office of the City Mayor	office of the City Mayor			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
OFFICE OR DIVISION	Office of the City Mayor				
CHECKLIS	F OF REQUIREMENTS		WHERE TO SECURE		
Sign up in Electric Registration	from the reception	Office of the City Mayor			
Original documents to be authe	nticated	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1.1 Assess the submitted requirements.	None	5 minutes	Princess Gayamo; Ernie Tambunting	
	1.2 Issue order of payment	None	3 minutes	Princess Gayamo; Ernie Tambunting	
2. Pay the required fee at City Treasurer's Office	2. Receive the payment and issue the O.R.	Authentication (Local) – Php 50.00 Succeeding pages (Local) – Php1 0.00/page Authentication (Abroad) – Php 150.00 Succeeding pages (Abroad) – Php 50.00/page	3 minutes	City Treasurer's Office	

CITIZEN'S CHARTER



3. Present the Official Receipt	3.1 Check the receipt.	None	2 minutes	Princess Gayamo;
(OR).				Ernie Tambunting
	3.2 Process the document	None	7 minutes	Dana Garcia
	3.3 Present the document to the City Mayor for the signature	None	1 day	Atty. Cristian P. Saba Arturo Pangilinan
4. Get the document.	4. Release the document.	None	2 minutes	Atty. Cristian P. Saba Arturo Pangilinan
	Fill-out the Client S	atisfaction Rating Form		
	TOTAL	Based on purpose	2 days	

Note: Turn Around Time depends on the availability of the City Mayor.

6. REQUEST FOR MAYOR'S MATRIMONIAL SERVICES (MASS WEDDING)

The Local Chief Executive has the duty and responsibility to solemnize marriage as stated in Section 455 (b) (1) (xviii) of the Local Government Code of 1991.

OFFICE OR DIVISION	Office of the City Mayor			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C – Government to Citizen			
OFFICE OR DIVISION	Office of the City Mayor			
CHECKLIS	ECKLIST OF REQUIREMENTS WHERE TO SECURE			
Sign up in Electric registration from the reception Office of the City Mayor				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1.1 Assess the submitted requirements	None	5 minutes	Shareena Monzon
	1.2 Schedule the wedding.			
	Fill-out the Client Sa	atisfaction Rating Form		
	TOTAL	None	5 minutes	





7. REQUEST FOR MAYOR'S OATH TAKING SERVICES

Section 41 of Executive Order No. 292 otherwise known as "Instituting the Administrative Code of 1987" stated that (1) the city mayor has general authority to administer oath in the service of the government of the Philippines whose appointment is vested in the President.

	and geven more of the ramppined wheele a				
OFFICE OR DIVISION	Office of the City Mayor				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
OFFICE OR DIVISION	Office of the City Mayor				
	T OF REQUIREMENTS		WHERE TO SECURE		
Sign up in Electric registration fr	om the reception	Office of the City Mayor			
For Homeowners' Association					
List of Officers		Respective Home Owner	s Association		
	Angat IMus Homeowners' Alliance Inc.	· · ·	New City Government of Im	nus.	
(AIMHAI) or Civil Society Office					
For Barangay Officials					
Endorsement from DILG		DILG Office, 2 nd Floor, Ne	ew City Government of Imus		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1.1 Assess the submitted requirements.	None	5 minutes	Shareena Monzon	
				Jacqueline Campaña	
	1.2 Schedule the oath taking and	None	10 minutes	Jeff Purisima	
	prepare the documents		(stop time)	Atty. Cristian P. Saba	
				Nikko de Quiroz	
2. Attend scheduled oath taking	2.1 Oath Taking Ceremony	None	20 minutes	Nikko De Quiroz	
ceremony.					
	2.2 Release the oath taking documents	None	3 minutes	Nikko de Quiroz	
		atisfaction Rating Form		•	
	TOTAL	None	48 minutes		







8. REQUEST FOR FINANCIAL ASSISTANCE

The City Mayor can provide financial assistance to any individual or organization duly registered in the city for additional funding for their activities.

OFFICE OR DIVISION	Office of the City Mayor				
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE	Any association organized for public purpose	es; Any sports fest or le	ague to be conducted within	the jurisdiction of the City of	
SERVICE	Imus;		-		
	Accredited Homeowners' Associations; Orga	nizers for any competit	ions, seminars and trainings	within the jurisdiction of the	
	City of Imus				
	T OF REQUIREMENTS		WHERE TO SECUR	RE	
Sign up in Electric registration fr	om the reception	Office of the City May	or		
Financial Assistance letter addre	essed to mayor Alex Advincula	Client			
Photocopy of a Valid ID		Client			
For Trainings/Seminars/Comp	petitions				
Invitation with the date, time and venue of the event		Event Organizing Cor	nmittee		
Training Design and appropriations of any event					
For Sportsfest/League					
List of players and coaches		Client			
Certification from the Barangay	Captain attesting their participation	Respective Barangay			
Homeowners' Association					
Board Resolution stating the rec	quest	Homeowners' Association			
List of officers		Homeowners' Association			
For Barangay					
Barangay Resolution		Respective Barangay			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements	1.1 Assess the request letter.	None	5 minutes	Princess Gayamo; Ernie Tambunting	
	1.2 Present the letter to the City Mayor/Chief of staff for notation.	None	1 day	Atty. Cristian P. Saba Jeffrey Purisima Arturo Pangilinan	
	1.3 Forward the noted letter of request for processing	None	3 minutes	Cecille Altamira	





	1.4 Process the financial assistance.	None	3 days	City Treasurer's Office
2. Submit the Official Receipt	2. Release of Check	None	3 minutes	City Treasurer's Office
(O.R.)				
	Fill-out the Client S	Satisfaction Rating For	n	
	TOTAL	None	4 days, 11 minutes	

NOTE: An individual or entity may be granted of financial assistance only once every quarter as long as their purpose is within the guidelines or subject for evaluation.

9. REQUEST FOR SCHOLARSHIP ASSISTANCE (COLLEGE)

OFFICE OR DIVISION	Office of the City Mayor				
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE	All residents in the City of Imus				
SERVICE					
CHECKLIS	T OF REQUIREMENTS		WHERE TO SEC	URE	
Sign up in electric registration from		Office of the City Ma	ayor		
Duly Accomplished Scholarship Ir	formation/Evaluation Form	Office of the City Ma	ayor		
Letter Request addressed to the r		Client			
Registration form or Breakdown o		School/University			
	of grades with general weighted average in	School/University			
percentage equivalent.					
Proof of income		Client			
Barangay Indigency (Original Cop		Respective barangay			
Official receipt from previous sem	ester (existing scholars).	Client			
Ids of both guardian and student.	-	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirements.	1. Check the requirements of the client for qualification and verification.	None	10 minutes	Jeanel Tabilisima; Marinella Nisseah Asturias; Joyce Ilano	
2. Enroll to electric registration.	2. Input data of the client to Electric registration system	None	5 minutes	Princess Gayamo; Ernie Tambunting	
3. Submit the requirements	1.1 Assess the requirements	None	5 minutes	Jeanel Tabilisima; Marinella Nisseah Asturias;	
	1.2 Interview the client.	None	5 minutes	Joyce Ilano	

CITIZEN'S CHARTER



	1.3 Set schedule for release.	None	3 minutes (stop time)		
Fill-out the Client Satisfaction Rating Form					
	TOTAL	None	28 minutes		

NOTE: Schedule for release varies depending on the availability of the allotted fund for scholarship.







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OFFICE OF THE CITY MAYOR INTERNAL SERVICES







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1. DOCUMENTS FOR SIGNATURE OF THE LOCAL CHIEF EXECUTIVE

Most outgoing documents require the signature of the Local Chief Executive. The office mandatory records all documents to be signed by the City Mayor.

0 0	1 5		5		
OFFICE OR DIVISION	Office of The City Mayor				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C	G2G – Government to Government, G2C – Government to Citizen, G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All employees of the City Government of	Imus; All residents in the	City of Imus		
CHECKLIST C	F REQUIREMENTS WHERE TO SECURE				
Document for signature	Client; Respective Departments/Offices				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the documents	1.1 Record the submitted documents	None	3 minutes	Jaqueline Campaña; Shareena Monzon	
	1.2 Present the document to the City Mayor for the signature	None	1 day		
2. Receive the document.	2. Release the document	None	3 minutes	Jaqueline Campaña; Shareena monzon	
	Fill-out the Client Sa	tisfaction Rating Form			
	TOTAL	None	1 day, 6 minutes		

NOTE: Time varies depending on the availability of the City Mayor.





CITY ADMINISTRATOR'S OFFICE EXTERNAL SERVICES







1. SCHEDULING OF APPPOINTMENT TO THE CITY ADMINISTRATOR

OFFICE OR DIVISION	City Administrator's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B –	Government to Business, G20	G – Government to Govern	nment		
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST OF	REQUIREMENTS		WHERE TO SECURE			
Request Letter addressed to the City	Mayor or City Administrator	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the request letter and wait for the scheduled meeting.	 1.1 Assess the request letter. 1.2 Inform the City Administrator regarding the request 1.3 Finalize the schedule 1.4 Inform the client 	None	45 minutes 1 day (stop time)	Admin Staff assigned in the window Ma. Blesilda Bautista, Ma. Carmela Jimenez		
2. Attend the scheduled meeting.	2. Assist the client.	None	5 minutes			
	Fill-put Client S	Satisfaction Rating Form				
	TOTAL Based on assessment 2 days					

*Schedule of meeting depends on the availability of the City Administrator.







2. ISSUANCE OF GOVERNMENT PERMITS FOR ACTIVITIES AND RENTAL OF FACILITIES

The City Administrator's Office issue permits for the clients who wants to rent government facilities like the Imus Sports Complex, Bulwagan, Imus Plaza and Imus City Grandstand.

and infus only orandstand.						
OFFICE OR DIVISION	City Administrator's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST OF F	REQUIREMENTS		WHERE TO SECURE			
Request Form		City Administrator's Office				
Request Letter addressed to the City	Mayor or City Administrator	Client				
Government-issued ID		Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit requirements	1.1 Assess the requirements and check for the availability of the facility.	None	3 minutes	Cecil Reyes		
	1.2 Issue order of payment.	None				
2. Pay prescribed fee at City Treasurer's Office.	2. Receive payment and issue Official Receipt (OR).	Based on Purpose	5 minutes	City Treasurer's Office's assigned Window/s (10 – 13)		
3. Present Official Receipt (OR).	3.1 Input information on the Templated Form	None	3 minutes	Cecil I. Reyes		
	3.2 Signature of the City Administrator	None	2 minutes (stop time)	Hertito V. Monzon City Administrtator		
4. Claim permit.	4. Release permit.	None	2 minutes	Cecil I. Reyes		
	TOTAL	Based on assessment	15 minutes			

NOTE: Signing of the permit depends on the availability of the City Administrator.

Fees for the City Sports Complex

Rental	Rate/Hour
With Aircon	P 10,000.00
Without Aircon	P 2,000.00
Ambulant Vendors (in designated area)	P 250/day





Penalties: Any person who violates the regulations of the City Sports Complex shall be penalized by a fine not less than P1,000.00 but not more than P2,500.00, or an imprisonment for not more than six (6) months or both at the discretion of the court.

Source		Rate					
	Hour	Commercial/Private Companies	Other LGU/Government Institutions	Succeeding Hours			
Sportsfest	6	P 20,000.00	P 10,000.00	P 1,000.00			
Fun Run	Min 3	P 10,000.00	P 10,000.00				
Practice/Training	Per Hour	P 1,000.00	P 500.00				
Football Tournament	6	P 20,000.00	P 10, 000.00	P 1,000.00			
Football Practice	P200/head						
Lighting (per bulb)	P 200/bulb/hour						

Source				Rate		
	Hour	Priv	/ate Schools	Pul	blic Schools	Succeeding Hours
		Within Imus	Outside Imus	Within Imus	Outside Imus	
Sportsfest	6	Free	P 8,000.00	Free	P 8,000.00	P 1,000.00
Fun Run	Min 3	P 5,000.00	P 10, 000.00	P 5,000.00	P 10, 000.00	
Practice/Training	Per Hour	Free	P 50.00/head	Free	P 50.00/head	
Football Tournament	6	Free	P 15, 000.00	Free	P 15, 000.00	P 1,000.00
Football Practice	P 200/head	Free		Free		

Source		Rate				
	Hour	Residents	Non-residents			
Fun Run	Min 3	P 5,000.00	P 10,000.00			
Practice/Training	Per Hour	Free	P 50/head			
Football Tournament	6	P 10, 000.00	P 15, 000.00			
Football Practice	P 200/head	Free				
Walk-in		Free with Government Issued ID or apply for Grand Stand Privileged ID	P 25/head			

Penalties: Any person who violates the regulations of the City Sports Complex shall be penalized by a fine not less than P 500.00 but not more than P2,000.00, or an imprisonment for not more than six (6) months or both at the discretion of the court.

CITIZEN'S CHARTER



Source	Rate
Ambulant Vendors (in designated area)	P 250/day

Fees for Conduct of Group Activities

Activities	Rate
Conference, meetings, rallies, and demonstration in outdoor, in parks, plazas, road/streets	P 100/hour
Dances	P 200/hour
Coronation and Ball	P 200/hour
Promotional Sales	P 100/hour
Motorcade	P 20/vehicle
Other	P 100/hour

Exemption: Programs or activities conducted by educational, charitable, religious, and governmental institutions free to the public shall be exempted from the payment of the fee herein imposed, provided, that the corresponding Mayor's Permit shall be secured accordingly. Programs or activities requiring admission fees for attendance shall be subject to the fees herein imposed even if they are conducted by exempt entities.







3. COMPLAINTS MANAGEMENT

The City Administrator's Office is the repository department of the complaints received through different channels link Contact Center ng Bayan, 8888, Presidential Complaint Center and the likes.

residential Complaint Center and the	E IIKES.					
OFFICE OR DIVISION	City Administrator's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business, G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST OF	REQUIREMENTS		WHERE TO SECURE			
Complaint Letter	Complainant, Contact Center ng Bayan, Presidential Complaint Ce Tape Authority, other offices and agencies.			omplaint Center, Anti-Red		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL		
1. Submit requirements	1.1 Receive and assess the complaint letter.	None	5 minutes	Jac Jac Campat Lea Solidum		
	1.2 Prepare memorandum for signature.	None	5 minutes			
	1.3 Signature of the City Administrator.	None	2 minutes	Hertito V. Monzon City Administrator		
	1.4 Issue memorandum to concerned department, agency, or institution.	None	5 minutes (stop time)	Lea Solidum		
	1.5 Wait for the response or resolution.	None	2 days			
2. Receive the copy of the response through the e-mail of the complainant or different government complaint centers.	2. Copy furnish the response of the concerned department, agency or institution.	None	5 minutes	Jac Jac Campat Lea Solidum		
•	TOTAL	None	3 days			

NOTE: Turn Around Time may vary due to the response of the concerned department.





4. ASSISTANCE TO ACADEMIC RESEARCH, THESIS AND STUDIES

OFFICE OR DIVISION	City Administrator's Office	City Administrator's Office					
CLASSIFICATION	Simple	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen						
WHO MAY AVAIL THE SERVICE	Students						
CHECKLIST OF	REQUIREMENTS		WHERE TO SECURE				
Request Letter		Client					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1. Submit request letter	1.1 Review the study for approval	None	10 minutes	Jac Jac Campat			
	1.2 Verify availability of data/information to concerned department	None	5 minutes	Jac Jac Campat			
2. Wait for the requested data/information via email.	2. Send the requested data/information through official email.	None	1 day	Jac Jac Campat			
	TOTAL	None	1 day, 15 minutes				

NOTE: Turnaround time depends on the availability of data/information.







5. CCTV ASSISTANCE

OFFICE OR DIVISION	City Administrator's Office	City Administrator's Office				
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B -	- Government to Business, (G2G – Government to Gover	rnment		
WHO MAY AVAIL THE SERVICE	All					
CHECKLIST OF	REQUIREMENTS		WHERE TO SECURE			
CCTV Request Form	City Administrator's Office					
Police/Court Order (if to be used as	as legal evidence) Philippine National Police, Regional Trial Court					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Fill-out CCTV Request Form	1.1 Accommodate client and interview for pertinent information	None	10 minutes	Jac Jac Campat		
	1.2 Approve CCTV Assistance request	None	2 minutes	Hertito V. Monzon City Administrator		
2. View CCTV in CSU	2. Assist client (if possible)	None	5 minutes	Jac Jac Campat		
	TOTAL	None	17 minutes			







CITY ADMINISTRATOR'S OFFICE INTERNAL SERVICES







1. ISSUANCE OF TRAVEL ORDER FOR OFFICIAL BUSINESS

OFFICE OR DIVISION	City Administrator's Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All employees of the city government					
CHECKLIST O	F REQUIREMENTS		WHERE TO SECURE			
Travel Order Form	City Administrator's Office					
Letter of Invitation	Event Organizing Committee					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the requirements.	1.1 Assess the requirements.	None	2 minutes	Cecil I. Reyes		
	1.2 Prepare Travel Order.	None	4 minutes			
	1.3 Approve and sign the Travel Order.	None	5 minutes	Hertito V. Monzon City Administrator		
2. Claim Travel Order.	2. Release Travel Order	None	2 minutes	Cecil I. Reyes		
	TOTAL	None	20 minutes			

NOTE: Signing of the Travel Order depends on the availability of the City Administrator.







2. ISSUANCE OF TRAVEL ORDER FOR TRAINING AND SEMINAR

OFFICE OR DIVISION	City Administrator's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All employees of the city government				
CHECKLIS ⁻	F OF REQUIREMENTS		WHERE TO SECURE		
Travel Order Form		City Administrator's Offic	e		
Letter of Invitation	-	Event Organizing Comm	ittee		
CLIENT STEPS	AGENCY ACTION	AGENCY ACTION FEES TO BE PAID PROCESSING TIME PER			
1. Submit the requirements.	1.1 Assess the requirements and prepare for Memorandum of Training.	None	5 minutes	Van Carlyne Rocha (HRMU)	
	1.2 Transfer memorandum to City Administrator's Office for approval and signature.	None	5 minutes		
	1.3 Approve and sign the Memorandum of Training.	None	5 minutes	Hertito V. Monzon City Administrator	
	1.4 Input information on the templated form.	None	3 minutes	Cecil I. Reyes	
	1.5 Sign the Travel Order.	None	2 minutes	Hertito V. Monzon City Administrator	
2. Claim Travel Order.	2. Release Travel Order.	None	2 minutes	Cecil I. Reyes	
	TOTAL	None	22 minutes		

NOTE: Signing of the Travel Order depends on the availability of the City Administrator.





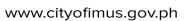
3. ISSUANCE OF BIOMETRIC EXEMPTION

OFFICE OR DIVISION	City Administrator's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All the department and unit heads of the city	government		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
Letter request addressed to City May	/or/City Administrator indicating the name of	Respective department/off	ices	
the employees to be given a biometr	ic exemption.			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirement.	1.1 Assess the requirement.	None	2 minutes	Cecil I. Reyes
	1.2 Prepare biometric exemption memorandum.	None	4 minutes	
	1.3 Approve and sign the Memorandum of Biometric Exemption.	None	5 minutes	Hertito V. Monzon City Administrator
2. Claim Biometric Exemption.	2. Release Memorandum.	None	2 minutes	Cecil I. Reyes
	TOTAL	None	13 minutes	

NOTE: Signing of the biometric exemption depends on the availability of the City Administrator.







4. ISSUANCE OF MEMORANDUM, EXECUTIVE ORDER, NOTICE OF MEETING AND GUIDELINES

OFFICE OR DIVISION	City Administrator's Office				
CLASSIFICATION	Complex	Complex			
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/offices in the city governme	All departments/offices in the city government			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECURE		
Letter request addressed to City Mayo for the issuance of the subject matter.	or/City Administrator indicating the purpose/s	Respective department/o	ffices		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirement.	1.1 Assess the requirement.	None	2 minutes	Lea Solidum; Ma. Carmela Jimenez	
	1.2 Prepare Memorandum, Executive Order, Notice of Meeting, Guidelines.	None	2 days		
	1.3 Review, approve and sign the Memorandum, Executive Order, Notice of Meeting, Guidelines.	None	1 day	Hertito V. Monzon City Administrator	
2. Receive Memorandum, Executive Order, Notice of Meeting, Guidelines.	2. Issue and disseminate Memorandum, Executive Order, Notice of Meeting, Guidelines.	None	1 day	Nelson Dua	
	TOTAL	None	2 days		

NOTE; Turn Around Time may vary due to the level of Memorandum, Executive Order, Notice of Meeting, Guidelines.





5. REQUEST FOR CERTIFIED TRUE COPY OF OFFICE PERFORMANCE COMMITMENT AND REVIEW (OPCR)

OFFICE OR DIVISION	Office of the City Administrator			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE All departments/offices in the city government				
CHECKLIST C	OF REQUIREMENTS	WHERE TO SECURE		
Request Letter addressed to the PM	T Chairperson/ City Administrator	Respective departments/offices		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the document.	1.1 Assess and record the submitted	None	5 minutes	Rodavil A. Jacama
	document.			
	1.2 Approve and sign the document.	None	15 minutes	
2. Receive the document.	2. Release the document.	None	2 minutes	Rodavil A. Jacama
	TOTAL	None	22 minutes	

NOTE: Request for a Certified True Copy of the OPCR depends on the availability of the document and final rating.







6. DOCUMENTS FOR SIGNATURE OF THE CITY ADMINISTRATOR

OFFICE OR DIVISION	City Administrator's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All departments/offices in the city governme	ent		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
Document for Signature		Respective departments/of	fices	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the document.	1.1 Assess and record the submitted document.	None	5 minutes	Juvy dela Cruz; Francheska Alquinto; Ma. Carmel Jimenez; Ma. Blesilda Bautista
	1.2 Present the document to the City Administrator for signature.	None	5 minutes	
	1.3 Approve and sign the document.	None	30 minutes	Hertito V. Monzon City Administrator
2. Receive the document.	2. Release the document.	None	3 minutes	Juvy dela Cruz; Francheska Alquinto; Ma. Carmel Jimenez; Ma. Blesilda Bautista
	TOTAL	None	43 minutes	

NOTE: Signing of the document may vary due to number of documents to be signed and the availability of the City Administrator.





CIVIL SECURITY UNIT EXTERNAL SERVICES







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1. REQUEST FOR SECURITY ASSISTANCE

The unit will provide security assistance to maintain the peace and order situation at the place of engagement, it will also conduct security inspection in the area to avoid/ preempt any incident that may arise during event/activity/occasion.

OFFICE OR DIVISION	Civil Security Unit			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G – Government to Government,	G2C – Government to	Citizen	
WHO MAY AVAIL THE SERVICE	All		0.000	
	REQUIREMENTS		WHERE TO SECU	RE
Barangay Clearance (2) copies (G2		Office of the Punone	Barangay from the place of V	
Letter request from the requesting o				and endorsed to Civil Security Unit
copies)	.gaa	to provide security p		
Letter request from National Govern G2G (2 copies)	ment/ Local Government Unit for			and endorsed to CSU to provide
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Letter Request	1. Receive Letter Request	None	3 minutes	Leonora Lacson Bookbinder III, CSU
2. Interview with Staff concerned	2. Assess need for security	None	10 minutes	Antonio Baniasia Ernesto Herrera Investigator/Intel
3. Receive approval/ disapproval of Request	3. Approval/Disapproval of Request	None	2 minutes	Hertito V. Monzon OIC, Chief Security
	Fill-out the Clie	ent Satisfaction Rating	Form	
	TOTAL	None	15 minutes	





2. REQUEST FOR INVESTIGATION AND POLICE ASSISTANCE

The Unit accept request to conduct investigation on matters related to Pilferage, Abuse of Authority, Violation of the existing laws implementing Rules and regulation and local ordinances committed by the City Government employees or a person or group of persons in cahoots with the government employee/s.

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OFFICE OR DIVISION	Civil Security Unit			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G – Government to Government,	G2C – Government to Ci	tizen	
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST OF	REQUIREMENTS		WHERE TO SECU	RE
Letter of complaint from complainan	t requesting investigation.	Client		
List of witnesses if there is any		CSU investigator on cas	Se	
Documentary and Material evidence	es if there is any	Client		
Personal appearance of complainant	it and his/her witnesses.	Client		
•	, telephone call for Police assistance	Client		
and/or personal appearance reques	ting Police assistance			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Letter of Complaint	1. Received letter of Complaint	None	3 minutes	Leonora Lacson Bookbinder III, CSU
2. Interview with the complainant and/or his/her authorized representative	2. Assess the complaint and conduct initial investigation and refer to the PNP if necessary	None	30 minutes	Antonio Baniasia Ernesto Herrera Investigator/Intel, CSU
3. Received letter of endorsement address to the PNP to conduct full investigation.	1.1	None	15 minutes (stop time)	Hertito V. Monzon OIC, Chief Security
4. Received approval of complete investigation by CSU	4. Approval to conduct complete investigation	None	(stop time)	Hertito V. Monzon OIC, Chief Security
	TOTAL	None	48 minutes	







CIVIL SECURITY UNIT EXTERNAL SERVICES







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1. REQUEST FOR ISSUANCE OF ID OF CSU AND BANTAY BAYAN ID

The unit issue identification Cards to a member of Civil Security Unit, Bantay Bayan, Civil Volunteers Organization.

OFFICE OR DIVISION	Civil Security Unit			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government; G	2C – Government to Citi	zen	
WHO MAY AVAIL THE SERVICE	Civilian members of CVO; Members of	f Bantay Bayan of the Ba	rangays; CSU personnel	
CHECKLIST OF	REQUIREMENTS		WHERE TO SECU	JRE
Letter request for the issuance of Ide	entification Card	Punong Barangay of re	spective Barangays	
Bio-data		Client		
Pictures (1 pc 2x2 and 2 pc 1x1)	s (1 pc 2x2 and 2 pc 1x1) Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Letter Request	1. Received letter request	None	3 minutes	Leonora Lacson Bookbinder III, CSU
2. Interview with the requesting party concerned	2. Reviewed the submitted documents for any pass over or neglected items	None	3 minutes	Donnabelle Gollayan Messenger, CSU
3. Receive approval/disapproval of request	3. Approval/Disapproval of Request	None	2 minutes	Hertito V. Monzon OIC, Chief Security
	Fill-out the Clien	t Satisfaction Rating For	m	
	TOTAL	None	8 minutes	





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HUMAN RESOURCE AND MANAGEMENT OFFICE EXTERNAL SERVICES







1. RECRUITMENT, SELECTION, AND PLACEMENT

Vacant positions in the City Government of Imus are posted in the following areas: a) HRMO bulletin board, b) Public Employment Service Office (PESO) bulletin board, c) Imus Public Market bulletin board. Vacant positions are also posted in the CSC Job Portal and City of Imus website. Application is open to all who meet the qualifications of the position to be filled. A Human Resource Merit Promotion and Selection Board (HRMPSB) screens and evaluates all qualified applicants and submits the list of candidates recommended for appointment to the Appointing Authority.

		g			
OFFICE OR DIVISION	Human Resource Management Office				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen, G2G – Go	overnment to Governi	ment		
WHO MAY AVAIL THE	All qualified applicants				
SERVICE					
CHECKLIST OF REQUI	REMENTS FOR APPLICATION		WHERE TO S	ECURE	
Letter of Intent addressed to the C	City Mayor for Executive Positions or the	Applicant			
City Vice Mayor for Legislative Po	sitions (1 original copy)				
Duly Accomplished Personal Data	a Sheet [CSC Form No. 212, Rev. 2017]	Downloadable at CS	SC website (csc.gov.ph)		
(1 original copy)					
Certificate of Eligibility [if necessar	ry] (1 authenticated copy)	CSC Regional Office	Э		
License [if necessary] (1 photocop	py)	LTO, PRC, SC			
Transcript of Records (TOR) (1 au	thenticated/certified copy)	School/university that applicant attended to			
One (1) Valid I.D. (1 photocopy)		BIR, Post Office, DFA, PSA, SSS, GSIS, Pag-Ibig			
Performance Rating, in case of p	promotion or transfer (1 original/certified	HRMO; Home Agency prior to application			
copy)					
CHECKLIST OF REQUIREMENT	S FOR APPOINTMENT	WHERE TO SECURE			
Medical Certificate [CS Form No. 2	211, Rev. 2017] (2 original copies)	HRMO; to be filled out by Licensed Physician			
Clearance (1 original copy)		NBI			
Certificate of Live Birth (1 original	сору)	PSA, City Civil Registrar's Office			
Marriage Contract/Certificate, if m	arried (1 original copy)	PSA, City Civil Regi	strar's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE	PROCESSING TIME	PERSON RESPONSIBLE	
		PAID			
1. Submit complete requirements	1.1 Receive application and conduct	None	5 minutes	Aerole Micah Paredes	
for application	pre-screening based on qualifications			Terry Joie Alexis Juntoria	
	and requirements. If qualified, inform			-	

CITIZEN'S CHARTER



	the applicant of the written examination schedule			
	1.2 Prepare materials and set the written examination schedule		Schedule varies per position	Sabrina Summer Medina Marjane Alexa Santos Aerole Micah Paredes Angelica Sañez Terry Joie Alexis Juntoria
2. Take written examination and undergo initial interview	2.1 Administer written examination	None	1 hour	Angelica Sañez Terry Joie Alexis Juntoria
	2.2 Check and rate the written examinations. If passed, inform the applicant of the schedule for initial interview		2 hours	Sabrina Summer Medina Marjane Alexa Santos
	2.3 Conduct initial interview		Schedule varies per position	Aerole Micah Paredes, Sabrina Summer Medina Marjane Alexa Santos Angelica Sañez Terry Joie Alexis Juntoria
	2.4 Prepare materials and set the HRMPSB screening and evaluation schedule		10 days (50 applicants)	Aerole Micah Paredes Angelica Sañez Terry Joie Alexis Juntoria
3. Undergo HRMPSB screening and evaluation	3.1 Conduct final screening of the applicant	None	1 day	Human Resource Merit Promotion and Selection Board
	3.2 Check, prepare and finalize Comprehensive Evaluation Result		7 days	Aerole Micah Paredes

CITIZEN'S CHARTER

	TOTAL	None	Timeline varies per position	
5. Claim acted appointment from the CSC	5.1 Furnish appointee with the appointment acted by the CSC		1 day	Angelica Sañez
	Civil Service Commission for approval			Terry Joie Alexis Juntoria
	4.2 Process and submit appointment and other pertinent documents to the		30 days	Aerole Micah Paredes Angelica Sañez
				Terry Joie Alexis Juntoria
for appointment	successful applicants			Angelica Sañez
4. Submit complete requirements	selected by the Appointing Authority 4.1 Receive complete requirements of	None	2 weeks	Aerole Micah Paredes
	3.5 Inform the successful applicant			
	Comprehensive Evaluation Report		5 minutes	Aerole Micah Paredes
	3.4 Select appointee based on the			
	3.3 Conduct background investigation		10 days	Angelica Sañez Appointing Authority
	screening and deliberation		3 days (per applicant)	Aerole Micah Paredes Terry Joie Alexis Juntoria
	based on the result of the HRMPSB			Assols Missle Davadas

Notes:

*The Comprehensive Evaluation Report is submitted to the Appointing Authority to serve as guide in choosing the candidate who can efficiently discharge the duties and responsibilities of the vacant position. The report specifies the top five ranking candidates whose overall scores are comparatively at par based on the following:

- a. performance
- b. education and training
- c. experience and outstanding accomplishments
- d. psycho-social attributes and personality traits
- e. potential

The report also includes observations and comments on the candidate's competence and other qualifications that are important in the performance of the duties and responsibilities of the vacant position to be filled.

**Applications for vacant positions under Ospital ng Imus (ONI) must be submitted and processed at the ONI- HR office.





JOB ORDER EMPLOYMENT

Government agencies may hire job-order employees under the provisions of the CSC-COA-DBM Joint Circular No. 1, s. 2017. The hiring of job-order employees in the City must be with the approval of the City Mayor.

OFFICE OR DIVISION CLASSIFICATION	Human Resource Management Office Complex			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE	All qualified applicants			
SERVICE				
CHECKLI	ST OF REQUIREMENTS		WHERE TO S	ECURE
Duly Accomplished Personal	Data Sheet [CSC Form No. 212, Rev. 2017]	Downloadable at CS	SC website (csc.gov.ph)	
(1 original copy)				
Certificate of Live Birth or Ma	rriage Certificate (1 photocopy)	py) PSA		
Clearance (1 original copy)		NBI, Police Station		
Community Tax Certificate (C	edula) for employment (1 photocopy)	City Treasury Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE	PROCESSING	PERSON RESPONSIBLE
		PAID	TIME	
1.Submit complete	1.1 Receive and assess the application	None	1 month	Office of the Mayor
requirements				
	1.2 Endorse to the HRMO the list of			
	accepted applicants and their respective			
	designation and payroll			
2. Sign Contract of Service	2.1 Prepare and facilitate signing of	None	15 days	Marjane Alexa Santos
	Contract of Service			Aimelete Maliksi
	TOTAL	None	1 month 15 days	

Note: Due to mass hiring/renewal of job order employees, timeline is also extended.





ON-THE-JOB TRAINING

Applications for On-the-Job Training are referred to different departments/units that are most related to the Degree Program of the student applicant. **STAGE 1. APPLICATION**

STAGE 1. APPLICATION				
OFFICE OR DIVISION	Human Resource Management Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE	All college level students and graduate degree program students / Graduating Senior High School Students			
SERVICE				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Resume/Curriculum Vitae (1 original copy) with two (2) pcs of 2x2 picture		Applicant		
Letter of Intent addressed to Mayor		Applicant		
Endorsement Letter (1 original copy)		School/university where applicant is currently enrolled		
Medical certification		Clinic/Hospital		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit comple	e 1.1 Receive and assess the documents.	None	10 minutes	Evelyn B. Royo
requirements.	Encode the application to database.			
			1 day	Evelyn B. Royo
	1.2 Endorse the application to the City Mayor's			
	Office for approval.			
			1 day	Office of the City Mayor
	1.3 Review the application and . Inform HRMO			
	of the acceptance of the student			
	1.4 Endorse MOA to legal department for		1 day	Evelyn B. Royo
	review			
	1.5 Transmit approved MOA to the City		1 day	Evelyn B. Royo
	Mayor's Office for signature			
			10 minutes	Fucher D. David
	1.6 Prepare Endorsement Letter to selected		10 minutes	Evelyn B. Royo
	department			

CITIZEN'S CHARTER



	. 1.7 Sign the endorsement letter		5 minutes	Kathryn Ann Pantig
	1.8 Review the application and . Inform HRMO of the acceptance of the student			Respective Department/ Unit Head
	. 1.9 Inform the applicant of the result of application			Evelyn B. Royo
2. Report for duty	Orient the student intern and endorse to the respective department/unit		30 minutes	Evelyn B. Royo
	TOTAL	None	7 days, 25 minutes	

Note:

Stage 1 ends upon first day of duty. The duration of the On the Job Training is no longer included in the processing time. During this period, HRMO monitors the student trainee and coordinates with school coordinator.

STAGE 2. COMPLETION OF ON THE JOB TRAINING

OFFICE OR DIVISION	Human Resource Management Office					
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2C – Government to Citizen					
WHO MAY AVAIL THE SERVICE	All students that underwent On the Job Training under the City Government of Imus					
CHECKLIST	OF REQUIREMENTS WHERE TO SECURE					
Daily Time Record (1 original copy)	Accomplished by student intern, signed by respective department/unit head			ective department/unit head		
Evaluation Form (1 original copy)		School prescribed form, to be rated by immediate supervisor during internship				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit complete requirements:	1.1 Receive and assess the documents.1.2 Prepare Certificate of Completion	None	15 minutes	Evelyn B. Royo		
	1.3 Sign the Certificate of Completion		3 days	Hon. Alex A. Advincula		

CITIZEN'S CHARTER



				City Mayor
2. Receive Certificate of Completion with attached DTR and	2.1 Issue Certificate of Completion		1 minute	Evelyn B. Royo
Evaluation Report				
	TOTAL	None	3 days, 16 minutes	

Note : Signing timeline may vary due to the volume of documents for signature.







HUMAN RESOURCE AND MANAGEMENT OFFICE EXTERNAL SERVICES







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1. LEAVE APPROVAL

City Government employees are entitled to an equivalent of 30 leave credits annually, together with other mandated leave benefits, which can be classified as follows:

Commonly Availed Types of Leave

- 1. Vacation Leave
- 2. Sick Leave
- 3. Forced Leave
- 4. Maternity Leave
- 5. Paternity Leave
- 6. Solo Parent Leave
- 7. Special Privilege Leave

Other Types of Leave:

- 1. Magna Carta for Women (R.A. 9710)
- 2. Anti-Violence Against Women and Children (VAW-C) Leave
- 3. Rehabilitation Leave

OFFICE OR DIVISION	Human Resource Management Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government	t			
WHO MAY AVAIL THE SERVICE	All officials; permanent, temporary	and casual employees of the City Government of Imus			
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE			
Accomplished Application for Leave original copies)	[CSC Form No. 6, Rev. 1984] (3	Human Resource Management Office			
Additional Requirements per Type of	Leave				
Vacation Leave Abroad					
Clearance Form (3 original copies	5)	Human Resource Management Office			
Affidavit of No Pending Case (3 o	riginal copies)	Human Resource Management Office			
Sick Leave (more than 5 days)					
Medical Certificate (1 original cop	y)	Licensed Physician			
Sick Leave (more than 30 days)					
Medical Certificate (1 original of	copy)	Licensed Physician			
Clearance Form (3 original copies)		Human Resource Management Office			
Maternity Leave					
CSC Prescribed Medical Certifica	te Form (2 original copies)	HRMO; to be filled out by Licensed Physician			

CITIZEN'S CHARTER

Clearance Form (3 original copie	es)	Human Resource Ma	nagement Office			
Paternity Leave Birth Certificate of Child (1 photo		City Civil Registrar's Office				
CSC Prescribed Medical Certific			t by Licensed Physician			
Solo Parent Leave						
Solo Parent I.D. (1 photocopy)		City Social Welfare D	evelopment Office			
Magna Carta for Women (R.A. 971	0)					
Medical Certificate (1 original co	ру)	Licensed Physician				
Anti-Violence Against Women and	Children (VAW-C) Leave	Barangay or Court wh	nere the case is filed			
Barangay Protection Order or Te Protection Order (if protection or Certification from Brgy. Captain certified copy) OR	rder is not yet issued, secure	Philippine National Po	olice Station			
Police Report (1 original copy) Medical Certificate		Licensed Physician				
Rehabilitation Leave Police Report (1 original copy) Certificate of Attendance during happened (1 original copy)	which the accident	Philippine National Police Station Human Resource Management Office				
Certification of the Department F	•	Department/Unit where employee is reporting to)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit accomplished Application for Leave Form and corresponding attachments	1.1 Receive and assess the application	None	2 minutes	Emma Camino Aimelete Maliksi		

CITIZEN'S CHARTER

	TOTAL	None	1 day, 18 minutes	
2. Receive approved Leave Form	2.1 Issue approved Leave Form	None	1 minute	Emma Camino
	1.4 Update employee's Leave Card			
			5 minutes	Emma Camino
				City Administrator
	1.3 Approval of the application		T day	Hertito V. Monzon
	1.2 Certify available leave credits		1 day	Kathryn Ann Pantig
			10 minutes	

Notes:

*Application for Vacation Leave, Forced Leave, and Solo Parent Leave must be submitted at least five (5) days before the intended leave date.

**Application for Sick Leave must be submitted within one (1) day upon return to duty.

***Additional information for the other types of leave may be inquired through Ms. Emma Camino and Ms. Annie de Leon.





2. STUDY LEAVE GRANT

Officials and employees of government agencies may apply for Study Leave with pay pursuant to Section 68 of Civil Service Commission Memorandum Circular No. 14 series of 1999, as amended.

OFFICE OR DIVISION	Human Resource Management Office				
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All permanent employees of the City Governn	nent of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE T	O SECURE	
Letter Request (1 original copy)		Employee applicant			
Department/Unit Head letter recomm	nendation and approval to avail of Study Leave	Department/Unit where	e employee is reporting to)	
(2 original copies)					
School Certification and/or enrolm	nent form, copy of Board/Bar examination	School/university wher	e employee is enrolled		
application and/or official receipt a	as proof to the purpose of Study Leave (2				
photocopies)					
HRMO Certification indicating emp	oyee has rendered at least two (2) years of	Human Resource Man	agement Office		
-	ry performance for the last two rating periods				
immediately preceding the application					
-	Council (HRDC) Certification approving the	Human Resource Development Council (HRDC) Secretariat (HRMO-L & D Section)			
	d indicating the conditions/provisions included				
on the approval of said leave.					
1 0	ive and/or criminal charges (3 original copies)	Human Resource Management Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit complete requirements.	1.1 Receive and process the application.	None	2 minutes	Evelyn B. Royo	
	4.0 Deview and institute of an analysis is a				
	1.2 Review application. If approved, issue		5 days	Human Resource Development Council	
	HRDC Certification that employee is				
	qualified to avail of Study Leave				
			4 -1-	Evelyn B. Royo	
			1 day		

CITIZEN'S CHARTER



	1.3 Facilitate the signing of Memorandum of Agreement (MOA)		10 minutes	Emma Camino
	1.4 Update employee's leave card and process the leave form			
2. Receive approved Leave Form and copy of MOA	2.1 Issue approved Leave Form and copy of MOA	None	1 minute	Emma Camino
	TOTAL	None	6 days,13 minutes	







3. SERVICE RECORDS, CERTIFICATES OF EMPLOYMENT, AND OTHER HRMO CERTIFICATIONS

City Government employees may request for copies of Service Records, Certificate of Employment, and other Certifications from the Human Resource Management Office.

OFFICE OR DIVISION	Human Resource Management Offic	Human Resource Management Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE					
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE	
None		Not applicable			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Request for copy of Service	1.1 Entertain request and issue	None	2 minutes	Jamie Ma. Coll	
Record/ Certification	Order of Payment				
2. Pay the required fee at the City	2.1 Receive the Official Receipt.	Certification Fee -	10 minutes	Rossana Parnala	
Treasury Office and submit to the	Process the request, verify records	Php 50.00		Joan Mary Crisostomo	
HRMO the Official Receipt	and update if necessary. 2.2	Documentary			
	Submit the document for signature	Stamp Tax –			
		Php 30.00			
	2.2 Sign the document		1 day	Kathryn Ann Pantig	
	<u> </u>	Nana	,		
3. Receive the requested document	-		1 minute	Jamie Ma. Coll	
	TOTAL	Php 80.00	1 day, 13 minutes		





5. TRAINING APPROVAL

Officials and employees of the City Government to attend/organize training programs must secure training approval from the Human Resource Development Council (HRDC)

OFFICE OR DIVISION	Human Resource Management Office				
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All permanent, temporary and casual employees of the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	CURE	
External Training Programs					
Request Letter to the HRDC	Chairman	HRMO; to be signed	by department/unit head		
Training Invitation/Programr	ne	Training Organizer			
Capacity Development Training					
Request Letter to the HRDC	Chairman	Requesting departme	ent/unit		
Training Design		Resource Person/s			
List of participants		Requesting department/unit			
Resume/Curriculum Vitae of	f Resource Person/s	Resource Person/s			
Benchmarking Activities					
Request Letter to the HRDC	Chairman	Requesting department/unit			
Training Design		Requesting department/unit			
List of participants		Requesting department/unit			
Proof of communication/acc	eptance with the receiving	Receiving Agency			
Agency					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit compete requirements	1.1 Receive and process request	None	2 minutes	Luth Espiloy Jr.	
	1.2 Review the request. If approved, issue Training Approval		5 days	Human Resource Development Council	
			5 minutes	Luth Espliloy Jr.	





	1.3 Forward training approval to the City Administrator's Office for the issuance of travel order			
2. Receive Training Approval with Travel Order	2.1 Prepare Travel Order for the requested training program. Release Training Approval with Travel Order	None	1 day	City Administrator's Office
	TOTAL	None	6 days, 7 minutes	







6. REQUEST/REPLACEMENT OF EMPLOYEE IDENTIFICATION CARDS

All City Government of Imus employees are issued with Identification Cards upon appointment. In case of damage or loss, employees may request for replacement of I.D. Cards at the HR Office.

OFFICE OR DIVISION	luman Resource Management Office					
CLASSIFICATION	imple					
TYPE OF TRANSACTION	G2G – Government to Government	G2G – Government to Government				
WHO MAY AVAIL THE	All employees of the City Government of Imus					
SERVICE						
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				JRE		
In case of loss						
Notarized Affidavit of Loss		Notary Public				
In case of damage						
Old I.D. Card		Requesting employee				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit requirements	1.1 Receive requirements. For RFID	None	2 minutes	Maribel Bamba		
	Cards, issue Order of Payment			Faith Francisco		
2. For RFID Card replacements,	2.1 For RFID Card replacements,	RFID Card	2 days, 4 hours	Maribel Bamba		
pay corresponding fee at the City	receive Official Receipt	replacement fee -		Faith Francisco		
Treasury Office and submit	Printing of I.D. Cards	Php 400.00				
Official Receipt at HRMO						
3.Receive requested I.D. Card	3.1 Issue requested I.D. Card	None	1 minute	Maribel Bamba		
				Faith Francisco		
	TOTAL	None	2 days, 4 hours, 3			
			minutes			





CITY ENVIRONMENT AND NATURAL RESOURCES OFFICE EXTERNAL SERVICES







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1. ASSESSMENT OF ENVIRONMENTAL PROTECTION AND INSPECTION FEES AND GARBAGE COLLECTION FEES

An environmental protection and inspection fee and garbage fee shall be collected yearly for every person engaged in business, profession or occupation or any undertaking in the City of Imus.

or any undertaking in the City of Imu				
OFFICE OR DIVISION	City Environment and Natural Resources Office			
CLASSIFICATION	G2B – Government to Business			
TYPE OF TRANSACTION	Simple			
	Persons, natural and juridical, with existing and/or	r new business activities		
CHECKLI	ST OF REQUIREMENTS		WHERE TO SEC	URE
Barangay Endorsement		Respective Barangay		
	Association if the establishment is in subdivisions	Respective Homeown		
Waste Management Seminar Certi		City Environment and		ffice
Environmental Compliance Certific following business establishments: • Junkshops	ate or Certificate of Non- Coverage for the	DENR/EMB Online Ap	plication	
 Gasoline Stations Hospitals Emission Testing Center Piggery Poultry Large-scale Industries Funeral Parlors Cemeteries 				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit documentary requirements	1.1 Record name, address and contact number of the applicant	None	5 minutes	Maricel Bautista
	 1.2 Evaluate submitted documents * If subject to Environmental Compliance Certificate (ECC)/ Certificate of Non-Coverage (CNC), schedule the inspection of business 	None	1 hour	Ranjelle Forton Ronaldo De Castro Arturo Capati





	* If subject to ECC/CNC, inspect business establishment			
2. Secure Assessment	 2.1 Assess garbage fee 2.2 Advise applicant's schedule of "Waste Management Seminar for Business 		10 minutes	Maricel Bautista
3. Pay necessary fees	Establishments" 3. Receive payment and release Official Receipt	See Environmental Protection and Inspection Fees below	5 minutes	City Treasurer's Office
	Fill out Client Satisfactio	n Rating Form		•
	TOTAL	Based on	1 hour, 20	
		assessment	minutes	

NOTE: Service can be availed at the Business One Stop Shop (BOSS) Area

ENVIRONMENTAL PROTECTION AND INSPECTION FEE

	Amount per Annum
1. Heavy Industries	
a. Tannery	5,000.00
b. Chemical Manufacturing	5,000.00
c. Refinery	5,000.00
d. Batching Plant	4,000.00
e. Electronics	4,000.00
f. Metal Fabrication	4,000.00
g. Plastic/Vinyl, Glass Manufacturing	4,000.00
h. Aluminum Fabrication	3,500.00
i. Bulb Manufacturing	3,000.00
j. Rubbery/Dye/Paint	2,500.00
k. Food Processing	2,500.00

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I. Others	2,000.0
2. Medium Industries	
a. LPG Refilling Plant	2,000.0
b. Ceramics, Toilet Fixtures	1,500.0
c. Hatchery	1,500.0
d. Food Processing (Medium Scale)	1,500.0
e. Printing	1,000.0
f. Paper Products	1,000.0
g. Concrete Products	1,000.0
h. Others	1,000.0
3. Light Industries	
a. Agro-Industrial	1,000.0
b. Furniture Making	1,000.0
c. Garments & Other Fabric Based Products	1,000.0
d. Assembly	700.0
e. Storage/Warehouse/Haulage/Trading	500.0
f. Corrugated Cartons	500.0
g. Lessor	500.0
h. Packaging	500.0
i. Others	500.0
4. Food Industries	
a. Bakery	500.0
b. Restaurant	500.0
c. Canteen	100.0
d. Carinderia	100.0
e. Fruit Stall	100.0
f. Others	300.0
5. Trading Merchandise	
a. Supermarkets	2,000.0
b. Market Stall	

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1. Wet Goods	200.00
2. Dry Goods	200.00
c. Sari-sari Store	200.00
d. LPG, Pet Shop, Drugstore, Flower Shop & Gardens/Nurseries	500.00
e. Appliance Center, Electronic Store, Auto Supply, General Merchandise, Electrical Supply, Bicycle Store, Dental/Medical	500.00
Supply, Gift Shop, Shoes, Bags, Garments Store, Agricultural/Veterinary Supply	500.00
f. Hardware Construction Supply, Raw Material Supply, Furniture, Paint Center, Glass and Aluminum	500.00
g. Others	500.00
6. Small Scale Industries	
a. Jeepney Body Builders	500.00
b. Hollow Blocks/Furniture	500.00
c. Garments/Shoes/Bags/Hats	500.00
d. Others	500.00
7. Amusement Places	
a. Coliseum, Resorts, Function Halls	500.00
b. Billiard Hall, Bingo House, Bowling, Fitness Center	500.00
c. Race Tracks, Sports Coliseum	500.00
d. Others	500.00
8. Institutional Establishment	
a. Hospitals	2,000.00
b. Lying-In Clinics	1,000.00
c. Clinics and Laboratories	1,000.00
d. Private Schools	1,000.00
e. Banks, Pawnshops, Money Changers, Lending Investors	1,000.00
f. Others	500.00
9. Services	
a. Repair Shop/Vulcanizing	300.00
b. Beauty Parlor, Barber Shop	300.00
c. Rentals (Video Computer)	300.00
d. Transportation Terminals	300.00

CITIZEN'S CHARTER



e. Water Refilling	1,000.00
f. Telecommunications	2,000.00
g. Services Offices	500.00
h. Funeral Services	2,000.00
i. Water District	3,000.00
j. Dwelling	
i. Apartments for Rent (per door) 50/day	50.00
ii. Boarding Houses/Dormitories (per bed)	50.00
iii. Hotels, Inns	1,000.00
k. Printing Establishments	500.00
I. Others	500.00
0. Agricultural	
a. Poultry Farms, Piggery, Cattle Raising	1,500.00
b. Fish Pen	1,000.00
c. Rice Mill	500.00
d. Others	500.00
1. Slaughter House	2,000.00
2. Private Offices	300.00
13. Junkshops	2,000.00
4. Gasoline Service & Filling Station including LPG	2,000.00
15. Memorial Chapels	2,000.00
16. Golf Courses	500.00
17. Golf Clubs, Tennis Club and Gun Clubs	
18. Other Recreational Facilities	
19. All other businesses not specifically mentioned outside each category	

II.4. GARBAGE FEES:

Administration Offices, Offices Professionals		540.00
	Amount per Annum	
Apartments		360.00/door





Bakeshops	10.00/day	3,600.00
Bakeries, Eateries, Canteen and Cafeterias	5.00/day	1,800.00
Mini-Bakeries	3.00/day	1,080.00
Beauty Parlors, Hair Salons and Barber Shops:		
with more than6 personnel	3.00/day	1,080.00
with 4 to 6 personnel	2.00/day	720.00
with solo up to 3 personnel	1.00/day	360.0
Department Stores, Malls Warehouse (with Private Garbage Collector)		6,000.00
Dormitories, Lodging or Boarding House	1.00/day/boarder	
1 boarder		360.00
2 boarders		720.00
3 boarders		1,080.0
4 boarders		1,440.0
5 boarders		1,800.00
6 boarders		2,160.00
7 boarders		2,520.0
8 boarders		2,880.0
9 boarders		3,240.0
10 boarders		3,600.0
11 boarders		3,960.0
12 boarders		4,320.00
Fast Food Centers (with Private Garbage Collector)	10.00/day	3,600.00
Fast Food Centers (w/out Private Garbage Collector)		200,000.00
Financial (Bank) and Lending Institution and Pawnshops	1.00/day/personnel	1,200.00
Funeral Parlors		2,400.00
Memorial Chapels:		
with 10 chapels and above		30,000.0
with 6 to 10 chapels		20,000.00

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with 5 chapels and below		10,000.00
Gasoline and Service Stations		3,600.00
Carwash and Auto Repair Shop		720.00
Hospitals/Lying -Inn (Should have Private Contractor for Infectious Wastes):		
Tertiary		115,200.00
Secondary		57,600.00
Primary		28,800.00
Internet Café:		
With Snack Counter		1,080.00
Without Snack Counter		540.00
Manufacturer (Should have Private Contractor)		6,000.00
Media Facilities		540.00
Medical and Dental Laboratories (Should have Private Contractor for Infectious)		1,800.00
Medical, Dental and Animal Clinics		720.00
Movie House		1,800.00
Restaurants and Bars		3,600.00
Resorts		3,600.00
Sari-Sari Store		No Garbage
Schools (with Ecological Solid Waste Management Program):		
1000 or more enrollees		12,000.00
500 to 999 enrollees		9,600.00
50 to 499 enrollees		4,800.00
49 and below enrollees		2,400.00
Slaughterhouses		12,000.00
Stall at Malls or Department Stores		1,200.00
For Kiosk		600.00
Stalls at Public Market		No Garbage
Private Markets/Talipapa	3.00/stall/day	1,080.00/stal
Supermarket		3,600.00
Telegraph, Teletype, Cable and Wireless Communication Companies		720.00

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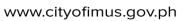
Telephone and Electric Companies		720.00
All Business, industry, commercial, and agricultural establishments not specifically men	tioned aboved:	
500 or more but less than 1000 sq. mtr.		3,600.00
200 or more but less than 500 sq. mtr.		2,400.00
100 or more but less than 200 sq. mtr.		1,200.00
50 or more but less than 100 sq. mtr.		720.00
25 more but less than 50 sq. mtr.		540.00
less than 25 sq. mtr.		365.00

*DISCOUNTS

- a) New business establishments that will operate or have their operation during or within the last quarter of the year and will secure for Mayor's Permit/Business Permit shall be given discount on garbage fee only, based on the duration of the period left on said calendar year.
- b) Additional discounts may be granted to establishments on such rates as may be prescribed for implementing program on wastes reduction, wastes segregation, composting, or recycling in support to the solid waste management program of the city as embodied in an ordinance or implementing rules.







2. RECORDING OF SETTLED FINES IN VIOLATION OF ENVIRONMENTAL ORDINANCE SERVICE

A citation ticket indicating violations and penalties are issued by CENRO to all violators of city environmental ordinances.

OFFICE OR DIVISION	City Environment and Natural Resources Office			
CLASSIFICATION	G2C – Government to Citizens			
TYPE OF TRANSACTION	Simple			
WHO MAY AVAIL THE SERVICE	Any Individual Person/Any Business establish	nment or Enterprise.		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE
Citation Ticket		CENRO		
Official Receipt (from the Treasurer's	s Office)	City Treasurer's Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE
			TIME	
1. Present the Official Receipt (OR)	1.1 Record OR No. of fines being paid	None	5 minutes	Nerea Crisosstomo
to the staff in charge for recording				Esperanza De la Cruz
	1.2 Stamp OR as "Recorded"			
	Fill out Client Satisfa	action Rating Form		
	TOTAL	None	5 minutes	







3. PROVISION OF FREE SOIL ENHANCER

To encourage Urban Organic Gardening, city produced soil enhancer are given free to all Imuseños

OFFICE OR DIVISION	City Environment and Natural Resources Office				
CLASSIFICATION	G2C – Government to Citizens				
TYPE OF TRANSACTION	Simple				
WHO MAY AVAIL THE SERVICE	All residents of Imus; Academic and Private C	Groups within the City			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
Letter of request from individuals or g	group/agencies	Client			
Valid identification card with present	address	Client			
Sack (for "Palit-sako)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit letter request	1. Evaluate submitted letter.	None	5 minutes	Esperanza De la Cruz	
2. Receive and fill-out Soil	2.1 Issue Soil Enhancer Distribution Form	None	10 minutes	Esperanza De la Cruz	
Enhancer Distribution Form and					
instructions	2.2 Give Instructions on "Palit-Sako"				
	requirement on availing free soil enhancer.				
3. Present Soil Enhancer		None	20 minutes	Joselito Cabrera	
	Enhancer Distribution Form and Issue Soil			Maximiano Villanueva	
enhancer at City Composting	Enhancer.				
Facility located at the Eco- Village					
	3.2 Record transaction				
	Fill out Client Satisfaction Rating Form				
	TOTAL None 35 minutes				





4. ISSUANCE OF CERTIFICATE OF NO OBJECTION TO CUT TREE

A certificate of No Objection to Cut Tree is issued to all individuals, organizations and establishments that upon inspection are compliant with regards to tree cutting requirements

ree culling requirements					
OFFICE OR DIVISION	City Environment and Natural Resources Offi	City Environment and Natural Resources Office			
CLASSIFICATION	G2C	G2C			
TYPE OF TRANSACTION	Complex				
WHO MAY AVAIL THE SERVICE	-All residents, firms or establishments wishing	g to cut down trees withir	n the City of Imus		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE			
Letter of intent		Client			
Barangay Clearance / Certificates of	No Objection from the Barangay.	Client			
	(must be the landowner of the tree to be	Client			
cut)					
Homeowner's Certification (If subdivi	sion)	HOA			
Pictures of trees to be cut		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL	
1. Submit letter request and requirements	1.1 Evaluate submitted letter and required documents.	None	10 minutes	Arturo Capati Jerry Del Mundo	
** for online transaction, email request and requirement to muscavcenro@gmail.com	1.2 Schedule ocular inspection.	None	30 Minutes		
	2. Ocular inspection and Recommendation	None	20 minutes	Manolo Dominguez Jerry del Mundo, Arturo Capati	
3. Receive Certificate of No Objection and endorsement to PENRO	3. Issuance of Certificate of No Objection and Endorsement to PENRO	None	10 minutes	Arturo Capati	
	Fill-out Client Satisfac	tion Rating Form			

NOTE: Ocular Inspection for scheduling





5. REQUEST OF ENVIRONMENTAL INFORMATION, EDUCATION CAMPAIGN (IEC) AND TRAINING SERVICES

The City Environment and Natural Resources Office is committed in providing public information and education campaign on environmental management to ensure awareness and participation of every citizens and business establishments geared towards environmental protection and compliance which includes seminars, training services and distribution of flyers and other effective information strategies.

OFFICE OR DIVISION	City Environment and Natural Resources Offi	City Environment and Natural Resources Office			
CLASSIFICATION	G2C – Government to Citizens				
TYPE OF TRANSACTION	Simple	Simple			
WHO MAY AVAIL THE SERVICE	All residents, academic and private groups in	City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Letter of request		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit letter of request	1.1 Evaluate submitted letter	None	15 minutes	Nerea Crisostomo Jerry del Mundo,	
	1.2 Verify and interview client.				
2. Schedule the IEC/ Training	2. Schedule the IEC/ Training	None	10 minutes	Nerea Crisostomo Jerry del Mundo,	
	* For online IEC/training schedule IEC training and send link of the training				
3. Participate in the IEC/Training	3. Conduct IEC/Training	None	Depending on the IEC/Training to be conducted	Nerea Crisostomo Jerry Del Mundo	
	Fill-out Client Satisfac	tion Rating Form	Conductod		
	TOTAL	None	25 minutes		





CITY BUDGET OFFICE INTERNAL SERVICES







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1. PREPARATION OF THE CITY ANNUAL BUDGET

OFFICE OR DIVISION	City Budget Office	iai jouri		
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All departments/offices in the city governme	nent		
CHECKLIST OF REQUIREMENTS				
Procurement Project Management P	lan (PPMP) (1 Original, 4 Photocopy)	Respective departments	s/offices	
¥) Form No. 2 (1 Original, 1 Photocopy)	Respective departments	s/offices	
Programmed Appropriation and Oblig	gation by Object of Expenditure (1	Respective departments	s/offices	
Original, 1 Photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit budget proposal.	1.1 Receive budget proposal of different departments/offices.	None	July 1 to July 15, annually	Loreta A. Maliksi
	1.2 Review and consolidate budget proposals.	None	July 16 to October 16, annually	Ms. Arlene DG Duminding City Budget Officer
	1.3 Finalize the budget for budget hearing.	None		
	1.4 Forward to the City Mayor for approval and indorse the same to Sangguniang Panlungsod for final review and appropriate action for the enactment of Sangguniang Panlungsod Ordinance.	None		
	Fill-out Client Satisfa	action Rating Form		
	TOTAL	None	On Schedule	

Plan for the expenditures of the projected income of the city for the financial year.







	ages of all employees are accounted for	•		
	City Budget Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
	All departments/offices in the city govern		<u>ucation – Division of Imus</u>	s City
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
For General Procurement				
Purchase Request duly signed and a approving authority (City Mayor, City Supervisor)	pproved by the requesting official and Administrator or School District	Respective departments	s/offices	
Obligation Request Form (1 original, 2	2 photocopies)	Respective departments	s/offices	
For Employees' Salaries and Wage		Respective departments	5/011003	
Payroll		Human Resource Mana	gement Init	
For Travel Expenses		Thuman Resource Mana		
Letter of Invitation		Training/Sominar Organ	vizing Committee	
Approved Travel Order and Itinerary		Training/Seminar Organizing Committee Office of the City Administrator		
CLIENT STEPS	AGENCY ACTION			PERSON RESPONSIBL
salaries of regular, casual and job order employees	 1.1 Receive payroll of employees. 1.2. Check availability of fund, prepares obligation requests and record 1.3 Check record and assign OBR 	None None None	2 minutes 1 hour 1 hour	Nancy J. Camia (for SEF) Loreta A. Maliksi (for General Fund) Anna Angelica C. De leo (P.S) Arlene DG Duminding (Job Order) Nancy J. Camia (for SEF)
	Number 1.4 Approve and sign the Obligation	None	30 minutes	Ms. Arlene DG Dumindir City Budget Officer

2. ISSUANCE OF APPROVED OBLIGATION REQUEST (ObR) (SALARIES AND WAGES – REGULAR AND CASUAL AND JOB ORDER) Ensuring that all salaries and wages of all employees are accounted for.

CITIZEN'S CHARTER

TOTAL	None	2 hours and 33	
		minutes	

3. ISSUANCE OF APPROVED OBLIGATION REQUEST (ObR) (PURCHASES AND OTHER EXPENSES) Ensuring all expenditures are properly recorded and charged with its account codes.

	property recorded and charged with its acc				
OFFICE OR DIVISION	City Budget Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/offices in the city governr	ment; Department of Educ	cation – Division of Imus	City	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
For General Procurement					
Purchase Request duly signed and a approving authority (City Mayor, City Supervisor)	approved by the requesting official and / Administrator or School District	Respective departments	s/offices		
Obligation Request Form (1 original,	, 2 photocopies)	Respective departments	s/offices		
Purchases and other expenses					
Purchase Request, Purchase Order		Respective department	heads/offices		
For Travel Expenses					
Letter of Invitation		Training/Seminar Organizing Committee			
Approved Travel Order and Itinerary		Office of the City Administrator			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit duly accomplished Purchase Requests form with signature of dept. head and approved by Mayor / Administrator	1.1 Receive the Purchase Request and Obligation Request Form.	None	2 minutes	Nancy J. Camia (for SEF) Loreta A. Maliksi (for General Fund)	
	1.2 Check availability of appropriation and attach slip as proof of funds	None	5 minutes	Arlene DG Duminding (General Fund) Nancy J. Camia	
	1.3 Record and assign Obligation Request Number	None	2 minutes	(for SEF Fund)	
	1.4 Approve and sign the Obligation Request	None	5 Minutes	Ms. Arlene DG Duminding OIC- City Budget Office	





2. Claim the Obligation Request	2. Release of approved and signed	None	1 minute	Loreta A. Maliksi	
Form.	Obligation Request Form.				
Fill-out Client Satisfaction Rating Form					
TOTAL None 15 minutes					

4. PROCESSING OF DISBURSEMENT VOUCHERS OF UTILITY, COMMUNICATION AND SUBSCRIPTION EXPENSES

Ensuring that all utilities, communications, and subscription expenses are budgeted and processed on time.

OFFICE OR DIVISION	City Budget Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/offices in the city governme		cation – Division of Imus	City	
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE				
Statement of Account/ Billing Statem		Maynilad, MERALCO, P			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Statement of Account of monthly utilities – Meralco, PLDT,	1.1 Receive the requirement.	None	1 minute	Loreta A. Maliksi	
Maynilad	1.2 Prepare disbursement voucher and Obligation Request (ObR)	None	5 minutes	Nancy J. Camia (for SEF) Chona S. Dela Cruz Bernadette M. Balinas	
	1.3 Record and assign Obligation Request Number	None	2 minutes	Arlene DG Duminding (for general Fund Nancy J. Camia (for SEF)	
	1.4 Approve and sign the Obligation Request	None	2 minutes	Ms. Arlene DG Duminding OIC- City Budget Office	
	1.5 Forward and process to Office of the City Administrator, City Accounting and Internal Audit Services Office and City Treasurer's Office.	None	3 days	Nancy J. Camia (for SEF) Bernadette M. Balinas (for General Fund)	
2. Claim check.	2. Release check.	None	13 minutes	City Treasurer's Office	

CITIZEN'S CHARTER

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Fill-out Client Satisfaction Rating Form			
TOTAL	None	3 days and 10	
		minutes	

5. PREPARATION OF DISBURSEMENT VOUCHER FOR FIRE INSURANCE AND LOAN AMORTIZATION

Ensuring that fire insurance and loan ammortization are processed and paid before due date.

OFFICE OR DIVISION	City Budget Office				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	Financing/ Lending Sector	-			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Statement of Account/ Billing Staten		City Accounting Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Statement of Account of Existing Loan	1.1 Receive the requirement.	None	1 minute	Bernadette M. Balinas	
	1.2 Prepare disbursement voucher and Obligation Request (ObR)	None	5 minutes	Bernadette M. Balinas	
	1.3 Record and assign Obligation Request Number	None	2 minutes	Ms. Arlene DG Duminding OIC- City Budget Office	
	1.4 Approve and sign the Obligation Request	None	2 minutes	Ms. Arlene DG Duminding OIC- City Budget Office	
	1.5 Forward and process to Office of the City Administrator, City Accounting and Internal Audit Services Office and City Treasurer's Office.	None	3 days	Bernadette M. Balinas	
	TOTAL	None	3 days and 10 minutes		





	plemental budget of barangay and SK.			
OFFICE OR DIVISION	City Budget Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Barangays			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Standard Budget Preparation Forms	(1 Original, 6 Photocopies)	Respective Barangays		
Annual Investment Plan (1 Original, 6	6 Photocopies)	Respective Barangays		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished Barangay Budget Forms and Annual Investment Plan.	1.1 Receive submitted Barangay Annual and Supplemental Budget. OR Receive submitted SK Annual and Supplemental Budget.	None	1 minute	Neria Arguelles (for Barangay Budget) Nancy J. Camia (SK Budget)
	1.2 Conduct initial review of the barangay annual/supplemental budget ORConduct initial review of the SK annual/supplemental budget	None	15 minutes	
	1.3. Sign review and transmittal letter of barangay or SK annual/supplemental budget	None	10 minutes	Ms. Arlene DG Duminding OIC- City Budget Office
2. Receive transmittal letter	2.1 Forward signed transmittal/indorsement letter to Sangguniang Panlungsod recommending the approval of budget in its regular session.	None	5 minutes	Neria Arguelles (for Barangay Budget) Nancy J. Camia (SK Budget)
3. Receive the copy of Barangay Annual and Supplemental Budget.	3. Furnish the concerned barangay the copies of approved Barangay Annual and Supplemental Budget, OR	None	5 minutes	Neria Arguelles (for Barangay Budget) Nancy J. Camia

6. PRELIMINARY REVIEW OF BARANGAY ANNUAL AND SUPPLEMENTAL BUDGET

Review of the Annual and Supplemental Budget of Barangay and SK.

CITIZEN'S CHARTER



Furnish the concerned barangay the copies of approved SK Annual and Supplemental Budget.			(SK Budget)
Fill-out Client Satisfa	action Rating Form		
TOTAL	None	31 minutes	







CITY ACCOUNTING OFFICE EXTERNAL SERVICES







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1. CERTIFICATE OF INCOME TAX WITHHELD

Process request of Certificate of Income Tax Withheld.

OFFICE OR DIVISION	City Accounting Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All supplier, contractor of the City Government of Imus			
CHECKLIST	WHERE TO SECURE			
Photo copy of voucher		City Treasurer's Office		
Tax Identification Number (TIN)	tification Number (TIN) Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit requirements	1. Process the request	None	5 minutes	Florie Arevalo
2. Claim Certificate	2. Release the BIR Forms (Forms 2306,2307)	None	5 minutes	Florie Arevalo
Fill-out Client Satisfaction Rating Form				
	TOTAL	None	10 minutes	







CITY ACCOUNTING OFFICE INTERNAL SERVICES







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1. PROCESS/CERTIFY CLAIMS

Process Disbursement Vouchers.

	513.			
OFFICE OR DIVISION	City Accounting Office			
CLASSIFICATION	Simple and Complex			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All authorized department representative			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
	ting documents (see attached checklist)	Authorized department		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Disbursement Vouchers and its supporting documents	1.1 Receives Disbursement Vouchers and its supporting documents.1.2 Review the completeness of supporting documents and check the correctness of the mathematical computation.	None	5 minutes	Officer of the day
	For General Fund	None		Ma. Isabel Fajardo Ruzelia R. Aguilar
	For Special Education Fund	None	15 minutes	Emelita Saringayat
	For Trust Fund	None		Susana Bautista
	1.3 Complex/Technical Transactions	None	30 minutes	Same as above
	1.4 Prepare Journal Entry Voucher	None	5 minutes	Same as above
	1.5 In case of any deficiency, the documents will be returned to the client for the compliance of required attachment.	None	5 minutes	Officer of the day
	1.6 Approve as to completeness of supporting documents.	None	5 minutes	Roselie A. Pangilinan
2. Receives the Disbursement Vouchers and its supporting documents	2. Releases the disbursement vouchers and supporting documents	None	5 minutes	Officer of the day
	Fill-out Client Satisfa	action Rating Form		
	TOTAL	None	55 minutes	





2. REQUEST CERTIFICATE OF AVAILABILITY OF FUND (C.A.F.) Process request of Certificate of Availability of Fund

OFFICE OR DIVISION	City Accounting Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All authorized department representative			
CHECKLIST O	(LIST OF REQUIREMENTS WHERE TO SECURE			
Purchase Request	Authorized department Representatives			
S.P. Resolution	Sangguniang Panlungsod			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for C.A.F.	 Check the availability of fund and do the certification. Trust Fund only 	None	10 minutes	Susana Bautista
2. Receive the document.	2. Release the document.	None	5 minutes	Officer of the day
	Fill-out Client Satisfa	action Rating Form		
TOTAL None 15 minutes				







CITY LEGAL OFFICE EXTERNAL SERVICES







1. LEGAL COUNSELLING

By providing free legal assistance to all Imus constituents that will be assisted by our lawyers and consultants.

OFFICE OR DIVISION	City Legal Office – External Affairs Assistance	e Section		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION				
WHO MAY AVAIL THE SERVICE All departments/ units in the City Government of Imus; All residents and non-residents of the City of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Other pertinent documents relative to	o the concern	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register in logbook	1. Inform the Legal Consultants or City Legal	None	2 minutes	Rose Ann Gonzales;
	Officer			Judith Ambrocio;
				Eloisa Camposano;
				Riza Nerona
2. Present other pertinent	2. Assess the submitted documents and	None	30 minutes	Legal Consultants;
documents	nterview the client City Legal Officer			
	Fill-out the Client Satisfaction Rating Form			
	TOTAL	None	32 minutes	







2. RENDERING OF WRITTEN LEGAL OPINION(S)

For request seeking legal opinion and drafting letters to the clients and must provide indorsement/ request letter with supporting documents relative to the concern.

CONCEIN.					
OFFICE OR DIVISION	City Legal Office – External Affairs Assistance	y Legal Office – External Affairs Assistance Section			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Government	t of Imus; All residents and r	non-residents of the City of Im	US	
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Indorsement/ Request Letter		Office of the City Mayor/ C	lient		
Other pertinent documents that can h	nelp in establishing facts	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Register in logbook	1. Inform the City Legal Officer	None	1 minute	Rose Ann Gonzales; Shalum Damaso; Riza V. Nerona; Kim Irish Ilano	
2. Present the indorsement, request letter and other documents	2.1 Assess the submitted documents.	None	3 minutes	Legal Consultant; City Legal Officer	
	2.2 Interview the client and prepare the written opinion.	None	25 minutes		
	2.3 File a copy of the written opinion.	None	2 minutes	Legal Staff and/or Clients	
3. Receive the written opinion	3. Release the document	None	2 minutes	Rose Ann Gonzales; Shalum Damaso; Riza V. Nerona; Kim Irish Ilano	
	Fill-out the Clien	t Satisfaction Rating Form	·		
	TOTAL		33 minutes		

NOTE: Release of written opinion may vary depending on the facts and circumstances of each case.





3. PREPARATION OF LEGAL DOCUMENTS OF THE CITY

By providing the draft and finalize of different legal documents that will be required for all Imus constituents (E.G. Affidavits, etc.)

	and infalize of different legal documents that will				
OFFICE OR DIVISION	City Legal Office – External Affairs Assistance	ity Legal Office – External Affairs Assistance Section			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Government	of Imus; All residents and no	on-residents of the City of Imu	IS	
CHECKLIST	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Government Issued Identifications Client					
Other pertinent documents that can help in establishing facts Client					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present a Government issued Identification and other pertinent documents	1.1 Inform the City Legal Officer	None	1 minute	Shalum Damaso; Riza V. Nerona; Annielyn Genido; Digna C. Bautista; Eloisa V. Camposano	
	1.2 Prepare the legal documents that was requested by the client	None	5 minutes	Gio Adriel Pallera; Marcel Joy Galinza; Ernest Christopher Alarcon; Judith Ambrocio; Riza V. Nerona	
2. Receive the documents	2. Release the document	None	5 minutes	Eloisa Camposano; Digna Bautista; Riza V. Nerona; Judith D. Ambrocio; Marcel Joy D. Galinza	
	Fill-out the Clien	Satisfaction Rating Form	·	· · · ·	
	TOTAL	*	11 minutes		







OFFICE OR DIVISION	Constituents having an issue regarding numan rights violations			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All residents and non-residents of the C	ity of Imus; All departm	nents/ units in the City (Government of Imus
CHECKLIST OF	REQUIREMENTS	· ·	WHERE TO S	SECURE
Indorsement/ Request Letter		Office of the City May	or/ Client	
Other pertinent documents that can	· · · · · · · · · · · · · · · · · · ·	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the indorsement, request letter and other documents	1.1 Inform the City Legal Officer	None	1 minute	Annielyn Genido; Shalum Damaso; Riza V. Nerona; Rose Ann Gonzales
	1.2 Assess the documents if needed for research	None	20 minutes	City Legal Officer
	1.3 Undertake legal research and draft the legal document (if needs research)	None	1 day	Legal Consultants; City Legal Officer
	1.4 Assess and evaluate the draft document and finalize the same	None	1 day	City Legal Officer
2. Receive the documents	2. Release the document	None	5 minutes	Annielyn Genido; Gio Adriel Pallera; Shalum Damaso; Riza V. Nerona
		Satisfaction Rating For		
	TOTAL	None	2 days and 26 minutes	

4. FRONTLINE OF PROTECTING HUMAN RIGHTS AND PROSECUTING ANY VIOLATIONS THEREOF

By giving legal assistance to all constituents having an issue regarding human rights violations







CITY LEGAL OFFICE INTERNAL SERVICES







1. PREPARATION OF LEGAL DOCUMENTS OF THE CITY

For preparation and finalize Executive Orders that will be implemented to the City Government of Imus and to be signed by the Local Chief Executive.

		· · · · · · · · · · · · · · · · · · ·			
OFFICE OR DIVISION		City Legal Office – Internal Affairs Assistance Section			
CLASSIFICATION	omplex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Governmen	t of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Indorsement/ Request Letter		Any departments/ units in th	e City Government of Imus		
Other pertinent documents that can		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the indorsement, request letter and other documents	1.1 Inform the City Legal Officer	None	1 minute	Shalum Damaso; Kimberlyn Marco	
	1.2 Assess the documents if needed for research	None	20 minutes	Legal Consultants; City Legal Officer	
	1.3 Undertake legal research and draft the document (if needs research)	None	1 day	Legal Consultants; City Legal Officer	
	1.4 Assess and evaluate the draft document, then, finalize it.	None	1 day	City Legal Officer	
	1.5 Printing of the Executive Order	None	5 minutes	Marcel Joy Galinza	
2. Receive the documents	2. Release the document	None	5 minutes	Kimberlyn Marco; Rose Ann Gonzales;	
		t Satisfaction Rating Form			
	TOTAL		2 days and 31 minutes		







2. PREPARATION OF LEGAL DOCUMENTS OF THE CITY

By providing the draft and finalize of different legal documents that will be required by different offices and agencies of the City Government of Imus, E.G. M.O.A., CONTRACTS, etc.)

OFFICE OR DIVISION	City Legal Office – Research, Review and Do	ity Legal Office – Research, Review and Documentation Section			
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Governmen	t of Imus			
CHECKLIST	F REQUIREMENTS WHERE TO SECURE				
Indorsement/ Request Letter		Any departments/ units in th	ne City Government of Imus		
Other pertinent documents that can h	nelp in establishing facts	Client			
CLIENT STEPS AGENCY ACTION FEES TO BE PAID PROCESSING TIME PERSON RESPO			PERSON RESPONSIBLE		
1. Present the indorsement, request letter and other documents	1.1 Inform the City Legal Officer	None	1 minute	Shalum Damaso; Riza V. Nerona; Annielyn Genido	
	1.2 Assess the documents if needed for research	None	20 minutes	City Legal Officer	
	1.3 Undertake legal research and draft the document (if needs research)	None	1 day	Legal Consultants; City Legal Officer	
	1.4 Assess and evaluate the draft document, then, finalize it.	None	1 day	City Legal Officer	
2. Receive the documents	2. Release the document	None	5 minutes	Rose Ann Gonzales; Kimberlyn Marco; Judith Ambrocio; Marcel Joy Galnza	
	Fill-out the Clien	t Satisfaction Rating Form			
	TOTAL		2 days and 26 minutes		







3. CONDUCT INVESTIGATION

To investigate and prosecute administrative complaints filed against City Government of Imus Officials and its employees

OFFICE OR DIVISION	City Legal Office – Litigation Proceedings and Dispute Section			
CLASSIFICATION	Highly-technical			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Governmen	t of Imus		
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE
Indorsement/ Request Letter		Office of the City Mayo	r/ Client	
Other pertinent documents that can I	help in establishing facts	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the indorsement from council offices/ individuals	1. Inform the City Legal Officer	None	1 minute	Digna C. Bautista; Shalum Damaso; Kim Irish Ilano; Riza V. Nerona
2. Present to the Legal Officer	2.1 Conduct investigation and evaluate gathered data	None	3 days	Legal Consultants; Gio Adriel Pallera
	2.2 Make final report and recommend legal actions to be pursued	None	2 days	City Legal Officer
3. Receive the documents	3. Release the document	None	5 minutes	Annielyn Genido; Kimberlyn Marco; Riza V. Nerona
	Fill-out the Client Satisfa	action Rating Form		
	TOTAL	None	5 days and 6 minutes	





4. REPRESENT THE CASE OF THE CITY

Shall be the official counsel of the City Government in any cases, whether civil or criminal, filed against City Government of Imus and/ or its employees in the performance of their official duty

OFFICE OR DIVISION		City Legal Office - Litigation Proceedings and Dispute Section			
CLASSIFICATION	Highly-technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All departments/ units in the City Gover	nment of Imus			
CHECKLIST OF	F REQUIREMENTS		WHERE TO SECURE		
Indorsement/ Request Letter		Office of the City Mayo	or/ Client		
Other pertinent documents that can	help in establishing facts	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the indorsement, request letter and other documents	1.1 Inform the City Legal Officer	None	1 minute	Shalum Damaso; Riza V. Nerona; Kim Irish Ilano; Rose Ann Gonzales	
	1.2 Assess the documents if needed for research	None	20 minutes	City Legal Officer	
	1.3 Conduct legal research and draft needed pleadings (if needs research)	None	2 days	Legal Consultants; Gio Adriel Pallera	
	1.4 Review and comment on the draft pleadings and cause the finalization of the legal document/s	None	1 day (stop time)	City Legal Officer	
	1.5 Appear before applicable court/ tribunal	None	Depends on court/ tribunal schedules	City Legal Officer	
2. Receive update and report.	2. Report status of case and/ or outcome	None	1 day	City Legal Officer	
	Fill-out the Client	Satisfaction Rating Forr	n		
	TOTAL		4 days and 21 minutes		







5. ORDINANCE REVIEW

Upon request of the Local Chief Executive

Opon request of the Local Cr				
OFFICE OR DIVISION	City Legal Office – Research, Review a	nd Documentation Sectio	n	
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G – Government to Government	nment to Government		
WHO MAY AVAIL THE SERVICE		artments/ units in the City Government of Imus		
	F REQUIREMENTS		WHERE TO SECURE	
Indorsement/ Request Letter		Sangguniang Panlungso		
Other pertinent documents that can	- · · · · · · · · · · · · · · · · · · ·	Any government offices		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the indorsement, request letter and other documents	, ,	None	1 minute	Shalum Damaso; Kimberlyn Marco; Riza V. Nerona; Rose Ann Gonzales
	1.2 Assess the documents if needed for research	None	20 minutes	City Legal Officer
	1.3 Undertake legal research and draft the document	None	1 day	Legal Consultants
	1.4 Review and evaluate draft document for finalization to the Sangguniang Panlungsod	None	1 day	City Legal Officer
2. Receive the documents	2. Release the document to the Sangguniang Panlungsod	None	5 minutes	Digna Bautista; Marcel Joy Galinza; Judith Ambrocio; Riza V. Nerona
		Satisfaction Rating Form		
	TOTAL	None	2 days and 26 minutes	



YOUTH AFFAIRS OFFICE EXTERNAL SERVICES







1. YOUTH ORGANIZATION REGISTRATION PROGRAM

Registration and accreditation of local youth and youth serving organizations

OFFICE OR DIVISION	Youth Affairs Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C (Government to Citizen)			
WHO MAY AVAIL THE SERVICE	All youth and youth serving organizations of t	he city		
CHECKLIST OF REQUIREMENTS		WHERE TO SECUR	E	
Official registration form		Issued by the Youth	Affairs Office/ Online thru	u Google Drive
Directory of officers of the organizati	on	Client		
Directory of advisers of the organiza	tion	Client		
List of members in good standing		Client		
Copy of organization's constitution a	nd by-laws	Client		
Certificate and/or endorsement from	competent authority	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID PROCESSING TIME PERSON RESPONSIE		
1. Submission of requirements at	1.1 Assessment of the requirements needed	None	5 minutes	April Monique S. Manabat
the Youth Affairs Office				
	1.2 Issuance of receiving sheet	None	1 minute	
	1.3 Validation of the organization through its	None	4 days	
	advisers, officers, and members through			
	call, text, and/or e-mail			
	1.4 Signature of the City Mayor and Local	None	1 day	
	Youth Development Officer			
2. Present the claiming slip issued	2. Issuance of certificate of registration and	None	1 minute	April Monique S. Manabat
by the Youth Affairs Office	accreditation			
	Fill-out the Client Satisfa			
	TOTAL	0	5 days and 7	
			minutes	





YOUTH AFFAIRS OFFICE INTERNAL SERVICES







OFFICE OR DIVISION	Youth Affairs Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C (Government to Citizen), G2B (Government to Business), G2G (Government to Government)			
WHO MAY AVAIL THE SERVICE	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Request form		Youth Affairs Office		
Request letter addressed to the City	Mayor or Local Youth Development Officer	Client		
Government issued I.D.		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of requirements at	-	None	3 minutes	Reiss Marc F. Dimdam
the Youth Affairs Office	and checking of facility availability			
	1.2 Processing of permit	None	2 minutes	
	1.3 Signature of the Local Youth	None	1 minute	Jericho Reyes
	Development Officer			
Claiming of permit	Releasing of permit	None	1 minute	
	Fill-out the Client Satis	faction Rating Form		
	TOTAL	None	7 minutes	

1. ISSUANCE OF VENUE PERMIT FOR ACTIVITIES AND USE OF CHILDREN AND YOUTH CENTER FACILITIES







OFFICE OF THE CONGRESSMAN – AKSYON CENTER EXTERNAL SERVICES







1. MEDICAL, BURIAL AND FINANCIAL ASSISTANCE

These are assistance given as an immediate response to cases of individuals and families in crisis situations through the provision of financial and material assistance, to support the recovery of individuals and families from unexpected crisis such as illness or death of family members, and other crisis situations.

OFFICE OR DIVISION	Office of the Congressman/Aksyon Center			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizen			
WHO MAY AVAIL THE SERVICE	Imus residents and organizations			
	ST OF REQUIREMENTS	WHERE TO SECURE		
FOR MEDICAL ASSISTANCE:				
General Requirements:				
Government Issued ID with Imus Addres (Photocopy back to back)	s and not expired of the Claimant and Beneficiary	Client		
Barangay Indigency of the claimant and	beneficiary (Original Copy)	Barangay Hall		
COMELEC Certification of the claimant a		COMELEC		
* Additional Requirements for Regular				
Updated Medical Certificate (Original or No. and signature)	Certified True Copy with Attending Doctor's License	Doctor or Attending Physician		
Medical Prescription (Photocopy / with A	ttending Doctor's License No. and signature)	Doctor or Attending Physician		
* Additional Requirements for Chemo	therapy and Dialysis:			
Clinical/Medical Abstract (Original or Cer and signature)	tified True Copy with Attending Doctor's License No.	Doctor or Attending Physician		
Treatment Protocol or Price Quotation (C License No. and signature)	Driginal or Certified True Copy with Attending Doctor's	Doctor or Attending Physician		
* Additional Requirements for Hospita	lization/ In-patient:			
Clinical Abstract (Original or Certified Trusignature)	e Copy with Attending Doctor's License No. and	Doctor or Attending Physician		
Hospital bill (Original copy only with sign	ature of the billing clerk/staff)	Hospital		
Promissory Note if hospital bill is still unp the billing clerk/staff)	baid (Original or Certified True Copy with signature of	Hospital		
FOR BURIAL ASSISTANCE:				
Government Issued ID with Imus Addres	s and not expired of the Claimant and Beneficiary	Client		
Barangay Indigency of the claimant and	beneficiary (Original Copy)	Barangay Hall		





COMELEC Certification of the claimant and beneficiary (Original copy)		COMELEC		
Registered Death Certificate (Certified Tru		Imus City Hall		
Funeral Contract (Certified True Copy or C	Driginal)	Funeraria		
Certificate of Balance or Promissory Note-	if unpaid	Funeraria		
FOR FINANCIAL ASSISTANCE:				
For Subsistence:				
Government Issued ID with Imus Address	and not expired of the Claimant and Beneficiary	Client		
Assistance for fire victims:				
Government Issued ID with Imus Address	and not expired of the Claimant and Beneficiary	Client		
Barangay Indigency of the claimant (Origin	nal Copy)	Barangay Hall		
Fire Incident Report (Original Copy)		BFP		
Picture of the burnt house		Client		
For Balik-Probinsya				
Government Issued ID with Imus Address	Government Issued ID with Imus Address and not expired of the Claimant and Beneficiary			
Price Quotation of the Transportation/Fare		Transportation te	erminal (ex. bus terminals, tr	avel agency, etc.)
· · · ·		•	· · · ·	
		FEES TO BE		
CLIENT STEPS	AGENCY ACTION	PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present documents at the information	AGENCY ACTION 1.1 Assess the correctness and completeness of the requirements.		3 minutes	PERSON RESPONSIBLE Concierge/ Receptionist
	1.1 Assess the correctness and completeness of	PAID		
1. Present documents at the information	1.1 Assess the correctness and completeness of the requirements.1.2 Provide Queueing Number (if qualified), if not,	PAID None	3 minutes	
 Present documents at the information desk of the Aksyon Center Wait for the queuing number to be 	 1.1 Assess the correctness and completeness of the requirements. 1.2 Provide Queueing Number (if qualified), if not, explain the deficiencies in requirements 2.1 Registration of the client information in the system and proceed for biometrics. And check if the client has existing record or qualified to avail the 	PAID None None	3 minutes 1 minute	Concierge/ Receptionist
 Present documents at the information desk of the Aksyon Center Wait for the queuing number to be 	 1.1 Assess the correctness and completeness of the requirements. 1.2 Provide Queueing Number (if qualified), if not, explain the deficiencies in requirements 2.1 Registration of the client information in the system and proceed for biometrics. And check if the client has existing record or qualified to avail the assistance. 	PAID None None None	3 minutes 1 minute 5 minutes	Concierge/ Receptionist

CITIZEN'S CHARTER



4. Proceed to the Social Worker for Intake sheet	4.1 Verify the completeness of documents then conduct interview for the intake sheet.	None	8 minutes	Social Worker
	4.2 Assess and Approve the application.4.3 Print intake sheet	None None		
	4.4 Document for signature	None		
5. Wait for the schedule of the payout	5. Inform and notify the client that they will receive a message or call if there's a schedule already.	None	1 minute	Social Worker/Staff
6. Receive a call or text for the schedule	6. Text or Call the Client regarding the schedule	None	(stop time)	Staff
7. Receive assistance on the said schedule	7. Releasing of assistance.	None	3 minutes	DSWD Staff
	Fill-out Client Satisfaction Ratir	ng Form		-
	TOTAL	None	25 minutes	

* NOTE: The financial assistance will be given in a specific schedule (within three (3) weeks).







OFFICE OR DIVISION	Office of the Congressman/Aksyon	Office of the Congressman/Aksyon Center			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen, G2B	B – Government to Business, G	2G – Government to Gov	/ernment	
WHO MAY AVAIL OF THE SERVICE	All				
CHECKLIST OF RE	EQUIREMENTS		WHERE TO SECURE		
Request Letter addressed to the Congrevatid ID	essman with attached photocopy of				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request letter address to Cong. Adrian Jay C. Advincula and wait for the scheduled meeting.	1.1 Assess the request letter.	None	4-5 minutes	Catherine G. Ico Angeline C. Latac.	
	1.2 Inform and approve the Chief of Staff regarding the request.1.3 Finalize the schedule.1.4 Inform the client	None	1 day (stop time)	Angeline C. Latac	
2. Attend the scheduled meeting.	2. Assist the client.	None	5 minutes		
	Fill-put Client S	Satisfaction Rating Form	1	L	
	TOTAL	Based on assessment	1 day, 10 minutes		
Schedule of the meeting depends on the	e availability of the Congressman	1		1	

2. SCHEDULING OF APPOINTMENT FOR AN AUDIENCE/ MEETING WITH THE CONGRESSMAN

*Schedule of the meeting depends on the availability of the Congressman





3. ISSUANCE OF CONGRESSMAN'S ENDORSEMENT/REFERRAL

Congressman's Endorsement/Referral is a correspondence provided to individuals or organizations seeking employment, sponsorship, or any form of assistance.

assistance.					
OFFICE OR DIVISION	Office of the Congressman/Aksyon Center				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen				
	ST OF REQUIREMENTS	WHERE TO SECURE			
For Endorsement for School:					
School credentials / Records		Issuing School			
Request letter address to Cong.		Client			
	address and 3 specimen signature)	Client			
Barangay Clearance		Respective barangay			
For Endorsement for Job App					
Curriculum Vitae (for first time jo		Client			
Request letter address to Cong.	Adrian Jay C. Advincula	Client			
Barangay clearance		Respective barangay			
Photocopy of valid Id (with Imus address and 3 specimen signature)		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLI	
1. Submit the requirements	1.1 Assess the submitted requirements	None	5 minutes	Catherine G. Ico Klaeford Crispin	
	1.2 Process the document	None	5 minutes	Klaeford Crispin	
	1.3 Review the document	None	3 minutes	Allen Bryan R. Atienza	
	1.4 Present the document to the Congressman for the signature	None	1 day	Allen Bryan R. Atienza Klaeford Crispin	
2. Get the document.	2. Release the documents	None	2 minutes	Klaeford Crispin	
	Fill-out Client Satisfa		1 day, 15 minutes	-	

Note: Turn Around Time depends on the availability of Congressman Adrian Jay C. Advincula.





GENERAL SERVICES OFFICE EXTERNAL SERVICES







1. EVENTS

To give free of charge services for borrowing of Sounds System, Led Wall, Chairs, Tent, Cooler Fan (Iwata) based on availability of the said items.

OFFICE OR DIVISION	General Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C - Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
CHECKLIS	F OF REQUIREMENTS		WHERE TO SECUR	RE
Request Letter		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit request letter	1. Check the Schedule and Approve the Request	None	10 minutes	Tolentino Macalalad Kristine Bautista (Tents) Mark Angelo Rodriguez Aldrin Miranda Wilson Miranda Marius Enkeel Magbanua John Carlo Rodriguez (Sounds) Ernesto Menancio Jr. John Michael Orozco Geofferson Mantilla Marjun Tunog Marvic Rodriguez (Tables and Chairs) Maximiano Villanueva Zaldy Terregoza
			-	Feliciano Virata Jr.
	TOTAL	None	10 minutes	







2. TRANSPORTATION (REQUEST OF BUS, COASTER OTHER VEHICLE) To give Transportation Services to all Imusenos.

To give transportation betwees					
OFFICE OR DIVISION	General Services Office	General Services Office			
CLASSIFICATION	Highly - Technical				
TYPE OF TRANSACTION	G2C - Government to Citizen; G2G – Gov	ernment to Government			
WHO MAY AVAIL THE SERVICE	Bus – All residents of Imus; Coaster – Gov	ernment Elected Officia	I, Department Head and	Foreign Visitors	
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECUR	RE	
Request Form		General Services Offic	e		
Request Letter		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1 Fill-out Request Form1.2 Submit Request Form and Letter Request with approval of the City Mayor	1.1 Checking the Schedule and Approved the Request.1.2 Give to the requesting party the Guidelines on the use of City Government Bus/Coaster	None	10 minutes 5 minutes	Marie Charitess Landicho Administrative Officer IV (Driver and Crew) Wilner Dela Cruz Jorge Perez John Reagan Jancon Alexander Reyes Romulo Cambalisa Clark Calitis Winston Binas Nelson Ongtan	
	Fill-out Client Satisfac	Ŭ			
	TOTAL	None	15 minutes		

NOTE: The borrower should provide the following; Fuel, Toll Gate and Other Expenses such as Hotel Accommodation and Food for the Driver and Assistant







3. CEMETERY CARETAKER

To give assistance to all re	elative for Public Cemetery				
OFFICE OR DIVISION	General Services Office	General Services Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVIC	E All residents of Imus				
CHECKL	IST OF REQUIREMENTS		WHERE TO SEC	URE	
Death Certificate		City Civil Registrar's Office			
Burial Permit		Business Permits and I	icensing Office		
Clearance of Excavation		Business Permits and Licensing Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements.	1. Assist the relative and secure the Permit or Clearance of Excavation.	None	10 minutes	Nelson Vasquez Roque Enrique Guinto Rockie Vasquez	
	TOTAL	None	10 minutes		







GENERAL SERVICES OFFICE







1. RECORDING OF PURCHASE REQUEST

To give assistance to all Official Representative of City Government for processing of vouchers.

OFFICE OR DIVISION	General Services Office	General Services Office			
CLASSIFICATION	Simple	limple			
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE	
Purchase Request (PR)		Respective offices			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submission of Purchase Request	1. Posting to oversight Committee	None	10 minutes	Marie Charitess Landicho Mary Grace Ordona Rubi Rose Orcullo	
2. Submission of Purchase Request and Pre-Inspection for repair of vehicle	2. Initialing, checking and recording of Purchase Request and preparing of Pre- inspection	None	10 minutes	Dennis Parcero Asst. Dept. Head Marie Charitess Landicho Administrative Officer IV Michael Santiaguel Rose Divine Booc (motorpool Pre-Inspection)	
	TOTAL	None	20 minutes		







2. RECORDING OF PURCHASE ORDER, VOUCHER, INSPECTION

To give assistance to all Official Representative of City Government for processing of vouchers.

	Conorol Sonvione Office			
OFFICE OR DIVISION	General Services Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	City Government of Imus			
	OF REQUIREMENTS		WHERE TO SEC	URE
Purchase Order (PO)		Respective Offices		
Request for Quotation (RFQ)		Respective Offices		
Inspection Reports		Respective Offices		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of Purchase Order and Post Inspection	1. Recording of Purchase Order	None	7 minutes	Marie Charitess Landicho Administrative Officer IV
				Noel Sapinoso Raquel Dumlao Michael Santiaguel Rose Divine Booc (motorpool Post- Inspection
2. Signing of RFQ (Request for Quotation) and Abstract of Canvass	2. Initialing or signing of RFQ	None	10 minutes	Lauro D. Monzon OIC-General Services Office
3. Submit duly accomplished inspection report form and request for Inspection – GSO Team	3. Inspect all the item purchase by the City Government of Imus	None	2 hours	Dennis I. Parcero Asst. Department Head Marie Charitess Landicho Administrative Officer IV
				Joselito Cabrera Olivia Ramos Delfin Sanez Jr Manolito Sahol Rogelio Camet Allan Encabo Ronaldo Del Rosario Sherwin Saria

CITIZEN'S CHARTER

				Roland Reiner Lacson Jeramel Salamat Jerome Saria Joehel Alcantara Alexander Reyes
4. Submit Duly accomplished Inspection Report and signing – City Government of Imus Inspection	4. Recording of Purchase Order	None	2 hours	Joselito Cabrera Olivia Ramos
5. Signing of Inspection and Acceptance	5. Await Inspection result (Approved Report) from the GSO Head or the Authorized Signatory	None	1 day	Lauro D. Monzon OIC-General Services Office
	TOTAL	None	2 days	







3. PURCHASING AND ISSUANCE OF EQUIPMENT OFFICE SUPPLIES AND MEDICINE

To prepare and release of all Equipment, Office Supplies, Medicine and other materials or supplies.

<u> </u>	all Equipment, Onice Supplies, Medicine and Other				
OFFICE OR DIVISION	General Services Office				
CLASSIFICATION	Highly-technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVIC	E City Government of Imus				
CHECKLI	IST OF REQUIREMENTS		WHERE TO SECUR	ECURE	
Request Letter Respective					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Request for Equipment, Office Supplies, Medicine and other materials or supplies	1.1 Canvassing of Prices for Regular Monitoring	None	4 hours	Marie Charitess Landicho Administrative Officer IV Erlinda Sanez Rose Orcullo Jennifer Sapanghila Maricris Antique Raquel Dumlao (Vehicle) Nelson James Fajardo Jam Israel Marasigan (Motorpool) Michael Santiaguel Richie Topacio Keith Anin Elmer Bautista	
	1.2 Preparation of Office Supplies per department	None	15 days	Marie Charitess Landicho Administrative Officer IV Erlinda Sanez Rubi Rose Orcullo Raquel Dumlao Maricris Antique Jennifer Sapanghila Jennifer Cuenca	





1.3 Preparation of li	st of Equipment	None	3 hours	Marie Charitess Landicho Administrative Officer IV Jeramel Salamat
				Delfin Sanez Jr. Jerome Saria Rogelio Camet Roland Reiner Lacson Joehel Alcantara Sherwin Saria
2. Prepare the Requisitioning Issue Slip (RIS) or Supply other supplies Ledger Card	ng of Office Supplies, and	None	2 hours	Manolito Sahol Marie Charitess Landicho Administrative Officer IV
				Erlinda Sanez Rubi Rose Orcullo Raquel Dumlao Maricris Antique
				Jennifer Sapanghila Alan Salazar Romy Lee Ancheta Alan Encabo
	TOTAL	None	16 days	Ronaldo Del Rosario Roland Reiner Lacson Jennifer Cuenca





4. PROVISION FOR CUSTODIAL OF PROPERTIES, LABELING, TAGGING/INDEXING OF PURCHASE EQUIPMENT, FURNITURE AND FIXTURE, VEHICLES & OTHER PROPERTY (LAND, TITLE AND BUILDING)

- The PRS Shall be issued upon return of all unserviceable properties
- The ARE/PAR shall be used to acknowledge the receipt of property and equipment for official used form the property office
- The ICS shall be used to acknowledge the receipt of items with serviceable life of more than one year but small enough to be considered as PPE

OFFICE OR DIVISION	General Services Office		· · · · · ·	
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	City Government of Imus			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Custodial Forms		General Services Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure and fill up all forms needed	1.1 Issuance of letter for scheduled of inventory per department	None	5 minutes	Marie Charitess Landicho Administrative Officer IV
	1.2 Inventory of equipment per department, School, Barangay & other Government Agency	None	7 minutes/item	Delfin Sanez Jr Joehel Alcantara Jeramel Salamat Roland Reiner Lacson Manolito Sahol Rogelio Camet Jerome Saria Sherwin Saria
2. Submit accomplished PRS, PIS, ARE, Waste Materials, Clearance	2.1 Issuance of Property Return Slip, Property Issue Slip, Acknowledgement Receipt, Inventory Custodian Slip, Waste Materials Clearance	None	15 minutes	Marie Charitess Landicho Administrative Officer IV Jeramel Salamat; Delfin Sanez Jr.; Jerome Saria
	2.2 Secure control number of property (Labeling/tagging & indexing)	None	7 minutes/item	Delfin Sanez Jr Joehel Alcantara Jeramel Salamat Roland Reiner Lacson Manolito Sahol Rogelio Camet Jerome Saria

CITIZEN'S CHARTER

			Sherwin Saria
2.3 Submit the PRS, PIS, AIR, IC Materials for signature by the GSO He Authorized Signatory		5 minutes	Lauro D. Monzon OIC-General Services Office
2.4 Recording & Inventory of Infrastr Recording & Inventory of All property Recording & Inventory of All (Equipment)	(Land); or	15 minutes	Marie Charitess Landicho Emmanuel Gernale (Infrastructure) Marie Charitess Landicho (Land) Marie Charitess Landicho Delfin Sanez Jr. Jerome Saria
			Jeramel Salamat Manolito Sahol Rogelio Camet Roland Reiner Lacson Joehel Alcantara Sherwin Saria (Equipment)
2.5 Disposal of Property	None	*1 month (If for disposal)	Dennis Parcero Asst. Department Head Marie Charitess Landicho Supervising Adminstrative Officer Rogelio Camet Delfin Sanez Jerome Saria Michael Santiaguel

CITIZEN'S CHARTER



5. INSPECTION OF ALL EQUIPMENTS, OFFICE SUPPLIES, FURNITURE & FIXTURE, VEHICLES, & OTHER PROPERTIES PURCHASED BY THE CITY GOVERNMENT

To inspect all the property purchase by the City Government

OFFICE OR DIVISION LASSIFICATION YPE OF TRANSACTION VHO MAY AVAIL THE SERVICE	General Services Office Simple G2G – Government to Government City Government of Imus T OF REQUIREMENTS				
HO MAY AVAIL THE SERVICE	City Government of Imus				
	ST OF REQUIREMENTS				
CHECKLIS		WHERE TO SECURE			
nspection Forms		Respective offices			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	1. Inspect all items purchase by the City Government of Imus	None	2 hours	Dennis Parcero Asst. Department Head Marie Charitess Landicho Administrative Officer V Olivia Ramos Ronaldo Del Rosario Delfin Sanez Jr. Jeramel Salamat Joehel Alcantara Sherwin Saria Manolito Sahol Rogelio Camet Alan Encabo Jerome Saria Roland Reiner Lacson	
	TOTAL	None	2 hours		



CITIZEN'S CHARTER

6. MAINTENANCE OF CLEANLINESS OF BUILDING

To serve and maintained the cleanliness of Building and other facility owned by the City Government

OFFICE OR DIVISION	General Services Office	General Services Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVIC	City Government of Imus				
CHECKLI	ST OF REQUIREMENTS	NTS WHERE TO SECURE			
Request Letter or Report		Respective Offices			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Letter of request or	1.1 Monitoring of Cleanliness- Building, Nueno	None	2 hours	Fe Manipol	
report	Avenue, around Park & Plaza			Administrative Officer IV	
				Leniza Sapin	
	1.2 Coordinates with the Engineering office for None 30 minutes				
	the repair and maintenance of different offices				
	TOTAL	None	2 hours, 30 minutes		







7. MOTORPOOL SERVICES

To serve and maintained the owned vehicle of the City Government

OFFICE OR DIVISION	General Services Office	General Services Office			
CLASSIFICATION	Complex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVIC					
	ST OF REQUIREMENTS		WHERE TO SECUR	RE	
Purchase Request		Respective Office			
Purchase Order		Respective Office			
Return of Waste		Respective Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requirements	1. Issuance of Pre-Inspection, Post Inspection of repair of vehicle and waste materials	None	1 hour	John Cris Joson Michael Santiaguel Rose Divine Booc	
2. Bring vehicle	2. Minor and Major repair of vehicle	None	5 days	John Cris Joson Michael Santiaguel Elmer Bautista Herman Quinto Keith Anin Richie Topacio Neil Marie Sapinoso	
	TOTAL	None	5 days and 1 hour		







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8. REGISTRATION OF MOTOR VEHICLE, INSURANCE OF VEHICLES AND OTHER PROPERTIES

To monitor the Registration of Vehicle and insurance of vehicle and other properties of City Government.

OFFICE OR DIVISION	General services office	General services office				
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2G – Government to Government	G2G – Government to Government				
WHO MAY AVAIL THE SERVIC	City Government of Imus					
CHECKLI	CHECKLIST OF REQUIREMENTS WHERE TO SECURE					
None		N/A				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
	1. Monthly registration / inured of vehicle	None	1 week	Marie Charitess Landicho Administrative Officer V Nelson James Fajardo;		
	2. Secure the Insurance of all properties of City Government	None	Once a year	Jam Israel Marasigan Marie Charitess Landicho Administrative Officer V Nelson James Fajardo; Jam Israel Marasigan		
	TOTAL	None	Annual	ourn israel Marasigan		





CITY ENGINEERING OFFICE EXTERNAL SERVICES







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1. ISSUANCE OF EXCAVATION PERMIT

Processing and issuance of Excavation Permit for all the excavation done on roads and sidewalks.

OFFICE OR DIVISION	City Engineering Office			
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2G – Government to Citizens			
WHO MAY AVAIL THE SERVICE	Imus City residents and utility/ telecommunic	cation company contractors		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE		
* For residents/ establishments beside				
	n the utility company contractor concerned	Maynilad Cavite Business Area – Bacoor City		
* For residents/ establishments beside	de National Roads			
Clearance or Certification and Officia	al Receipt of paid bond from the Department	DPWH Cavite District 1 Office – Trece Martirez City		
of Public Works and Highways				
* For Utility Company/ Contractors				
Assessment Letter or Inspection Rep	port from the utility company concerned	Requesting Company Contractor		
Request Letter from the main office of	of the utility company	Requesting Company Contractor		
Company Profile		Requesting Company Contractor		
Memorandum of Agreement/ Contract	ct from Utility Company	Requesting Company Contractor		
Scope of Work		Requesting Company Contractor		
Bill of Materials		Requesting Company Contractor		
Working Schedules		Requesting Company Contractor		
Specification		Requesting Company Contractor		
Safety Guidelines		Requesting Company Contractor		
Certification of Utility Company's ass	igned engineer with contact number	Requesting Company Contractor		
Plans and drawings		Requesting Company Contractor		
Barangay Clearance		Barangay Hall/s of the Area to be Excavated		
CITMO Clearance		City of Imus Traffic Management Office (2 nd Floor Old Municipal Building)		
Developer's Clearance (for subdivision	ons that are not yet turned over to the city	Developer of the Subdivision where the excavation will take place		
government)				
Homeowner's Association Clearance over to the city government)	e (for subdivisions that are already turned	HOA Office of the Subdivision where the excavation will take place		







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1. FOR RESIDENTS/ LEAK REPAIR CONTRACTORS

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements	1. Assess the requirements and issue order of payment		5 minutes	Erson John Villamer, Ramir Posadas Paul John Pallera, Rose Ann Legaspi, Charlyn Lu Cuenca, Glicerio Camama,
2. Payment of assessed fees	2. Issue Official Receipt (O.R.)	See table of fees below	2 minutes	Treasurer's Office
3. Present O.R. and claim Excavation Permit	3. Issue Excavation Permit	ion Doting Form	3 minutes	Engr. Edward dela Cruz, Paul John Pallera, Rose Ann Legaspi, Charlyn Lu Cuenca, Glicerio Camama, Erson John Villamer, Ramir Posadas
	Fill-out Client Satisfact	0	1	
	TOTAL	Based on assessment	10 minutes	

2. FOR UTILITY COMPANY CONTRACTORS 2.1 MAYNILAD CONTRACTORS

CLIENT STEPS AGENCY ACTION		AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. requir	Submit o rements	complete	1. Assess the requirements and issue order of payment	None	5 minutes	Erson John Villamer, Ramir Posadas, Paul John Pallera, Rose Ann Legaspi, Charlyn Lu Cuenca, Glicerio Camama
2. Pa	yment of assesse	d fees	2. Issue Official Receipt (O.R.)	See table of fees below	2 minutes	Treasurer's Office

CITIZEN'S CHARTER



3. Present O.R. and claim	3. Issue Permit	None	3 minutes	Engr. Edward dela Cruz,
Excavation Permit				Paul John Pallera,
	For Unpaid Cash Bond:			Rose Ann Legaspi,
	Issue Temporary Excavation Permit			Charlyn Lu Cuenca,
				Glicerio Camama,
	For Paid Cash Bond:			Erson John Villamer,
	Issue Excavation Permit			Ramir Posadas
	Fill-out Client Satisfaction	on Rating Form		
	TOTAL	Based on	10 minutes	
		assessment		

2.2 MERALCO & OTHER TELECOMMUNICATION COMPANIES

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete		None	5 minutes	Engr. Jane Ruzel Nacpil,
requirements	Schedule the proposed request for site			Glicerio Camama,
	inspection			Erson John Villamer,
				Ramir Posadas,
				Paul John Pallera
2. Assist the assigned engineer	2. Conduct Inspection and issue order of	None	1 day	Engr. Edward dela Cruz,
during site inspection	payment after inspection			Glicerio Camama,
				Erson John Villamer,
				Ramir Posadas,
				Paul John Pallera
3. Pay the assessment	3. Issue Official Receipt (O.R.)	See table of fees below	2 minutes	Treasurer's Office
4. Claim Excavation Permit	4. Issue Excavation Permit	None	3 minutes	Engr. Jane Ruzel Nacpil,
				Glicerio Camama,
				Erson John Villamer,
				Ramir Posadas,
				Paul John Pallera
	Fill-out Client Satisfact	ion Rating Form		
	TOTAL	Based on	1 day and 8 minutes	
		assessment		





FEE(S)/CHARGE(S):

CLIENTS	GP & EP* Fee	Inspection/ Verification Fee	Metering	Bond
RESIDENTS	P 50.00 Per sq. m.	P 200.00	P 8.00 / water meter	Total Project Cost
LEAK REPAIR CONTRACTORS	P 50.00 Per sq. m.	P 200.00		x 125%
RESIDENTS NEAR NATIONAL ROADS	P 50.00 Per sq. m.	P 200.00	P 8.00 / water meter	(DPWH will assess the Bond to be paid)

*Ground Preparation and Excavation Permit

UTILITY COMPANY CONTRACTOR	Excavation	Inspection/ Verification Fee	Structure Fee	Cash bond
MAYNILAD	Volume x P 3.00 per cu. m.	Restoration Cost x 3%		Total Project Cost x 125%
MERALCO	Volume x P 3.00 per cu. m.	P 200.00/ pole	P 30.00/ pole	
TELECOMMUNICATION COMPANIES	Volume x P 3.00 per cu. m.	P 200.00/ pole	P 25.00/ pole	

CITIZEN'S CHARTER





2. MAINTENANCE OF DRAINAGE WITHIN THE CITY

Cleaning and de-clogging of all drainage systems within the city.

OFFICE OR DIVISION	Engineering				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	Sovernment to Citizens			
WHO MAY AVAIL THE SERVICE	Barangays, subdivisions, and concerned citiz	ens			
CHECKLIST	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Request letter (addressed to the City	/ Mayor and endorsed to the City Engineer)	The requesting party n	eeds to file the request le	etter to the City Mayor	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requirement	1. Assess the request.	None	3 minutes	Marissa Talastas, Annalyn Ramos, Kathleen Hernandez, Angelieca Habana	
2. Assist the engineering staff during inspection/ actual cleaning	2. Inspection and actual cleaning of the requested area	None	5 days	Pablito Clerigo, all maintenance staff	
TOTAL None 5 days, 3 minutes					







CITY ENGINEERING OFFICE INTERNAL SERVICES







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1. DRAFTING PROGRAM OF WORKS FOR ALL VARIOUS CITY PROJECTS

Creation of program of works and cost estimate for various city projects.

	and cost estimate for various city projects.				
OFFICE OR DIVISION	City Engineering Office				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	Barangays, subdivisions, and concerned cit	izens			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE	
Barangay/ HOA Resolution		Barangay hall / HOA C	Office		
Request letter (addressed to the City	r (addressed to the City Mayor and endorsed to the City Engineer) The requesting party needs to file the request letter to the City			etter to the City Mayor	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit complete requirements	1. Assess requested program of works.	None	3 minutes	Marissa Talastas, Annalyn Ramos, Kathleen Hernandez, Angelieca Habana	
2. Accompany the engineering staff during inspection	2.1 Inspect proposed-projects.	None	1 day	Mario Bare, Rowel Dela Cruz, Mario Galvez, Michael Molina, Engr. Jane Ruzel Nacpil, Engr. Edward Dela Cruz	
	2.2 Planning and drawing of proposed projects.	None	3 days	Erson John Villamer Michael Molina, Ramir Posadas, Marvin Catacutan, Paul John Pallera	
	2.3 Drafting the program of works for the inspected project.	None	1 day	Mario Bare, Rowel Dela Cruz, Mario Galvez, Michael Molina, Engr. Jane Ruzel Nacpil, Engr. Edward Dela Cruz Engr. Enrico Luis Escobar Engr. Rommel John Gandia Engr. Jezreel Dan Gonzales	

CITIZEN'S CHARTER



2.4 Transmittal of program of works to the admin office	None	3 minutes	Annalyn Ramos, Kathleen Hernandez, Angelieca Habana		
Fill-out Client Satisfaction Rating Form					
TOTAL	None	5days and 6 minutes			
	admin office Fill-out Client Satisfac	admin office Fill-out Client Satisfaction Rating Form	admin office Fill-out Client Satisfaction Rating Form TOTAL None 5days and 6		

NOTE: Processing time depends on the approval of plans and programs drafted by the City Engineering Office.

2. PREPARATION OF VOUCHERS AND WORK ACCOMPLISHMENTS FOR COMPLETED GOVERNMENT PROJECTS

Preparation and processing of vouchers and work accomplishments for completed government projects.

OFFICE OR DIVISION	City Engineering Office	ity Engineering Office				
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2B– Government to Business, G2G- Gover	32B– Government to Business, G2G- Government to Government				
WHO MAY AVAIL THE SERVICE	Contractor of the project					
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	CURE		
Photos of the projects done (before,	on-going, after)	Contractor				
Bidding Documents or BAC Resoluti	on from BAC Office	BAC Office				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	Processing time	PERSON RESPONSIBLE		
1. Submit complete requirements	1. Preparation of required documents for billing	None	10 minutes	Marissa Talastas		
2. Signing of Documents	2. Processing of billing for complied documents	None	2 days	Annalyn Ramos, Kathleen Hernandez, Angelieca Habana		
Fill-out Client Satisfaction Rating Form						
	TOTAL	None	2 days and 10 minutes			





3. PROCESSING OF VOUCHER FOR REFUND OF BOND

Preparation and processing of vouchers for restored excavation projects.

1. Submit complete requirements 1. Assess the requirements and issue None 3 minutes Paul John Certification and Voucher Certification and Vouch					
TYPE OF TRANSACTION G2C – Government to Citizens WHO MAY AVAIL THE SERVICE Residents/ leak repair contractors CHECKLIST OF REQUIREMENTS WHERE TO SECURE Issued Official Receipt of Performance Bond The Official Receipt is kept by the owner upon application Photo of restored road area The Official Receipt is kept by the owner upon application Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office City Engineering Office Valid I.D. (for claiming) Client PROCESSING TIME PERSON RES 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher None 3 minutes Paul John Rose Ann Charlyn Lu Glicerio Ca	FFICE OR DIVISION	City Engineering Office			
WHO MAY AVAIL THE SERVICE Residents/ leak repair contractors CHECKLIST OF REQUIREMENTS WHERE TO SECURE Issued Official Receipt of Performance Bond The Official Receipt is kept by the owner upon application Photo of restored road area The Official Receipt is kept by the owner upon application Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office Valid I.D. (for claiming) Client 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher None 3 minutes Paul John Rose Ann Charlyn Lu Glicerio Ca	LASSIFICATION	omplex			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE Issued Official Receipt of Performance Bond The Official Receipt is kept by the owner upon application Photo of restored road area The Official Receipt is kept by the owner upon application Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office Valid I.D. (for claiming) Client CLIENT STEPS AGENCY ACTION 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher None 3 minutes Paul John Rose Ann Charlyn Lu Glicerio Ca	YPE OF TRANSACTION	2C – Government to Citizens			
Issued Official Receipt of Performance Bond The Official Receipt is kept by the owner upon application Photo of restored road area The inspection team/ applicant can submit the photo Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office Valid I.D. (for claiming) Client 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher None 3 minutes Paul John Rose Ann Charlyn Lu Glicerio Ca	HO MAY AVAIL THE SERVICE	esidents/ leak repair contractors			
Photo of restored road area The inspection team/ applicant can submit the photo Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office Valid I.D. (for claiming) Client CLIENT STEPS AGENCY ACTION 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher	CHECKLIST	REQUIREMENTS		WHERE TO SECUR	RE
Photo of restored road area The inspection team/ applicant can submit the photo Request letter for Certificate of Completion or Certificate of acceptance from the Main Office Main Office of the Contractor Company/ Utility Company Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the city City Engineering Office Valid I.D. (for claiming) Client CLIENT STEPS AGENCY ACTION 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher	sued Official Receipt of Performan	Bond	The Official Receipt is	kept by the owner upon a	application
Main Office Certificate of Acceptance/ Receipt of Contractor's Tax/ Photos of Project Done * This requirement is for the Contractor of large scale excavation done within the City Engineering Office Valid I.D. (for claiming) Client CLIENT STEPS AGENCY ACTION FEES TO BE PAID PROCESSING TIME PERSON RES 1. Submit complete requirements 1. Assess the requirements and issue Certification and Voucher None 3 minutes Paul John Charlyn Lu Glicerio Ca			The inspection team/ a	pplicant can submit the p	ohoto
* This requirement is for the Contractor of large scale excavation done within the city Valid I.D. (for claiming) Client CLIENT STEPS AGENCY ACTION FEES TO BE PAID PROCESSING TIME PERSON RES 1. Submit complete requirements and issue Certification and Voucher Certification and Voucher Glicerio Ca		tion or Certificate of acceptance from the	Main Office of the Con	tractor Company/ Utility (Company
CLIENT STEPSAGENCY ACTIONFEES TO BE PAIDPROCESSING TIMEPERSON RES1. Submit complete requirements1. Assess the requirements and issue Certification and VoucherNone3 minutesPaul John Rose Ann Charlyn Lu Glicerio Ca	This requirement is for the Contrac	City Engineering Office			
1. Submit complete requirements 1. Assess the requirements and issue None 3 minutes Paul John Certification and Voucher Certification and Vouch	alid I.D. (for claiming)		Client		
Certification and Voucher Rose Ann Charlyn Lu Glicerio Ca	CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Ramir Po	. Submit complete requirements		None	3 minutes	Paul John Pallera Rose Ann Legaspi Charlyn Lu Cuenca Glicerio Camama Erson John Villamer Ramir Posadas
		Issue the certification.	None	5 minutes	Office of the City Accountant
TOTAL None 8 minutes					





	chers for restored excavation projects.			
OFFICE OR DIVISION	City Engineering Office			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Maynilad Contractors			
CHECKLIST OF I	REQUIREMENTS		WHERE TO SECUR	RE
Request letter for Certificate of Completion	วท	Maynilad Main Office		
AS Built Plan (A3 & E-File)		Maynilad Main Office		
Pictures (Before & After)			and after the excavation/	restoration procedure
Company's Contact Number		Maynilad Main Office		
Barangay Clearance			where the excavation too	k place
Field Density Test Result		Done during actual res		
Concrete Testing Result		Done after concrete po	ouring of the project	
Plastic Envelope		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements	Assess the request. Schedule the client for site inspection	None	5 minutes	Erson John Villamer, Ramir Posadas, Paul John Pallera, Rose Ann Legaspi, Glicerio Camama, Charlyn Lu Cuenca
2. Assist the assigned engineer during site inspection	2. Site inspection	None	1 day	Erson John Villamer, Ramir Posadas, Glicerio Camama, Paul John Pallera
3. Claim Certificate	3. Issue Certificate of Completion	None	5 minutes	Erson John Villamer, Ramir Posadas, Paul John Pallera, Rose Ann Legaspi, Glicerio Camama, Charlyn Lu Cuenca
4. Proceed to the Sangguniang Panglungsod Building for signature of	4. Secure the signature of the City Councilor for Infra/ Special Projects	None	3 minutes	Sangguniang Panlungsod Office

4. PROCESSING OF VOUCHER FOR REFUND OF BOND (PRE-REQUISITE: CERTIFICATE OF COMPLETION) Preparation and processing of vouchers for restored excavation projects.





City Councilor for Infrastructure/ Special				
Projects	Received the copy of the certificate			
Fill-out Client Satisfaction Rating Form				
TOTAL None 1 day and 16				
			minutes	







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	Vouchers for restored excavation projects.			
OFFICE OR DIVISION	City Engineering Office			
	Complex		000 0	
TYPE OF TRANSACTION	G2G – Government to Government, G2C – C	sovernment to Citizens,	, G2B – Government	to Business
WHO MAY AVAIL THE SERVICE	Maynilad Contractors			
	OF REQUIREMENTS Where to secure			ire
Certificate of completion		Client (Acquired from the	j /	
Request letter for re-inspection of res		Maynilad main office/ c		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements	1. Assess the request. Schedule the client for site inspection	None	5 minutes	Erson John Villamer, Ramir Posadas. Paul John Pallera, Rose Ann Legaspi, Glicerio Camama, Charlyn Lu Cuenca
2. Assist the assigned engineer during site inspection	2. Site inspection	None	1 day	Erson John Villamer, Ramir Posadas, Paul John Pallera, Glicerio Camama
3. Claim Certificate	3. Issue Certificate of Acceptance	None	5 minutes	Erson John Villamer, Ramir Posadas, Paul John Pallera, Rose Ann Legaspi, Glicerio Camama, Charlyn Lu Cuenca
4. Proceed to the Sangguniang Panglungsod Building for signature of City Councilor for Infrastructure/ Special Projects	4. Secure the signature of the City Councilor for Infra/ Special Projects	None	3 minutes	Sangguniang Panlungsod Office
5. Return a copy of the certificate	5. Receive the copy of the Certificate	None	3 minutes	City Engineering Office
	Fill-out Client Satisfac	tion Rating Form		·
	TOTAL	None	1 day and 16 minutes	

5. PROCESSING OF VOUCHER FOR REFUND OF BOND (PRE-REQUISITE: CERTIFICATE OF ACCEPTANCE) Preparation and processing of vouchers for restored excavation projects.

CITIZEN'S CHARTER



ARCHITECTURAL PLANNING AND DESIGN OFFICE INTERNAL SERVICES







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1. PLANNING AND DESIGN OF PROPOSED GOVERNMENT PROJECTS

Making of plans and design space requirements for government offices and entities.

OFFICE OR DIVISION	City Architectural Planning and Design Office	City Architectural Planning and Design Office		
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERV				
	(LIST OF REQUIREMENTS		WHERE TO SEC	URE
	ne mayor and endorsed to the City Architect			t letter to the City Mayor
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requirement	1.1 Assess request for proposed architectural project or plan.	None	3 minutes	Daniel Seno Clerk IV; Christine Joy Casido Bookbinder III;
	1.2 Inspect proposed project site.	None	1 day	Aris Amador Cuenca Draftsman I; Bon Edeeson Vidal Draftsman I
	1.3 Plan and draw the proposed government project	None	Depending on the technicality of the project	Aris Amador Cuenca Draftsman I; Bon Edeeson Vidal Draftsman I
2. Acquire requested plan	2. Provide plan	None	3 minutes	Daniel Seno Clerk IV; Christine Joy Casido Bookbinder III;
	TOTAL	None	Depending on the technicality of the project	







2. FIELD SURVEYS, INSPECTIONS, AND TECHNICAL INVESTIGATIONS

Field inspection/ technical investigation for the creation of plans for Government Buildings.

OFFICE OR DIVISION	City Architectural Planning and Design Of	City Architectural Planning and Design Office				
CLASSIFICATION	Highly Technical					
TYPE OF TRANSACTION	G2G – Government to Government					
WHO MAY AVAIL THE SERV	CE City officials/ other government offices					
CHECK	LIST OF REQUIREMENTS		WHERE TO SEC	URE		
Request letter (addressed to th	e mayor and endorsed to the City Architect	The requesting party i	needs to file the reques	t letter to the City Mayor		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit requirement	1.1 Assess request for proposed architectura project or plan	I None	3 minutes	Daniel Seno Clerk IV		
	1.2 Conduct filed surveys, inspections, and/c investigations	r None	1 day	CAPD Office Staff; Arch. Roel Saquilayan City Architect		
	1.3 Plan and print out the approved/ revised pla of the project	n None	5 days	Aris Amador Cuenca Draftsman I; Bon Edeeson Vidal Draftsman I		
2. Acquire requested plan	2. Provide the approved plan and finding on th inspected plan	e None	3 minutes	Daniel Seno Clerk IV; Christine Joy Casido Bookbinder III;		
	ΤΟΤΑ	L None	6 days, 6 minutes			







CITY INFORMATION TECHNOLOGY AND RECORDS MANAGEMENT UNIT EXTERNAL SERVICES







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1. CCTV FOOTAGE REVIEW

Viewing of CCTV Footage/s within City Government premises for security reasons and other legal purposes.

OFFICE OR DIVISION	City Information Technology and Records Ma	ty Information Technology and Records Management Unit			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G - Government to Government, G2B -Government to Business, G2C - Government to Citizens				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	and General Public			
CHECKLIST	OF REQUIREMENTS WHERE TO SECURE				
Approved CCTV Request Form		Office of the City Admi	nistrator		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the approved CCTV	1.1 Receive the approved CCTV Request	None	2 minutes	Technical Staff	
Request Form	Form				
	1.2 Assessment of Request	None			
2. Wait for the CCTV footage viewing schedule		None	2 hours	Technical Staff	
	Fill-out the Client Satisfa	action Rating Form			
	TOTAL	None	2 hours and 2 minutes		

NOTE: Processing time varies depending on the scope of investigation.







CITY INFORMATION TECHNOLOGY AND RECORDS MANAGEMENT UNIT INTERNAL SERVICES







1. IT EQUIPMENT REPAIR AND MAINTENANCE

Troubleshooting and repair or maintenance for all types of IT equipment (desktop, laptop, monitor, other peripherals, access points, switches, etc.)

OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E	
Online IT Request Form or		CITRMU (via QR Code	e)		
Request Letter		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill up and submit Online IT	1.1 Receive the Online IT Request Form	None	2 minutes	Ronabelle Silla	
Request Form				Administrative Asst. IV	
	1.2 Assessment of Request	None			
	1.3 Assign Technical Staff	None			
2. Wait for the release of IT Equipment	2.1 Repair or maintenance of IT equipment	None	3 hours	Technical Staff	
-40.5	2.2 Release the repaired IT equipment	None			
	Fill-out the Client Satisf	action Rating Form			
	TOTAL	None	3 hours and 2 minutes		

NOTE: Processing time varies depending on the technicality of IT procedures to be made and availability of Technical Staff.





2. INSTALLATION OF VARIOUS SOFTWARE

Provide necessary technical assistance and support: installation and updating of various software such as Operating System, MS Office, and all needed software/applications.

OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Online IT Request Form OR Request Letter		CITRMU (via QR Code) Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill up and submit Online IT	1.1 Receive the Online IT Request Form	None	2 minutes	Ronabelle Silla	
Request Form				Administrative Asst. IV	
	1.2 Assessment of Request	None			
	1.3 Assign Technical Staff	None			
2. Receive technical assistance and	2.1 Installation	None	1 hour	Technical Staff	
support	2.2 Endorse installed software	None			
	Fill-out the Client Satisfa	action Rating Form	<u> </u>	<u> </u>	
	TOTAL	None	1 hour and		
			2 minutes		

NOTE: Processing time varies depending on the type of software to be installed.





3. TECHNICAL SUPPORT FOR VIRTUAL PROJECTS AND PROGRAMS

Provide necessary technical assistance and support: setup for livestreams, online meetings and conferences.

OFFICE OR DIVISION	City Information Technology and Records Ma	inagement Unit		
CLASSIFICATION	Highly Technical	~		
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	5		
CHECKLIST	KLIST OF REQUIREMENTS WHERE TO SECURE			
Request Letter (Approved by the De	partment Head)	Client		
Online IT Request Form		CITRMU (via QR Code)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill up and submit Online IT	1.1 Receive the Request Letter and Online	None	2 minutes	Ronabelle Silla
Request Form and Request Letter	IT Request Form			Administrative Asst. IV
	1.2 Assessment of Request	None		
	1.3 Check schedule availability	None		
2. Receive technical assistance and support	2. Setup necessary IT equipment	None	1 hour	Karl Foz IT Officer I
	Fill-out the Client Satisfa	action Rating Form		
	TOTAL	None	1 hour and 2 minutes	

NOTE: Processing time varies depending on the technicality of IT procedures to be made.





4. COMMISSIONING OF INTERNET ACCESS

Provide internet access levels.

OFFICE OR DIVISION	City Information Technology and Records Management Unit					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	5				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
Online Device Registration Form		CITRMU (via QR Code	e)			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Fill up and submit Online Device Registration Form	1.1 Receive the Online Device Registration Form	None	4 minutes	Krissell Andal Info. Systems Analyst I		
	1.2 Assessment of Registered Device	None		Vanessa Mendoza Computer Operator I		
	1.3 Verification	None				
2. Wait for Internet access	2. Provide internet access level	None	10 minutes	Karl Foz IT Officer I		
	TOTAL	None	14 minutes			

NOTE: Processing time varies depending on the volume of requests for Internet access.







5. OCULAR ASSESSMENT FOR NETWORK CABLING

Provide network access: installation of network cabling and necessary network equipment.

OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Request Letter (Approved by the Dep	partment Head)	Client			
Online IT Request Form	· · · · · · · · · · · · · · · · · · ·	CITRMU (via QR Code	e)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill up and submit Online IT Request Form and Request Letter	1.1 Receive the Request Letter and Online IT Request Form	None	1 minute	Ronabelle Silla Administrative Asst. IV	
	1.2 Assessment of Request	None	2 minutes	Karl Foz IT Officer I	
	1.3 Set schedule and assign Technical Staff	None	2 minutes	Ronabelle Silla Administrative Asst. IV	
2. Settle schedule for Ocular Assessment and installation	2.1 Ocular Assessment	None	3 hours	Karl Foz IT Officer I	
	2.2 Installation	None		and Technical Staff	
	Fill-out the Client Satisfa	action Rating Form			
	TOTAL	None	3 hours and 5 minutes		

NOTE Processing time varies depending on the technicality of IT procedures to be made.





6. REQUEST FOR NEW CUSTOM-BUILT SYSTEM

Development or creation of custom-built system.

OFFICE OR DIVISION	City Information Technology and Records Ma	anagement Unit			
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	3			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Request Letter (Approved by the De	partment Head)	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the Request Letter	1.1 Receive the Request Letter for a new system	None	2 minutes	Ronabelle Silla Administrative Asst. IV	
	1.2 Assessment of Request	None	5 minutes	Grace Catolico OIC-CITRMU	
	1.3 Approval of Request	None	25 minutes	Grace Catolico OIC-CITRMU	
2. Receive system	2.1 Development of a new system	None	6 months	Krissell Andal Info. Systems Analyst I	
	2.2 Endorse system	None	1 hour and 30 minutes	Vanessa Mendoza Computer Operator I	
	TOTAL	None	6 months and 2 hours		

NOTE: Processing time varies depending on the technicality of IT procedures to be made.





7. INSTALLATION OF IN-HOUSE AND OUTSOURCE SYSTEM

OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE	
Request Letter (Approved by the De	partment Head)	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the Request Letter	1.1 Receive the Request Letter for a new system	None	2 minutes	Ronabelle Silla Administrative Asst. IV	
	1.2 Assessment of Request	None	2 minutes	Grace Catolico OIC-CITRMU	
	1.3 Approval of Request	None	2 minutes	Grace Catolico OIC-CITRMU	
2. Wait for system installation	2.1 Installation of System Applications	None	1 hour	Krissell Andal Info. Systems Analyst I	
	2.2 Endorse System Applications	None	30 minutes	Vanessa Mendoza Computer Operator I	
	TOTAL	None	1 hour and 30 minutes		

NOTE: Processing time varies depending on the type of System Application to be installed.





8. REVISION OF IN-HOUSE AND OUTSOURCE SYSTEM

Revision of system for new features based on end users' request.

OFFICE OR DIVISION	City Information Technology and Records Ma	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical					
TYPE OF TRANSACTION	G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	Il offices under the City Government of Imus				
CHECKLIS	OF REQUIREMENTS		WHERE TO SEC	URE		
Request Letter (Approved by the De	epartment Head)	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the Request Letter	1.1 Receive the Request Letter for a new system	None	2 minutes	Ronabelle Silla Administrative Asst. IV		
	1.2 Assessment and Approval of Request	None	13 minutes	Grace Catolico OIC-CITRMU		
2. Receive revised system	2.1 Revision or updating of System Application	None	3 months	Krissell Andal Info. Systems Analyst I		
	2.2 Endorse revised System Application	None	30 minutes	Vanessa Mendoza Computer Operator I		
	TOTAL	None	3 months and 45 minutes			

NOTE: Processing time varies depending on the scope of System Application revision/s.





9. INSPECTION OF IT EQUIPMENT

Inspection and verification of delivered IT equipment based on Purchase Order (PO).

OFFICE OR DIVISION	City Information Technology and Records Ma	\ /			
CLASSIFICATION	City Information Technology and Records Management Unit Highly Technical				
TYPE OF TRANSACTION					
	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	i			
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE	
Online IT Request Form		CITRMU (via QR Code			
Purchase Order (PO)		GSO			
Photocopy of Sales Invoice		Supplier			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE	
			TIME		
1. Fill up and submit Online IT	1.1 Receive the Online IT Request Form	None	2 minutes	Ronabelle Silla	
Request Form				Administrative Asst. IV	
	1.2 Assessment of Request	None			
	1.3 Assign Technical Staff	None			
2. Present Purchase Order and	2.1 Inspect IT equipment	None	30 minutes	Technical Staff	
Photocopy of Sales Invoice					
	2.2 Prepare IT Equipment Inspection Report	None			
	Form				
	2.3 Release IT Equipment Inspection Report	None			
	Form				
	TOTAL	None	32 minutes		

NOTE: Processing time varies depending on the volume of requests and number of IT equipment.





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10. IT EQUIPMENT AND SOFTWARE RECOMMENDATION

Recommend the necessary specifications of IT hardware and software based on the requesting Department's needs and nature of work.

OFFICE OR DIVISION	City Information Technology and Records Management Unit					
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2G – Government to Government	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE		
Online IT Request Form		CITRMU (via QR Code)			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Fill up and submit Online IT Request Form	1.1 Receive the Online IT Request Form	None	2 minutes	Ronabelle Silla Administrative Asst. IV		
	1.2 Assessment of Request	None				
	1.3 Assign Technical Staff	None				
2. Receive IT Recommendation Report Form	2.1 Prepare IT Recommendation Form	None	15 minutes	Philip Paul Gamis Computer Operator II		
	2.2 Release the IT Recommendation Report Form	None				
	Fill-out the Client Satisfa	action Rating Form				
	TOTAL	None	17 minutes			

NOTE: Processing time varies depending on the volume of requests and number of IT equipment types.





11. REVIEW OF IT-RELATED PROPOSALS

Review, comment and recommend IT-related proposals submitted by suppliers/vendors to top management and respective offices. Evaluate proposed IT projects for its feasibility, functionality, usability, reliability and efficiency.

projects for its reasibility, furictionality	, usubility, reliability and emelency.			
OFFICE OR DIVISION	City Information Technology and Records Management Unit			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus	3		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Proposal Letter		Client		
Presentation and Quotation		Client		
Proponent Profile		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Proposal Letter, Presentation, Quotation and Proponent Profile	1.1 Receive Proposal Letter, Presentation, Quotation and Proponent Profile	None	2 minutes	Ronabelle Silla Administrative Asst. IV
	1.2 Initial review of IT Proposal	None		
	1.3 Complete evaluation and review of IT Proposal including consultation with concerned Departments.	None	2 months	Mary Grace Catolico OIC-CITRMU
	1.4 Prepare IT Review and Evaluation Form	None		
2. Receive IT Review and Evaluation Form	2. Release the IT Review and Evaluation Form	None	3 minutes	Mary Grace Catolico OIC-CITRMU
	TOTAL	None	2 months and 5 minutes	





12. PROVISION OF IT PROJECT PROPOSAL

Provide necessary IT Project Proposals for City offices/departments.

OFFICE OR DIVISION	City Information Technology and Records Ma	inagement Unit				
CLASSIFICATION	Complex	Complex				
TYPE OF TRANSACTION	G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
Request Letter (Approved by the De	partment Head)	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit Request Letter for IT Project Proposal	1.1 Receive Request Letter	None	3 minutes	Ronabelle Silla Administrative Asst. IV		
rioject rioposal	1.2 Assessment of Request	None		Auministrative Asst. IV		
	1.3 Set scheduled meeting for discussion	None				
2. Attend to scheduled meeting and discuss Project's objectives	2 IT Project discussion	None	1 hour	Mary Grace Catolico OIC-CITRMU		
3. Receive IT Project Proposal	3.1 Formulate IT Project Proposal based on gathered data and previous discussions	None	1 month	Mary Grace Catolico OIC-CITRMU		
	3.2 Release IT Project Proposal	None				
	TOTAL	None	1 month 1 hour and 3 minutes			

NOTE: City offices/departments might receive IT Project Proposal even without their request.





13. NETWORK SUPPORT

	J of computer network problems.				
OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Online IT Request Form or		CITRMU (via QR Code)			
Request Letter		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill up and submit Online IT Request	1.1 Receive the Online IT Request Form or	None	2 minutes	Ronabelle Silla	
Form	Request Letter			Administrative Asst. IV	
	1.2 Assessment of Request	None		Katrina Garcia Bookbinder I	
	1.3 Assign IT Staff	None		Ronabelle Silla Administrative Asst. IV	
2. Wait for the release of IT Equipment	2. Evaluate and troubleshoot computer network problem/s	None	1 hours	IT Staff	
	Fill-out the Client Satisfa	action Rating Form			
	TOTAL	None	1 hour and 2 minutes		

Evaluation and troubleshooting of computer network problems.

NOTE: Processing time varies depending on the technicality of IT procedures to be made and availability of IT Staff.







14. APPLICATION SUPPORT AND MAINTENANCE

Provision of technical assistance/support on application, software and other technological systems.

OFFICE OR DIVISION	City Information Technology and Records Management Unit				
CLASSIFICATION	Highly Technical				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE		
Online IT Request Form or Request Letter		CITRMU (via QR Code) Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill up and submit Online IT Request Form	1.1 Receive the Online IT Request Form or Request Letter	None	2 minutes	Ronabelle Silla Administrative Asst. IV Katrina Garcia Bookbinder I	
	1.2 Assessment of Request	None		Ronabelle Silla Administrative Asst. IV	
	1.3 Assign IT Staff	None			
2. Wait for the release of IT Equipment	2. Provide technical assistance/support on application, software and other technological systems	None	1 hours	IT Staff	
	Fill-out the Client Satisfa	action Rating Form			
	TOTAL	None	1 hour and 2 minutes		

NOTE: Processing time varies depending on the technicality of IT procedures to be made and availability of IT Staff.





CIVIL SOCIETY ORGANIZATION AND HOA LINGKOD DESK OFFICE EXTERNAL SERVICES







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1. ACCREDITATION OF CIVIL SOCIETY ORGANIZATION

Processed to all civil society organizations who wants to be accredited by City Government of Imus.

OFFICE OR DIVISION	Civil Society Organization Desk Office	Civil Society Organization Desk Office				
CLASSIFICATION	Highly Technical					
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All registered civil society organizations					
CHECKLIST OF REQUIREMENTS WHERE TO SECURE		RE				
Application Form (Annex C)		Civil Society Organizat				
Letter of Application (Annex D)		Civil Society Organizat				
Board Resolution (Annex E)		Civil Society Organizat				
List of Current Officers (Annex F)		Civil Society Organizat				
Minutes of Annual Meetings (Annex		Civil Society Organizat				
Annual Accomplishment Report (Ann		Civil Society Organizat				
Annual Financial Statement (Annex I		Civil Society Organizat				
Certificate of Registration			overnment Agencies or E			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the requirements in duplicate copies.	1.1 Access and evaluate all submitted requirements.	None	15 minutes	Ms. Leng S. Timtiman CSO Desk Officer		
	1.2 Issue evaluation/assessment form	None				
	1.3 Transmit the evaluated requirements to Committee on People's Organization and Non-Government Organization for accreditation	None	5 minutes	CSO Personnel		
	1.4 Accreditation Process	None	(stop time)	Office of City Councilor Hon. Jogie Lyn Maliksi		
	1.5 Notify the Client of the approval of accreditation	None	1 minute	CSO Personnel		
2. Claim/pick up the certificate of accreditation	Accreditation	None	2 minutes	CSO Desk Office/Office of City Councilor Jogie Lyn Maliksi		
	Fill-out Client Satisfac	0				
	TOTAL	None	23 minutes			

NOTE: Accreditation process depends on the Office of the City Councilor – Hon Jogie Lyn Maliksi

CITIZEN'S CHARTER



2. RECEIVING OF REQUEST AND SOLICITATION LETTERS

All request and solicitation letters are required to be evaluated by CSO Office prior to transmittal to the respective offices/departments.

OFFICE OR DIVISION	Civil Society Organization Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C- Government to Citizen			
WHO MAY AVAIL THE SERVICE	All Residents of the City of Imus			
CHECKLIST	OF REQUIREMENTS WHERE TO SECURE			
Request letter/solicitation with noted Certificate	of respective barangay captains or Barangay	Respective barangays		
Photocopy of signatory's ID with thre	e specimen signature	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the letter in duplicate	1.1 Evaluate and access the letter	None	2 minutes	CSO Personnel
copies attached with photocopy of signatory's ID with 3 specimen signature	1.2 Transmit the letters to the respective departments/ offices	None	2 minutes	CSO Personnel
	1.3 Processing of request	None	(stop time)	Respective Departments and Offices
	1.4 Notify the clients of the approval of the request	None	2 minutes	Respective Departments and Offices
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	6 minutes	

NOTE: Request processing depends on respective departments and offices.





3. REQUEST FOR MAYOR'S OATHTAKING SERVICES

OFFICE OR DIVISION	Civil Society Organization Office	Civil Society Organization Office				
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C- Government to Citizen					
WHO MAY AVAIL THE SERVICE	All accredited and registered organizations ar	All accredited and registered organizations and associations in the City of Imus				
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	E		
Request letter with noted of respectiv	/e barangay captain	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit letter of request with list of current officers, updated GIS received by DHSUD for HOA in		None	2 minutes	Ms. Leng S. Timtiman CSO Desk Officer		
duplicate copies	1.2 For HOA, Indorse to AIMHAI-F for verification	None	2 minutes	CSO Personnel		
	1.3 Transmit to Office of the City Mayor	None	2 minutes (stop time)	CSO Personnel		
	1.4 Notify the clients of the approval and schedule of oathtaking	None	2 minutes	CSO Personnel		
2. Attend scheduled oathtaking ceremony	2.1 Conduct Oath Taking Ceremony	None	30 minutes	Hon. Alex L. Advincula City Mayor		
	2.2 Issue/release certificate of oath	None				
				Nikko De Quiroz Ms. Leng S. Timtiman		
	Fill-out Client Satisfac	tion Rating Form		· · · · · · · · · · · · · · · · · · ·		
	TOTAL	None	38 minutes			

NOTE: Schedule/time varies depending on the availability of the City Mayor.





4. REGISTRATION OF HOMEOWNERS' ASSOCIATION INC. TO DHSUD

OFFICE OR DIVISION	HOA Lingkod Desk Office				
CLASSIFICATION	Highly Technical				
	G2C – Government to Citizens				
TYPE OF TRANSACTION					
WHO MAY AVAIL THE SERVICE					
	OF REQUIREMENTS		WHERE TO SECUR		
General Information Sheet (1 origina			Office / Downloadable at	3	
Bylaws (1 original copy, 2 photocopie			Office / Downloadable at	5	
Articles of Incorporation (1 original co			Office / Downloadable at	0	
Authorization (1 original copy, 2 phot	• •		Office / Downloadable at	5	
Certification (1 original copy, 2 photo			Office / Downloadable at	0	
Code of Ethics (1 original copy, 2 ph			Office / Downloadable at	5	
Undertaking (1 original copy, 2 photo			Office / Downloadable at	5	
Cover Letter (1 original copy, 2 photo			Office / Downloadable at		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements in triplicate copies.	1.1 Access and evaluate all submitted requirements.	None	15 minutes	Ms. Leng S. Timtiman CSO Desk Officer	
	1.2 Issue evaluation/assessment form	None			
	1.3 Transmit the complete evaluated requirements to AIMHAI- Federation	None	5 minutes	CSO Personnel	
	1.4 Registration process	1,880.00	(stop time)	DHSUD Personnel	
	1.5 Notify the client of the status of registration	None	2 minutes	CSO Personnel	
2. Claim/pick up the certificate of registration/affiliation	2.1 Release/ issue the certificate of affiliation/registration	None	5 minutes	DHSUD Personnel	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	1, 880.00	27 minutes		

NOTE: Registration process depends on DHSUD.





5. AMENDMENTS

5. AIVIENDIVIEN I 5				
OFFICE OR DIVISION	HOA Lingkod Desk Office			
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All HOA in the City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Written Petition (1 original copy, 2 ph	notocopies)	Respective HOA, duly	signed by 30% of the me	embers in good standing
Amended Bylaws or Articles of Incor	poration (1 original copy, 2 photocopies)	HOA LINGKOD Desk (Office / Downloadable at	Google
Notarized Certificate of the election (Committee (1 original copy, 2 photocopies)	Respective HOA		
Minutes of the special General Asse	mbly Meeting (1 original copy, 2 photocopies)	Respective HOA		
Attendance Sheet (1 original copy, 2	photocopies)	Respective HOA		
Undertaking (1 original copy, 2 photo	pcopies)	HOA LINGKOD Desk (Office / Downloadable at	Google
Cover Letter (1 original copy, 2 phote			Office / Downloadable at	0
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements in	1.1 Access and evaluate all submitted	None	15 minutes	Ms. Leng S. Timtiman
triplicate copies.	requirements.			CSO Desk Officer
	1.2 Issue evaluation/assessment form	None		
	1.3 Transmit the complete evaluated	None	5 minutes	CSO Personnel
	requirements to AIMHAI- Federation			
	1.4 Amondmont process		(aton time)	
	1.4 Amendment process Bylaws	720.00	(stop time)	DHSUD personnel
	Articles of Incorporation	720.00		
	Stamping of Books	50.00		
		50.00		
	1.5 Notify the client of the status of	None	2 minutes	CSO Personnel
	registration			
2. Claim/pick up the certificate of	0	None	5 minutes	DHSUD Personnel
registration/affiliation	Amendment and copy of Amended Bylaws/			
5	Articles of Incorporation			
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	1,490.00	27 minutes	
		-,		1

NOTE: Amendment process depends on DHSUD.





6. HOA CONCILIATION AND MEDIATION CONFERENCE

OFFICE OR DIVISION	OA Lingkod Desk Office				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens				
WHO MAY AVAIL THE SERVICE	All HOMEOWNERS' ASSOCIATION in the City of Imus				
CHECKLIST	HECKLIST OF REQUIREMENTS WHERE TO SECURE				
Request letter with agenda		Requestor			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit letter in duplicate copies	1.1 Received and assess the request letter	None	10 minutes	Ms. Leng S. Timtiman CSO Desk Officer	
	1.2. Notify the requestor of the confirmed Schedule	None	5 minutes	CSO Personnel	
2. Conduct of mediation/ conciliation conference	2.1. Mediation/ conciliation process	None	(stop time)	Respective Departments and Offices	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	15 minutes		
NOTE: Madiation turnaround time dar	ande en the equarity of energy				

NOTE: Mediation turnaround time depends on the severity of cases.







CITY OF IMUS TASK FORCE FOR ROAD CLEARING EXTERNAL SERVICES







1. RELEASING OF CLAMPED VEHICLES AND ROAD OBSTRUCTIONS

Issuance of road obstruction citation ticket and releasing of clamped vehicle and road obstructions

OFFICE OR DIVISION	City of Imus Task Force for Road C	learing			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens, G2	<u>B – Government to Business, G2</u>	2G – Government to Gov	vernment	
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SECURE		
Violation Form		Received by Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Surrender the violation form to the secretariat on duty.	1.1 Check and validate the violation form.	None	(insert time)	Releasing Team	
2. Pay the necessary charges.	 1.2 Release Order of Payment. 2. Receive payment and release Official Receipt 	Motor Cycles, E-Bicycles, Tricycles & E – tricycles (2-3 Wheels) PhP 500.00 fine . Light Motor Vehicles (4 wheels) – PhP 2,000.00 fine . Medium Motor Vehicles (6 wheels) – PhP 3,000.00 fine . Heavy Motor Vehicles (8- 10 wheels) – PhP 4,000.00 fine . Super Heavy Motor Vehicles (12- 20 wheels) – PhP 5,000.00 fine	10 minutes	City Treasurer's Office	
3. Present the Official Reciept of Payment to the CITF secretariat on	3. Release vehicle.	None	(insert time)	Releasing Team	
duty for release the clamp on vehicle.					
	Fill-out Client	Satisfaction Rating Form			
	TOTAL	Based on assessment	(insert total time)		

NOTE: Releasing of clamped vehicle is until 5:00 PM only at (insert location)

CITIZEN'S CHARTER



OFFICE OF THE CITY VICE MAYOR EXTERNAL SERVICES







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1. ISSUANCE OF CERTIFIED TRUE COPY OF ORDINANCE, RESOLUTION & MINUTES OF THE SP SESSION

The following is issued to constituents, other businesses and other government entities who may request for certified true copy of ordinance, resolution, and minutes of the SP Session passed by the SP. Provided are the list of requirements and the course of action needed.

			leeded		
OFFICE OR DIVISION	Office of the City Vice Mayor				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen; G2B – Gover	mment to Business; G2G – G	Bovernment to Governme	ent	
WHO MAY AVAIL THE	All residents and non-residents of City of Imus				
CHECKLIS	OF REQUIREMENTS WHERE TO SECURE				
Accomplished Request Form		Information Desk of the SP	O/CVMO Lobby		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the accomplished request form.	1.1 Receive and forward the Request Form to the Vice Mayor	None	2 minutes	Alan Dexter C. Jamir	
	1.2 Approve and sign the Request Form	None	3 minutes	SP Secretary Mary Jemeny V. Yulo Vice Mayor Homer T. Saquilayan	
	1.3 Issue the Order of Payment	None	3 minutes	Alayne Dominic R. Papa; Shirley R. Velasco	
2. Pay the required fee.	2. Receive the payment and release Official Receipt (OR).	P50.00 per document plus P5.00 per photocopy of page	5 minutes	City Treasurer's Office Windows 11, 12 and 13	
3. Present the O.R. and claim the requested documents.	3. Release the documents	None	2 minutes	Alayne Dominic R. Papa; Shirley R. Velasco	
	Fill-out the Client Sa	atisfaction Rating Form			
	TOTAL	Based on assessment	15 minutes		







2. ISSUANCE OF CERTIFICATION OF NO PENDING ADMINISTRATIVE CASE

On the instances that the citizens may require copies for legal purposes, the Vice Mayor, being the Chairman of the Ad-hoc Committee on Personal Affairs and Appointments, issues the certification of no pending administrative case.

WHO MAY AVAIL THE SERVICE	CE All residents and non-residents of City of Imus				
TYPE OF TRANSACTION	G2C – Government to Citizen; G2G – Government to Government				
CLASSIFICATION	Simple				
OFFICE OR DIVISION	Office of the City Vice Mayor				
and Appointments, issues the certifica	and Appointments, issues the certification of no pending administrative case.				

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
Accomplished Request Form	Accomplished Request Form		Information Desk of the SPO/CVMO Lobby			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the accomplished request form	1.1 Process the request	None	2 minutes	Alayne Dominic R. Papa; Shirley R. Velasco		
	1.2 Approve the request	None	3 minutes	Vice Mayor Homer T. Saquilayan		
	1.3 Issue the Order of Payment	None	3 minutes	Alayne Dominic R. Papa; Shirley R. Velasco		
2. Pay the required fee	2. Receive the payment and release Official Receipt (OR)	P50.00 per document plus P5.00 per photocopy of page	2 minutes	City Treasurer's Office Staff (Windows 11, 12 and 13)		
3. Present the O.R. and claim the requested document(s)	Release the document(s)	None	5 minutes	Alayne Dominic R. Papa; Shirley R. Velasco		
	Fill-out the Client Satisfaction Rating Form					
	TOTAL	Based on assessment	15 minutes			





3. ISSUANCE OF CERTIFICATION OF NO PENDING ADMINISTRATIVE CASE VIA EMAIL

On the instances that the citizens may require copies for legal purposes, the Vice Mayor, being the Chairman of the Ad-hoc Committee on Personal Affairs and Appointments, issues the certification of no pending administrative case via email.

OFFICE OR DIVISION	office of the City Vice Mayor			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen; G2G – Gov	ernment to Government		
WHO MAY AVAIL THE	All residents and non-residents of City of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
Accomplished Request Form		Information Desk of the SP	O/CVMO Lobby	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished request form	1.1 Process the request	None	5 minutes	Shirley R. Velasco
	1.2 Approve the request	None	3 minutes	Vice Mayor Homer T. Saquilayan
	1.3 Issue the Order of Payment	None	3 minutes	Shirley R. Velasco
2. Pay the required fee	2. Receive the payment and release Official Receipt (OR)	P50.00 per document plus P5.00 per photocopy of page	2 minutes	City Treasurer's Office Staff (Windows 11, 12 and 13)
3. Present the O.R. and claim the requested document(s)	3. Release the document(s)	None	2 minutes	Shirley R. Velasco
	Fill-out the Client Sa	atisfaction Rating Form		
	TOTAL	Based on assessment	15 minutes	





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4. PEOPLE'S DAY CONSULTATION

Provides services to the visitors/constituents who wish to see the Vice Mayor to present their requests and/or grievances.

OFFICE OR DIVISION	Office of the City Vice Mayor				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen; G2B – Government to Business; G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of Im	us			
CHECKLIST C	LIST OF REQUIREMENTS WHERE TO SECURE				
Letter of Request/Concern		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Fill-out the Visitor's Logbook	1. Issue the Visitor's Slip	None	3 minutes	Mirasol L. Capule;	
				Roselle S. Ramos;	
				Kimberly A. Topacio	
2. Submit the Letter of Request/	2. Receive and forward the Letter of	None	10 minutes	Elizabeth E. Paredes;	
Concern	Request/ Concern to the concerned Official			Josephine S. Ariola	
	Fill-out the Client Satisfaction Rating Form				
	TOTAL None 13 minutes				







OFFICE OF THE CITY VICE MAYOR INTERNAL SERVICES







www.cityofimus.gov.ph

1. ACCEPTANCE OF DOCUMENTS FOR INCLUSION IN THE SP SESSION

Accepts and reviews documents from different committees/ offices/ departments for the inclusion in the SP agenda.

OFFICE OR DIVISION	Office of the City Vice Mayor		0		
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business				
WHO MAY AVAIL THE	City Government Officials; All departments and o	ffices in the City Goverr	nment of Imus; Non-Gove	ernment Organization; All	
SERVICE	residents and non-residents of Imus				
	IST OF REQUIREMENTS		WHERE TO SECUR	RE	
Transmittal letter from the Office		Office of the City Mayo	or		
One (1) Original copy and twent	y-one (21) photocopies of documents	Client		-	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the transmittal letter	1.1 Accept and verify the document	None	5 minutes	Alan Dexter C. Jamir	
	1.2 Forward the request to the Vice Mayor	None	2 minutes	Alan Dexter C. Jamir	
	1.3 Review the document	None	10 minutes	Alan Dexter C. Jamir Vice Mayor Homer T. Saquilayan	
	1.4 Forward the documents to the SP Secretary	None	2 minutes	Alan Dexter C. Jamir	
	1.5 Prepare the Agenda for the SP Session	None	5 minutes	SP Secretary Mary Jemeny V. Yulo Alan Dexter C. Jamir	
				Raquel Dimdam; Shirley R. Velasco	
	Fill-out the Client Satisfa		-	[
	TOTAL	None	24 minutes		

NOTE: The cut off time for the receiving of documents is every Thursday, 2:00 P.M.







SANGGUNIANG PANLUNGSOD OFFICE EXTERNAL SERVICES







1. ISSUANCE OF CERTIFIED TRUE COPY OF ORDINANCE, RESOLUTION & MINUTES OF THE MEETING

A certified true copy is a duplicate of an original document that is certified as a true copy by the Sangguniang Panlungsod having custody of the original documents (ordinances, resolutions, minutes of the session and/or meeting)

	Thrutes of the session and/of theeting/				
OFFICE OR DIVISION	Sangguniang Panlungsod				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen; G2B – Go	vernment to Business; G2G	- Government to Govern	nment	
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of	Il residents and non-residents of City of Imus			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECU	JRE	
Accomplished Request Form		Information Desk of the Sa		Office-	
		Records Management Unit			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the accomplished request form.	1.1 Receive and forward the Request Form to the SP Secretary	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
	1.2 Sign the Request Form	None	3 minutes	Mary Jemeny V. Yulo SP Secretary	
	1.3 Approve the signed Request Form	None	5 minutes	Vice Mayor Homer T. Saquilayar	
	1.4 Issue the Order of Payment	None	3 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
2. Pay the required fee.	2. Receive the payment and release Official Receipt (OR).	P50.00 per document plus P5.00 per photocopy of page		City Treasurer's Office Windows 8 and 9	
3. Present the O.R. and claim the requested documents.	3. Release the documents	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
	Fill-out the Clier	nt Satisfaction Rating Form			
	TOTAL	Based on assessment	15 minutes		







2. ISSUANCE OF CERTIFIED TRUE COPY OF ORDINANCE, RESOLUTION & MINUTES OF THE MEETING VIA EMAIL

A certified true copy is a duplicate of an original document that is certified as a true copy via email by the Sangguniang Panlungsod having custody of the original documents (ordinances, resolutions, minutes of the session and/or meeting).

OFFICE OR DIVISION	Sangguniang Panlungsod and Office of t	he City Vice Mayor		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen; G2B – Go	overnment to Business; G2G	- Government to Governr	nent
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of	Imus		
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
Accomplished Request Form		Information Desk of the Sar Records Management Unit		fice-
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished request form.	1.1 Receive and forward the Request Form to the SP Secretary	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan
	1.2 Sign the Request Form	None	3 minutes	Mary Jemeny V. Yulo SP Secretary
	1.3 Approve the signed Request Form	None	5 minutes	Vice Mayor Homer Saquilayan
	1.4 Issue the Order of Payment	None	3 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan
2. Pay the required fee.	2. Receive the payment and release Official Receipt (OR).	P50.00 per document plus P5.00 per photocopy of page		City Treasurer's Office Windows 8 and 9
3. Present the O.R. and claim the requested documents.	3. Release the documents via email	None	2 minutes	Glenn Patrick D. Urgino; Christian R. Sapida
	Fill-out the Clien	t Satisfaction Rating Form		
	TOTAL	Based on assessment	15 minutes	





3. ISSUANCE OF CERTIFICATION OF NO PENDING ADMINISTRATIVE CASE

The Certificate of No Pending Administrative Case is issued to requestors (barangay officials) to certify that they have pending/ no pending administrative case based on the record of the Sangguniang Panlungsod.

case based on the fecold of the Dalig	gamang ramangooa.				
OFFICE OR DIVISION	Sangguniang Panlungsod				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen; G2G – Go	overnment to Government			
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of	Imus			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E	
Accomplished Request Form		Information Desk of the Sar Records Management Unit	ngguniang Panlungsod Of	fice-	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the accomplished request form	1.1 Process the request	None	3 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
	1.2 Sign the Request Form	None	2 minutes	Mary Jemeny V. Yulo SP Secretary	
	1.3 Approve the signed Request Form	None	3 minutes	Vice Mayor Homer Saquilayan	
	1.4 Issue the Order of Payment	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
2. Pay the required fee	2. Receive the payment and release Official Receipt (OR)	P50.00 per document plus P5.00 per photocopy of page		City Treasurer's Office Windows 8 and 9	
3. Present the O.R. and claim the requested document(s)	Release the document(s)	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan	
		t Satisfaction Rating Form			
	TOTAL	Based on assessment	12 minutes		







4. ISSUANCE OF CERTIFICATION OF NO PENDING ADMINISTRATIVE CASE VIA EMAIL

The Certificate of No Pending Administrative Case is issued to requestors via email (barangay officials) to certify that they have pending/ no pending administrative case based on the record of the Sangguniang Panlungsod.

OFFICE OR DIVISION	Sangguniang Panlungsod			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION				
WHO MAY AVAIL THE SERVICE	G2C – Government to Citizen; G2G – Government to Government			
WHO WAT AVAIL THE SERVICE	All residents and non-residents of City of	inius		
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
Accomplished Request Form		Information Desk of the Sar Records Management Unit	ngguniang Panlungsod Of	fice-
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished request form	1.1 Process the request	None	3 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan
	1.2 Sign the Request Form	None	2 minutes	Mary Jemeny V. Yulo SP Secretary
	1.3 Approve the signed Request Form	None	3 minutes	Vice Mayor Homer Saquilayan
	1.4 Issue the Order of Payment	None	2 minutes	Soledad A. Dela Cruz; Ealaiza Florence P. Ilano; Melvin R. Tabuyan
2. Pay the required fee	2. Receive the payment and release Official Receipt (OR)	P50.00 per document plus P5.00 per photocopy of page		City Treasurer's Office Windows 8 and 9
3. Present the O.R. and claim the requested document(s)	3. Release the document(s)	None	2 minutes	Glenn Patrick D. Urgino; Christian R. Sapida
	Fill-out the Clier	t Satisfaction Rating Form		
	TOTAL	Based on assessment	12 minutes	







5. ACCOMODATING INVITEES TO SCHEDULED COMMITTEE MEETINGS/HEARING/PUBLIC HEARING

Committee Meeting/Hearing/Public Hearings are being conducted by Sangguniang Panlungsod Members wherein these particular individuals namely Barangay Officials/Workers, representatives from different Government agencies, representatives from different concerned offices in the City Government of Imus and private sectors are invited.

and private sectors are invited.				
OFFICE OR DIVISION	Sangguniang Panlungsod			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of	Imus		
CHECKLIST O	F REQUIREMENTS		WHERE TO SECUR	E
Invitation Letter/Notice of Meeting		Information Desk of the Sa	ngguniang Panlungsod Off	ice-
5		Sangguniang Panlungsod		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the Information Desk of Sangguniang Panlungsod Office	1. Welcome and receive the client	None	1 minute	Elena A. Matro; Cathalina A. Olaes; Aldrin A. Tapawan; Eduard B. Castro; Agapito S. Dasalla Jr.
2.Present the Invitation Letter/Notice of Meeting	2. Received the required documents/invitation letter	None	1 minute	Aldrin A. Tapawan; Elena A. Matro; Cathalina A. Olaes
3. Temperature Screening	3. Provide the temperature scanner upon entering	None	1 minute	Elena A. Matro; Cathalina A. Olaes
4. Must fill-out the Visitors Log Book and Health Declaration Form	4. Provide the Health Declaration Form	None	3 minutes	Aldrin A. Tapawan; Elena A. Matro; Cathalina A. Olaes
5. Must fill-out the Customer Satisfaction Rating Form	5. Provide the Customer Satisfaction Rating Form	None	2 minutes	Elena A. Matro; Cathalina A. Olaes
6. Proceed to the Committee Meeting/Hearing/Public Hearing	6. Give instructions to Client as to where is the meeting area	None	1 minute	Elena A. Matro; Cathalina A. Olaes
<u> </u>		t Satisfaction Rating Form	· · · ·	
	TOTAL	Based on assessment	9 minutes	





SANGGUNIANG PANLUNGSOD OFFICE INTERNAL SERVICES







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1. ACCEPTANCE OF DOCUMENTS FOR INCLUSION IN THE SESSION

Communication letters from or forwarded by the Office of the Mayor that needs legislative action, are approved by the City Vice Mayor for inclusion in the Calendar of Business of the Regular or Special Session to support policies and programs of the City Government.

OFFICE OR DIVISION	Sangguniang Panlungsod			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government; G2C – G	Government to Citizen.	32B – Government to Bus	iness
WHO MAY AVAIL THE SERVICE				
CHECKLIS	T OF REQUIREMENTS		WHERE TO SECU	JRE
Transmittal letter from the Office of	the City Mayor	Office of the City Mayo	Dr	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the transmittal letter	1.1 Receive, review and evaluate the document	None	5 minutes	Vice Mayor Homer T. Saquilayan; Alan Dexter C. Jamir
	1.2 Receive the reviewed document from the City Vice Mayor	None	2 minutes	Raquel F. Dimdam; Marilou E. Brin
	1.3 Prepare the Agenda, Proceedings, Committee Reports, and Draft Ordinances/Resolutions for the SP Session	None	30 minutes	Raquel Dimdam; Marilou E. Brin; Shirley R. Velasco; Bianca Marielle E. Sarno
	1.4. Printing the Final Agenda, Proceedings, Committee Reports, and Ordinances/Resolutions for the SP Session	None	30 minutes	Shirley R. Velasco; Bianca Marielle E. Sarno; Abigail Cecilia C. Alberto
	Fill-out Client Satisf	<u> </u>		
	TOTAL	None	67 minutes	







SANGGUNIANG KABATAAN FEDERATION OFFICE EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ISSUANCE OF CERTIFIED TRUE COPY OF BARANGAY OFFICIAL INFORMATION SHEET (BOIS), COMPREHENSIVE BARANGAY YOUTH DEVELOPMENT FUND (CBYDP), ANNUAL BARANGAY YOUTH INVESTMENT PROGRAM (ABYIP), MINUTES OF THE MEETING, SK ANNUAL BUDGET, AND OATH OF OFFICE OF ELECTED SK OFFICIALS

All documents needed or relevant to SK officials can be provided by the Sangguniang Kabataan Office by issuing them certified true copy with the approval of the Sangguniang Kabataan Federation President.

	Concernation of Kalendara Forderation office			
OFFICE OR DIVISION	Sangguniang Kabataan Federation office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government	G2G – Government to Government		
WHO MAY AVAIL THE SERVICE	All SK chairman and SK officials			
CHECKLIST O	F REQUIREMENTS		WHERE TO SECU	IRE
Accomplished Request Form		Information Desk of the SK	Federation Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished request form.	1.1 Receive and forward the Request Form and attached checklist of SK chairpersons w/ submitted report of BOIS, ABYIP & SK Annual Budget to DILG, Budget Office, Youth Affairs Office, and SK Federation President	None	7 minutes	SK Federation Staff
	1.2 Approve and sign the Request Form	None	3 minutes	HON. Joshua Sherlhanbert Y. Guinto SK Federation President
	Fill-out the Client Sa	atisfaction Rating Form		
	TOTAL	None	10 minutes	





SANGGUNIANG KABATAAN FEDERATION OFFICE INTERNAL SERVICES







1. ACCEPTANCE OF DOCUMENTS AND MEMORANDA

All incoming memorandums and documents is properly received, reviewed, and documented by the Sangguniang Kabataan staff. Applying corresponding action for the received documents and memorandums.

OFFICE OR DIVISION	Sangguniang Kabataan Enderation Office			
	Sangguniang Kabataan Federation Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government; G2C – G	overnment to Citizen		
WHO MAY AVAIL THE SERVICE	City Government Officials; All departments ar	nd offices in the City Gov	vernment of Imus; Nor	n-Government Organization; all
	SK chairman and SK officials			C I
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE
Documents		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Log in to visitor logbook and wait for the document or memorandum	1.1 Accept and verify the document	None	5 minutes	SK Federation Staff
to be received by SK Federation Staff.	1.2 Forward the Received document to the Sangguniang Kabataan President	None	2 minutes	SK Federation Staff
	1.3 Review the document	None	10 minutes	Hon. Joshua Sherlhanbert Y. Guinto
	1.4 Prepare appropriate action for the document/ memorandum received	None	5 minutes	Hon. Joshua Sherlhanbert Y. Guinto
	Fill-out the Client Satisfa	action Rating Form		
	TOTAL	None	19 minutes	





CITY COLLEGE OF IMUS EXTERNAL SERVICES







www.cityofimus.gov.ph

1. ONLINE REGISTRATION

Direct online application through Google form or edukasyon.ph

OFFICE OR DIVISION	City of Imus Polytechnic Institu	Ite		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens	6		
WHO MAY AVAIL THE SERVICE	Any interested enrollee			
CHECKLIST OF REQU	IIREMENTS		WHERE TO SEC	URE
Accomplished Electronic Registration Form		Google Form via Officia https://forms.gle/hxCpr\	0	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish online Registration Form	1.1 Verify completeness of form	None	1 day	Angel Gabrielle Pallera Administrative Assistant I
	1.2 Forward consolidated detailed report to Office of Registrar	None		Angel Gabrielle Pallera Administrative Assistant I
	1.3 Contact the enrollee for the submission of admission requirements and schedule.	None	1 day	Maria Shirley Danao <i>Registrar III</i>
	Fill out Client Satisfact	tion Feedback Form	-	
	TOTAL	None	2 days	







2. REGULAR ENROLLMENT

The enrollment of qualified to regular or short course programs for the following qualifications:

Electrical Installation and Maintenance NC II (EIM)
Technical Drafting NC II
Mechatronics Servicing NC II

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Registrar's Office and Cashier's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	Any interested enrollee			
CHECKLIST (OF REQUIREMENTS		WHERE TO SEC	URE
I. Regular Course				
Copy of PSA Birth Certificate		Original copy: Philippin		
Copy of 2 valid identification cards (ge	overnment/company/school-issued)	Any government institu	tion and/or current co	mpany/school of client
Academic Records		Previous JHS or SHS e	enrolled in	
Transcript of Records		Previous Tertiary Scho		
PWD ID (if applicable)		Local Government Unit	t	
ID picture package		Any photo studio offeri	ng chemical printing	
3 pcs 1x1 ID pictures in white backgro	ound with name tag			
3 pcs passport ID pictures in white ba	ckground with name tag			
Note: ID pictures must be in	chemical print			
Registration Form		CIPI Registrar's Office (Window 1)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the complete requirements.	1. Check, verify, and evaluate completeness of Form and requirements	None	15 minutes	Maria Shirley Danao Registrar III
2. Pay tuition at the Cashier's Office (Window 3)	2.1 Receive payment.2.2 Issue Official Receipt (O.R.)	Kindly refer to assessed fee/s	10 minutes	Dianne P. Garcia Administrative Officer I
3. Receive the Official Receipt (O.R.)	3.1 Enlist enrollee's name in the Enrollment Roster	None	10 minutes	Maria Shirley Danao Registrar III
	Fill out Client Satisfacti		I	1
	TOTAL	Based on assessment	35 minutes	





Regular Programs Courses

	EIM NCII	Mechatronics NCII	Technical Drafting NCII
Schedule	Monday to Friday	Monday to Friday	Monday to Friday
	8 am to 5 pm	8 am to 5 pm	8 am to 5 pm
Training Hours	196 hours	158 hours	206 hours

MATRICULATION AND OTHER FEES

REGULAR RATES

Regular Course	Training Fee	Laboratory Fee	Miscellaneous Fee	Total Fee
Mechatronics	PHP 8,000.00	PHP 1,500.00	PHP 2,500.00	PHP 12,000.00
Electrical Installation and Maintenance	PHP 5,000.00			PHP 9,000.00
Technical Drafting	PHP 5,000.00			PHP 9,000.00

Short Course	Training Fee	Laboratory Fee	Miscellaneous Fee	Total Fee
Mechatronics Servicing (3 modules)	PHP 4,000.00			PHP 12,000.00
Electrical Installation and Maintenance (4 modules)	PHP2,500.00 per module	0	0	PHP 10,000.00
Technical Drafting (4 modules)	PHP 2,500.00 per module			PHP 10,000.00







CASH BASIS RATES (10% discounts on training fees)

Regular Course	Training Fee	Laboratory Fee	Miscellaneous Fee	Total Fee
Mechatronics Servicing NC II	PHP 7,200.00	PHP 1,500.00	PHP 2,500.00	PHP 11,200.00
Electrical Installation and Maintenance NC II	PHP 4,500.00			PHP 8,500.00
Technical Drafting NC II	PHP 4,500.00			PHP 8,500.00







INSTALLMENT RATES

A. TECHNICAL DRAFTING/ ELECTRICAL INSTALLATION AND MAINTENANCE

	Payment				
Fees/ Charges	Upon Registration	Per Assessment	Per Assessment	Per Assessment	
Training Fee	PHP 1,000.00	PHP 1,334.00	PHP 1,333.00	PHP 1,333.00	
Laboratory Fee	PHP 1,500.00				
Miscellaneous Fee	PHP 2,500.00				
Subtotal	PHP 5,000.00 PHP 1,334.00 PHP 1,333.00 PHP 1,333.00				
TOTAL	PHP 9,000.00				

B. MECHATRONICS

	Payment				
Fees/ Charges	Upon Registration	Per Assessment	Per Assessment	Per Assessment	
Training Fee	PHP 1,600.00	PHP 2,134.00	PHP 2,133.00	PHP 2,133.00	
Laboratory Fee	PHP 1,500.00				
Miscellaneous Fee	PHP 2,500.00				
Subtotal	PHP 5,600.00	PHP 2,134.00	PHP 2,133.00	PHP 2,133.00	
TOTAL	PHP 12,000.00				







3. SCHOLARSHIP ENROLLMENT

The enrollment of qualified to scholarship programs for the following qualifications:

- Electrical Installation and Maintenance NC II (EIM)
- Technical Drafting NC II
- Mechatronics Servicing NC II

In consonance with its mandate, CIPI offers scholarship programs, in partnership with TESDA, that provide quality education to qualified underprivileged individuals. TESDA Scholarship Programs as follows:

- Training for Work Scholarship Program (TWSP)
- Special Training for Employment Program (STEP)
- Tulong Trabaho Scholarship Program (TTSP)

Inclusions:	Training and NC II Assessment Fee, Training Support Fund,
	Connectivity, and PPE Allowance
Duration:	Technical Drafting –206 hours
	Mechatronics – 158 hours
	EIM –196 hours
Schedule:	Monday to Friday (8 am to 5 pm)

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Registrar's Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	Qualified applicants 18 years old and above				
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE			
I. Scholarship Programs					
Copy of PSA Birth Certificate		Original copy: Philippine Statistics Authority			
Copy of 2 valid identification cards (g	overnment/company/school-issued)	Any government institution and/or current company/school of client			
Academic Records		Previous JHS or SHS enrolled in			
Transcript of Records		Previous Tertiary School enrolled in			
PWD ID (if applicable)		Local Government Unit			
Set of ID pictures		Any photo studio offering chemical printing			
3 pcs 1x1 ID pictures in white backgi	round with name tag				
3 pcs passport ID pictures in white background with name tag					
Note: ID pictures must be in chemical print					
ALS Completion Certificate (if ALS g	raduate)	Previous School			
Barangay Certificate (Endorsement) of Residency		Local Barangay			

CITIZEN'S CHARTER

Registration Form		CIPI Registrar's Office (Window 1)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete admission requirements	1. Check and evaluate requirements	None	10 minutes	Maria Shirley Danao <i>Registrar III</i>
2. Accomplish Registration Form	2.1. Verify completeness of form2.2 Enlist enrollee's name in the Enrollment	None	5 minutes	Maria Shirley Danao Registrar III
	Roster			
	Fill out Client Satisfaction	on Feedback Form		
	TOTAL	None	20 minutes	

4. COLLECTION OF TUITION AND OTHER FEES

Request for the generation of assessment

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Cashier's Office					
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens					
WHO MAY AVAIL THE SERVICE	Enrollee or guardian					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
Registration Form of Enrollee	form of Enrollee Registrar (Window 1)					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Accomplish registration form	1. Check registration form and endorse to	None	10 minutes	Maria Shirley Danao		
	Cashier's Office			Registrar III		
2. Pay amount due	2. Assess the amount to be collected and	Kindly refer to	10 minutes	Dianne P. Garcia		
	issue Official Receipt (O.R.) and return	assessed fee/s		Cashier		
	registration form to registrar's office					
Fill out Client Satisfaction Feedback Form						
	TOTAL Based on 20 minutes					
assessment						







5. TESDA NC II ASSESSMENT PROCEDURE

	Other a following Dialbert I. J. J. 1997 A.				
	City of Imus Polytechnic Institute – Assessment Center				
	Simple				
TYPE OF TRANSACTION	G2C (CIPI Trainees) Trainees who completed training from any TESDA-accredited Technical-Vocational Institute (TVI)				
	F REQUIREMENTS	WHERE TO SECURE			
<i>I. In-house Trainee</i> A. Pre-assessment					
		CIPI Processing Officer			
Application Form					
Self-Assessment Guide		CIPI Processing Officer			
2 pcs passport ID pictures in white t with nametag)	background (must be in collared shirt	CIPI Processing Officer			
Note: ID pictures must be in chemic	al print				
B. During Assessment					
Attendance Sheet					
Rating Sheet		TESDA Assigned Assessor			
Competency Assessment Result Su	• • •	TESDA-Assigned Assessor			
Performance Evaluation Instrument	(PEI)				
C. Post-assessment					
Letter of Authority		CIPI Processing Officer			
Photocopy of Valid ID (2 copies)		CIPI Processing Officer			
National Certification Payment		Cashier's Office (Window 3)			
I. Walk-in Applicant					
A. Pre-assessment					
Application Form		CIPI Processing Officer			
Self-Assessment Guide		CIPI Processing Officer			
2 pcs passport ID pictures in white t with nametag) Note: ID pictures must be in chemic	background (must be in collared shirt al print	Any photo studio offering chemical printing			
B. During Assessment					
Attendance Sheet					
Rating Sheet		TESDA-Assigned Assessor			

CITIZEN'S CHARTER

Competency Assessment Result Evaluation Instrument (PEI)	Summary (CARS) Performance			
C. Post-assessment				
Letter of Authority		CIPI Processing Officer		
Photocopy of Valid ID (2 copies)		Client		
National Certification Payment		Cashier's Office (Window	3)	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements	1. Check and evaluate requirements	None	5 minutes	Maria Shirley Danao Processing Officer
Accomplish Registration Form	Verify completeness of form	None	2 minutes	Maria Shirley Danao Processing Officer
Proceed to TESDA Provincial Office for scheduling	Endorse client to TESDA Provincial Office for scheduling and venue of his/her assessment	None	1 day	Maria Shirley Danao Processing Officer
	TOTAL		1 day and 7 mins	
After obtaining schedule from	TESDA Provincial Office			
Pay Assessment Fee	Accept payment and issue Official Receipt (O.R.)	TESDA-prescribed Assessment Fee (PHP 500)	10 minutes	Dianne Garcia Administrative Officer I
Post-assessment				
	Collect reports and documents for submission to TESDA Provincial Office	NONE	1 day	Maria Shirley Danao Processing Officer
For assessment examination pa	assers			
Claim National Certification	Issuance of National Certification to the qualified candidate	TESDA-prescribed Assessment Fee (PHP 60)	10 minutes	TESDA
	Fill out Client Sati	sfaction Feedback Form		





6. ISSUANCE OF VARIOUS CERTIFICATIONS

Issuance of the following requested documents:

- Certificate of Completion/Enrollment
- Institutional Certificate
- Certificate of Good Moral Character
- TOR (Transcript of Record)

OFFICE OR DIVISION	City of Imus Polytechnic Institute - Registrar's	s Office		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	CIPI Trainees and Graduates			
CHECKLIST	OF REQUIREMENTS WHERE TO SECURE			
Request Slip		Registrar (Window 1)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out Request Slip	1.1 Check student's records	None	5 minutes	Maria Shirley Danao
				Registrar III
	1.2 Prepare the requested document	None	1 day	
2. Receive the requested	2.1 Issue the document	None	5 minutes	Maria Shirley Danao
document				Registrar III
	2.2 Log the requester's name at the	None	2 minutes	
	designated Logbook			
	Fill out Client Satisfaction	on Feedback Form		
	TOTAL	None	1 day and 12 minutes	





CITY COLLEGE OF IMUS INTERNAL SERVICES







1. REQUEST FOR THE USE OF FACILITIES

	lable rooms and/or facilities for government fun				
OFFICE OR DIVISION	City of Imus Polytechnic Institute – General A	dministration Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G – Government to Government, G2C – G	G2G – Government to Government, G2C – Government to Citizens			
WHO MAY AVAIL THE SERVICE	All offices under the City Government of Imus				
	Any public agency or organization				
CHECKLIST OF REQUIREMENTS WHERE TO SECURE			RE		
Letter of Intent		Client			
Endorsement Letter (if applicable)		Local Government Unit – Office of the Mayor			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requirements	1.1 Assess the submitted requirements and check the availability of venue	None	3 minutes	Curley Mae Rafael Administrative Officer II	
	1.2 Advise the client on the availability of venue	None	2 minutes		
	Fill out Client Satisfaction	on Feedback Form			
	TOTAL	None	5 minutes		

CITIZEN'S CHARTER





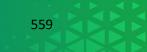
2. SUBMISSION OF REPORT ON COLLECTIONS AND DEPOSITS

Submission of financial reports after the issuance of official receipts to external clients and the deposit of collections.

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Cashier's	City of Imus Polytechnic Institute – Cashier's Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2G - Government to Government				
WHO MAY AVAIL THE SERVICE	Treasurer's Office				
CHECKLIST	ST OF REQUIREMENTS WHERE TO SECURE			RE	
a. Three (4) copies of Report on Collections and Deposits (RCD)		1 - Local Government Unit – City Treasurer's Office 1 – CIPI			
b. Three (5) copies of validated deposit slip/s		1 copy – UCPB 3 Copies - City Treasurer's Office 1 Copy – CIPI			
c. Duplicate and triplicate copy of is clients	sued Official Receipt/s (O.R.) to external	Local Government Uni	t – City Treasurer's Offic	е	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Receive requirements	1. Submit report of collections and deposits for any Official Receipt generated	None	1 day	Dianne Garcia Administrative Officer I	
	Fill out Client Satisfaction	on Feedback Form			
	TOTAL	None	1 day		







3. REQUEST FOR SUPPLIES

Request of CIPI personnel or section for replenishment of supplies and/or provision of materials and equipment available in the storage area.

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Cashier's	ity of Imus Polytechnic Institute – Cashier's Office			
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	Any CIPI Staff				
CHECKLIS	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Monitoring Sheet	Cashier's Office (Window 3)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE	
			TIME		
1. Request for supply/ies and	1. Check the availability of supply/ies and	None	8 minutes	Dianne Garcia	
present monitoring sheet	encode entries in the logbook and in the			Administrative Officer I	
	monitoring sheet				
2. Sign in the logbook	2. Release requested supply/ies	None	2 minutes	Dianne Garcia	
				Administrative Officer I	
	Fill out Client Satisfaction	on Feedback Form			
	TOTAL None 10 minutes				

4. REQUEST FOR REIMBURSEMENT

Request of CIPI officials or sections for reimbursement of expenses incurred during official business activities.

OFFICE OR DIVISION	City of Imus Polytechnic Institute – Cashier's Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G, G2C, G2B			
WHO MAY AVAIL THE SERVICE	Board of Trustees, School Administrator and con	cerned sections of CI	PI	
CHECKLIST	ST OF REQUIREMENTS WHERE TO SECURE			URE
Refer to the list of requirements from A	Accounting Office	Local Government L	Init – City Accounting	Office
CLIENT STEPS	AGENCY ACTION	FEES TO BE	PROCESSING	PERSON RESPONSIBLE
		PAID	TIME	
1. Submit complete requirements	1.1 Prepare reimbursement request and Check	None	30 minutes	Dianne Garcia
	completeness of attachments			Administrative Officer I
	1.2 Submit final request with attachments to	None	10 minutes	
	Accounting Office for processing			
	TOTAL	None	40 minutes	



ECONOMIC ENTERPRISE MANAGEMENT OFFICE EXTERNAL SERVICES







OFFICE OR DIVISION	Economic Enterprise Management Office – Imus Public Market and Bahayang Pag-asa Public Market				
CLASSIFICATION	Complex		anayang rag-asa rubik		
TYPE OF TRANSACTION	G2B – Government to Business				
	Imus Public Market Stallholders / Bahayang Pag-asa Public Market Stallholders				
	OF REQUIREMENTS	ay-asa rubiic iviarket s	WHERE TO SECUR		
Present Business Permit	OF REQUIREMENTS	Rusiness Dermits and			
Previous Contract of Lease		Business Permits and I	hayang Pag-asa Public I	Markat Admin Office	
			, , ,	Market – Admin Office	
Community Tax Certificate (Cedula)		City Treasurer's Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the request.	1. Verify and evaluate the requirements	None	3 minutes	Romel F. Lazo (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market)	
2. Receive Order of Payment	2. Issue Order of Payment	None	1 minute	Romel F. Lazo Loralie Lizel S. Garde (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market)	
3. Pay the required fees and get the Official Receipt (OR)	3.1 Receive the payment and issue Official Receipt	Php 200.00	2 minutes	City Treasurer's Office (Imus Public Market) Richard R. Velasco (Bahayang Pag-asa Public Market)	
	3.2 Process the Request	None	5 minutes	EEMO Staff (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market)	

1. RENEWAL OF CONTRACT OF LEASE

CITIZEN'S CHARTER

	3.3. Sign the document			Romel F. Lazo (Imus Public Market & Bahayang Pag-asa Public Market)
	3.4 Deliver the document to the city hall for signature of the BPLO head and City Mayor			Evelyn R. Lara / Celerina R. Dizon
	3.5 Notarize the Document	None	5 days	City Legal Office
4. Get the Document	4. Release the document signed and notarized.	None	1 minute	EEMO Staff (Imus Public Market) (Bahayang Pag-asa Public Market)
Fill-out Client Satisfaction Rating Form				
	TOTAL	None	5 days and 11 minutes	





2. MARKET CLEARANCE AND CERTIFICATION

Review and evaluation of stallholders based on accounts.

Review and evaluation of stall				
OFFICE OR DIVISION	Economic Enterprise Management Office – Ir	nus Public Market and E	Bahayang Pag-asa Public	c Market
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Imus Public Market Stallholders / Bahayang F	Pag-asa Public Market S	tallholders	
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Personal Appearance of Stallholders		Client		
Official Receipt (OR) of Stall Fee Ele	ectricity Fee and Sublease Fee	Client		
Previous Business Permit		Business Permits and	Licensing Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Submit the request.	1. Verify the status of payment of the stallholder and issue order of payment	None	3 minutes	Loralie Lizel S. Garde (Imus Public Market) Herbert Sapida (Bahayang Pag-asa Public Market)
1.2 Receive Order of Payment				City Treasurer's Office
2. Pay the required fees and get the Official Receipt (OR)	2. Receive the payment and issue Official Receipt	Php 100.00	2 minutes	Rhodora U. Papa Jefferson M. Sayas Annegelica C. Pascual (Imus Public Market)
				Richard R. Velasco (Bahayang Pag-asa Public Market)
3. Get the Document	3.1. Sign the document.	None	2 minutes	Romel F. Lazo (Imus Public Market and Bahayang Pag-asa Public Market)

CITIZEN'S CHARTER

3.2 Release the document Fill-out Client Satisfact	None	2 minutes	EEMO Staff (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market)
	0		
TOTAL	None	9 minutes	

NOTE: Inform the client to proceed to barangay hall for Market Clearance/Barangay Endorsement for the Renewal of Business.







3. MARKET STALL RENOVATION PERMIT This covers the minor repair of electrical and plumbing.

I his covers the minor repair of electrical and plumbing.				
OFFICE OR DIVISION	Economic Enterprise Management Office – In	nus Public Market and B	ahayang Pag-asa Public	c Market
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE SERVICE	Imus Public Market Stallholders / Bahayang	Pag-asa Public Market S	Stallholders	
CHECKLIST OF REQUIREMENTS			WHERE TO SECUR	RE
Request Letter		Client		
Accomplished Renovation Form (3 c	opies)		ahayang Pag-Asa Public	c Market – Admin Office
Sketch plan (if applicable)		Client		
Authorization from Stallholder (if sub		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the request.	1.1 Record the request and the date of renovation1.2 Inspect the stall for renovation (electrical and plumbing for repair)	Php 50.00 None	3 minutes	Rizzalyn M.Valenzuela Evelyn R. Lara (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market) Reymon B. Pasao Market Inspector Raul Q. Abella Noel Salumbides Maintenance Staff (Imus Public Market) Herbert L. Sapida Market Inspector (Bahayang Pag-asa Public Market)
	1.3 Approve the request	None	2 minutes	Romel F. Lazo (Imus Public Market) Herbert L. Sapida (Bahayang Pag-asa Public Market)

CITIZEN'S CHARTER

2. Claim the Document	2. Process and release the document	None	3 minutes	Loralie Lizel S. Garde (Imus Public Market) Herbert L. Sapida Judilyn N. Olavario (Bahayang Pag-asa Public Market)		
Fill-out Client Satisfaction Rating Form						
	TOTAL	Php 50.00	23 minutes			







4. TRANSFER OF RIGHTS

A TRANSFER OF RIGHTS						
OFFICE OR DIVISION	Economic Enterprise Management Office -	 Imus Public Market and E 	Bahayang Pag-asa Public	: Market		
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2B – Government to Business					
WHO MAY AVAIL THE SERVICE		g Pag-asa Public Market S				
	OF REQUIREMENTS		WHERE TO SECURE			
Personal Appearance of Previous a	nd New Stallholder Client					
Jpdated Contract of Lease of Previo				blic Market – Admin Office		
Latest Business Permit of Previous		Business Permits and Lic	censing Office			
Community Tax Certificate (CTC) of	Previous and New Stallholder	City Treasurer's Office				
Valid ID of Previous and New Stallho	older (1 Copy)	Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit the request.	1. Verify and evaluate the requirements	None	2 minutes	Romel F. Lazo		
2. Receive Order of Payment	2. Issue Order of Payment	None	1 minute	Romel F. Lazo		
3. Pay the required fees and get the Official Receipt (OR)	3.1 Receive the payment and issue Official Receipt	Good Will Fee Wet Section – Php 100,000.00; Dry Section – Php 120,000.00; Miscellaneous fee (Renewal Fee) Php 200.00	2 minutes	City Treasurer's Office		
	3.2 Process the Request	None	5 minutes	EEMO Staff		
	3.3. Sign the document	None	1 minute	Romel F. Lazo EEMO		
	3.4 Deliver the document to the city hall for signature of the BPLO head and City Mayor	None		EEMO Staff		
	3.5 Notarize the Document	None	3 days	City Legal Office		
4. Get the Document	4. Released the signed documents to the Stallholders	None	3 minutes	EEMO Staff		
	Fill-out Client Satisf	action Rating Form				
	TOTAL	None	3 days and 14 min.			

CITIZEN'S CHARTER

5. PAYMENT OF SLAUGHTERHOU	SE FEES					
OFFICE OR DIVISION	Economic Enterprise Management Office -	Economic Enterprise Management Office – Imus City Slaughterhouse				
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2B, Government to Business; G2C – Government to Citizen					
WHO MAY AVAIL THE SERVICE	All hog, cattle, and goat dealers and vendo	ors				
CHECKLIST	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			=		
Shipping Permit		Client				
Hog, cattle and goat		Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.1 Present the shipping permit.	1.1 Check permit and count the hogs, cattle, and goats	None	10 minutes	Melvin Romilla; Magfelio Lopez Jr.;		
	1.2 Ante-mortem inspection and animal observation	None	10 minutes	Melvin Romilla; Magfelio Lopez Jr;		
	1.3 Slaughter the animals	None	30 minutes (per animal)	Butcher		
	1.4 Post-mortem inspection and branding	None	5 minutes	Melvin Romilla; Magfelio Lopez Jr;		
	1.5 Weigh the animal and record the weight	None	5 minutes	Miralfez Santos; Alrex Legion		
1.2. Receive Order of Payment	1.6 Assess the amount to be paid and issue Order of Payment	None	2 minutes	Jerry Jarin; Danielyn Barbon		
2. Pay the slaughter fees and get the Official Receipt (O.R.)	2. Receive payment and release the Official Receipt (O.R.)	See below	2 minutes	Jerry Jarin; Danielyn Barbon		
3. Receive the slaughtered animals.		None	15 minutes	Adonis Irenea; Roger Desamparado		
	Fill-out Client Satis	faction Rating Form				
	TOTAL	Based on assessment	1 hour, 19 minutes			

5. PAYMENT OF SLAUGHTERHOUSE FEES





Slaughter Fees

Fees	Нод	Cattle	Goat
Slaughter Fees	Php 100.00 / head	Php 200.00/ head	Php 20.00 / head
Permit to Slaughter	Php 20.00 / head	Php 30.00 / head	Php 20.00 / head
Corral Fee	Php 5.00 / head	Php 7.00 / head	Php 5.00 / head
Ante Mortem Fee	Php 5.00 / head	Php 7.00 / head	Php 3.00 / head
Post Mortem Fee	Weight X 0.35 / kilo	Weight X 0.35 / kilo	Weight X 5.95 / kilo
Waste Disposal	Php 1.00	Php 1.50	Php 0.50
Delivery Charge			
From Imus	Php 15.00	Php 20.00	Php 10.00
From another City/Municipality	Php 40.00	Php 50.00	Php 35.00
Scalding Fee	Php 15.00	Php 20.00	Php 10.00
Boarding Fee	Php 150 / head	Php 200.00 / head	Php 50.00 / head

Note: Butcher's Fee will be paid by the dealers/vendors to the butcher Receiving Time: 7:00 AM - 6:00 PMSchedule of Slaughtering:

DAYS	HOG	CATTLE	GOAT
Sunday –	11:00 PM – 3:00 AM	7:00 PM – 11:00	6:00 PM – 7:00 PM
Thursday		PM	
	7:00 AM – 9:00 AM		
Friday -	9:00 PM – 3:00 AM	5:00 PM – 11:00	
Saturday		PM	
	7:00 AM – 9:00 AM		







6. COMPLAINT/MEDIATION

••••••						
OFFICE OR DIVISION	Economic Enterprise Management Office – Imu Slaughterhouse	conomic Enterprise Management Office – Imus Public Market, Bahayang Pag-Asa Public Market and Imus City Iaughterhouse				
CLASSIFICATION	Complex	omplex				
TYPE OF TRANSACTION	G2C - Government to Citizens					
WHO MAY AVAIL THE SERVICE	Imus Public Market Stallholders / Bahayang Pag	g-asa Public Market Sta	allholders / Imus City Slau	ghterhouse Clients		
CHECKL	ST OF REQUIREMENTS		WHERE TO SECU	JRE		
Appearance of Complainants	Imus City Public Market/Babayang Pag-Asa Public Market & Imus C			blic Market & Imus City		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Report of Complaints	1.1 Record and verify the complaint report	None	3 minutes	Security Staff		
2. Go to scheduled date	2.1Invite the appearance of concern parties	None	3 minutes	Security Staff		
	2.2 Mediate the report complaints	None	5 minutes	Christian Chester Sauler Imus Public Market		
	2.3 Record/blotter of report	None	1 minute	Elmer Olaes Jr. Bahayang Pag-asa Public Market Leopoldo Del Rosario Jr. Imus Slaughterhouse		
				Security Staff		
3. Get the copy of report	3. Release the copy of blotter for both parties	None	1 minute	Security Staff		
	TOTAL	None	13 minutes			





CITY EXTENSION OFFICE EXTERNAL SERVICES







1. ISSUANCE OF RESIDENCE CERTIFICATE (CEDULA) Any individual shall be issued Resident Certificate to every person or corporation upon payment of the residence tax.

	sident Certificate to every person of corporation up	on payment of the real				
OFFICE OR DIVISION	City Extension Office	City Extension Office				
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C - Government to Citizen	G2C - Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents of the City of Imus					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	URE		
Information Slip		City Extension Office				
Valid Government ID		From Taxpayer				
Certificate of Compensation Payment - B		From Taxpayer				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Approach the Help Assistance Desk for inquiry and information slip	1. Assist and assess the requirements.	None	1 minute	Dave Jordan Almonte		
2. Present the information slip and valid government ID.	2. Notify the amount of fees to be paid.	None	1 minute	Marivic Ruiz Ana May Sañez Marisel Mangundayao City Treasurer's Office Staff		
3. Pay the required fees.	3.1. Receive the payment, and3.2. Issue the Official Receipt (O.R)	Depends on the residence tax computation	5 minutes	Marivic Ruiz Ana May Sañez Marisel Mangundayao City Treasurer's Office Staff		
4. Receive the document	4. Release the CEDULA	None	1 minute	Marivic Ruiz Ana May Sañez Marisel Mangundayao City Treasurer's Office Staff		
	TOTAL	Depends on the residence tax computation	8 minutes			





2. PAYMENT OF REAL PROPERTY TAX (RPT)

Real Property Tax payments are made at the Land Tax Division of the City Treasurer's Office and at the various Satellite Offices located at the City Extension Office in Bahayang Pag-asa Subdivision, Robinsons Place Imus, The District Mall-Ayala, and the old City Hall. Taxpayers might choose to pay either annually or quarterly. Those who pay in advance receive discounts.

quarterly. Those who pay in advance recer					
OFFICE OR DIVISION		City Extension Office			
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizens				
WHO MAY AVAIL THE SERVICE	All residents of the City of Imus				
	OF REQUIREMENTS		WHERE TO SECU	RE	
Valid ID (if applicable)		From Taxpayer			
Latest Real Property Tax (RPT) Office Rec	eipt/Tax Declaration	From Taxpayer			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Approach the Help Assistance Desk for inquiry and checking of valid requirements	1. Assess the requirements.	None	1 minute	Dave Jordan Almonte	
2. Present / Submit the requirements at the Cashier Window	2. Issue the Statement of Account.	None	1 minute	Marivic Ruiz Ana May Sañez City Treasurer's Office Staff	
3. Pay the required fee	3.1. Receive the payment, and 3.2. Prepare the Official Receipt (O.R)	Computation of RPT: Basic RPT: Assessed Value X 1% Add: Penalty (if Applicable) Less: Discount (if Applicable) Special Education Fun (SEF):	5 minutes	Marivic Ruiz Ana May Sañez City Treasurer's Office Staff	





4. Receive the Official Receipt	4. Release the Official Receipt		Assessed Value X 1% Add: Penalty (if Applicable) Less: Discount (if Applicable) None	1 minute	Marivic Ruiz Ana May Sañez City Treasurer's Office Staff
		TOTAL	Based on assessment	8 mins	







3. ISSUANCE OF PSA-BATCH REQUEST ENTRY QUERY SYSTEM (BREQS)

The BREQS is a scheme where PSA authorizes the LGU to receive requests for PSA-issued copies and certifications of civil registry documents from the public and issue the documents to its clientele. The following requests can be file through BREQS:

- Copies of birth, death, marriage documents,
- o Copies of annotated or endorsed documents provided copies of said documents have already been issued by PSA previously, and
- Certificates of No Record of Marriage (CENOMAR or "Singleness").
- Online Forms available via PSA website.

City Extension Office				
Complex				
32C - Government to Citizens; G2G - Government to Government				
ny individual may avail the service				
CHECKLIST OF REQUIREMENTS				
details.	City Extension Office			
t original valid ID/s	Applicant/Client/Requested	or		
ent owner and indicating the following: t/s;				
AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1 Assess the requirements and issue appropriate form.	None	1 minute	Dave Jordan Almonte	
2.1 Check the applicant's requirements;2.2. Check the details of the document,	None	5 minutes	Ric Jason Limbo	
	G2C - Government to Citizens; G2G - Governm Any individual may avail the service REQUIREMENTS details. t original valid ID/s ne document owner and original and photocopy ent owner and indicating the following: t/s; AGENCY ACTION 1.1 Assess the requirements and issue appropriate form. 2.1 Check the applicant's requirements;	Complex G2C - Government to Citizens; G2G - Government to Government Any individual may avail the service REQUIREMENTS details. City Extension Office t original valid ID/s he document owner and original and photocopy ent owner and indicating the following: t/s; AGENCY ACTION FEES TO BE PAID 1.1 Assess the requirements and issue appropriate form. 2.1 Check the applicant's requirements;	Complex G2C - Government to Citizens; G2G - Government to Government Any individual may avail the service WHERE TO SECURE REQUIREMENTS WHERE TO SECURE Requirements City Extension Office details. City Extension Office t original valid ID/s Applicant/Client/Requestor ne document owner and original and photocopy Applicant/Client/Requestor ent owner and indicating the following: t/s; t/s; FEES TO BE PAID PROCESSING TIME 1.1 Assess the requirements and issue appropriate form. None 1 minute 2.1 Check the applicant's requirements; None 5 minutes	

CITIZEN'S CHARTER

	2.3. If approved, issue order of payment			
3. Prepare the required fee	3.1. Receive the payment,	Fees:	1 day	Ric Jason Limbo
	3.2. Issue the applicant an acknowledgement slip and notify the applicant of the release date.			
	3.3. Process payment at the City Government Center on the next working day.	PSA to collect the following: Birth Certificate P155.00		
	3.4. Submit the documents to CCRO for processing.	Marriage Certificate P155.00		
		Death Certificate P155.00 CENOMAR P210.00		
4. Received the document/s and sign in the	4.1. Immediately notify the requestor for	None	3 minutes	Ric Jason Limbo
logbook	document availability	none	(stop time)	Ric Jason Limbo
	4.2. Release the document with 2 Official Receipts (from LGU and PSA)		10 days	
	TOTAL	Based on assessment	11 days, 9 minutes	







SATELLITE OFFICE EXTERNAL SERVICES







1. ASSESSMENT AND PAYMENT OF REAL PROPERTY TAX

OFFICE OR DIVISION	Imus Satellite Office				
CLASSIFICATION	Simple	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST OF F	REQUIREMENTS	WHERE TO SECURE			
Valid Identification Card (if applicable	e)	BIR, Post Office, DFA, PSA, SSS,	GSIS, PAG-IBIG, NBI Cleara	nce, Police Clearance	
Latest Real Property Tax (RPT) Offic	cial Receipt	City Treasurer's Office/Extension/	Satellite Offices		
Tax Declaration Certificate		City Assessor's Office			
Notice of Delinquency (for delinquen	t accounts)	City Treasurer's Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirement	1.1 Verify the Record/ Real Property Tax Assessment1.2 Issue Statement of Account	None	3 minutes	City Treasurer's Office assigned Personnel for Collection	
2. Pay the Assessed Tax and get the Official Receipt (OR)	(SOA) per transaction 2. Receive payments and issue official receipt	Computation of Real Property Tax Basic Real Property Tax Assessed Value X 1% Add: Penalty (if Applicable) Less: Discount (If applicable) Special Education Fund Assessed Value X 1% Add: Penalty (if Applicable) Less: Discount (If applicable)	2 minutes	City Treasurer's Office assigned Personnel for Collection	
	TOTAL	Based on assessment	5 minutes		





2. ISSUANCE OF MAYOR'S PERMIT TO WORK

OFFICE OR DIVISION	Imus Satellite Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All workers in the City of Imus			
CHECKLIST OF	F REQUIREMENTS	WH	ERE TO SECURE	
Filled out application form		Satellite Office		
Health card		City Health Office		
NBI Clearance/Police Clearance		NBI/PNP		
Community Tax Certificate (CTC)	City Treasurer's Office/ Extension Office/ Satellite Offices			s
Referral Letter (non-resident of Imus		Municipality or City Mayor		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements	1. Verify the requirements	None	5 minutes	Satellite Office assigned Personnel
2. Pay the assessed fee and get the OR	2. Receive the payment and issue the official receipt	Php 80.00 Documentary stamp included	2 minutes	City Treasurer's Office assigned Personnel for Collection
3. Present the O.R. and receive the documents	3. Prepare Mayor's permit to work and release the document	None	7 minutes	Satellite Office assigned Personnel
	Fill-out Client S	Satisfaction Rating Form		
	TOTAL	Php 80.00	14 minutes	





3. ISSUANCE OF COMMUNITY TAX CERTIFICATE

5. ISSUANCE OF COMMUNITY TAX				
	Imus Satellite Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents and non-residents of City of	Imus		
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Information slip		Satellite Office		
Valid ID Applicant		BIR /Post Office, DFA, PSA, SSS		Police Clearance
BIR form No. 2316 Certificate of complast year/ latest pay slip	pensation/ Certificate of Income earned	Human Resource Office/ Accoun	nting Office	
Photocopy of Notarized Special Powe	er of Attorney	Notary Public by person being re	presented	
Medical Certification specifying health	n condition of applicant	Hospital		
Certification of BJMP Officer specifyir photocopy of applicants valid ID	ng detainment of applicant with	BJMP		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit accomplished information slip	1. Verify information slip assess tax and process request	None	2 minutes	Satellite Office assigned Personnel
2. Pay the assessed fee get the CTC	2. Receive payment and issue Official Receipt then issue the Community Tax Certificate.	(P34.00 voluntary) b. Additional Community Tax (not to exceed P5,000.00) Gross receipts or earnings derived from business during the preceding year (P1.00 for every P1,000.00) Salaries or gross receipts or earnings derived from exercised of profession or pursuit of any occupation (P1.00 for every P1,000.00)	3 minutes	City Treasurer's Office assigned Personnel for Collection /Satellite Office assigned Personnel
		atisfaction Rating Form	E minutes	
TOTAL Based on assessment 5 minutes				





OFFICE OR DIVISION Imus Satellite Office CLASSIFICATION Simple TYPE OF TRANSACTION G2C – Government WHO MAY AVAIL THE SERVICE All residents of City CHECKLIST OF REQUIREMENTS Barangay Clearance Community Tax Certificate AGENCY 1. Present the requirements 1. Verify the requirements 2. Pay the assessed fee and get the O.R. Receive the payment official receipt				
TYPE OF TRANSACTIONG2C – GovernmentWHO MAY AVAIL THE SERVICEAll residents of CityCHECKLIST OF REQUIREMENTSBarangay ClearanceCommunity Tax CertificateCLIENT STEPSAGENCY1. Present the requirements1. Verify the requirement2. Pay the assessed fee and getReceive the payment	;			
WHO MAY AVAIL THE SERVICE All residents of City CHECKLIST OF REQUIREMENTS Barangay Clearance Community Tax Certificate CLIENT STEPS AGENCY 1. Present the requirements 1. Verify the requirements 2. Pay the assessed fee and get Receive the payment				
CHECKLIST OF REQUIREMENTS Barangay Clearance Community Tax Certificate Community Tax Certificate AGENCY 1. Present the requirements 1. Verify the requirements 2. Pay the assessed fee and get Receive the payment	to Citizen			
Barangay Clearance Community Tax Certificate CLIENT STEPS AGENCY ////////////////////////////////////	of Imus			
Community Tax CertificateCLIENT STEPSAGENCY1. Present the requirements1. Verify the requirements2. Pay the assessed fee and getReceive the payment		V	VHERE TO SECURE	
CLIENT STEPSAGENCY1. Present the requirements1. Verify the requirements2. Pay the assessed fee and getReceive the payment		Respective Barangay		
1. Present the requirements1. Verify the requirements2. Pay the assessed fee and getReceive the payment		City Treasurer's Office/ Extensio	n Office and Satellite Of	fices
2. Pay the assessed fee and get Receive the payment	ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	nents	None	3 minutes	Satellite Office assigned Personnel
		For employment (new) scholarship, study grant and other purposes not herein specified - Php 50.00; For employment (renewal) - Php100.00; For change name – Php 100.00; For Application of Filipino Citizenship – Php 500.00; For passport or visa application – Php 100.00; For work or travel abroad – Php 150.00; For firearms permit application – Php 500.00 For PLEB Clearance – Php 100.00; For Certification of Police Clearance – Php 50.00	2 minutes	City Treasurer's Office assigned Personnel for Collection
	TOTAL	Based on assessment	5 minutes	

4. ISSUANCE OF OFFICIAL RECEIPT FOR POLICE CLEARANCE APPLICATION





5. ISSUANCE AND/OR RELEASE OF PHILIPPINE STATISTICS AUTHORITY (Formerly NSO) AUTHENTICATED BIRTH CERTIFICATE, MARRIAGE CERTIFICATE, DEATH CERTIFICATE, AND CERTIFICATE OF NO MARRIAGE (CENOMAR)

OFFICE OR DIVISION	Imus Satellite Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST OF	REQUIREMENTS		WHERE TO SECURE		
Accomplished Application Form of B	irth, Marriage, Death or CENOMAR	PSA			
For Personal Application					
Valid ID of Document owner (1 Origin (both sides)	nal for validation and 1 photocopy	BIR / Post Office, DFA, PSA, SS	S, GSIS, PAG-IBIG, NBI,	Police Clearance	
For Representative					
Valid ID of representative (1 Original sides)	for validation and 1 photocopy (both	BIR / Post Office, DFA, PSA, SS	S, GSIS, PAG-IBIG, NBI,	Police Clearance	
Authorization letter or Notarized Spe	Document owner				
Valid ID of representative (1 Original for validation and 1 photocopy (both sides)		BIR / Post Office, DFA, PSA, SSS, GSIS, PAG-IBIG, NBI, Police Clearance			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Fill out and submit Philippines Statistics Authority (PSA) Application Form	1. Check if information is complete and readable	None	5 minutes	Satellite Office assigned Personnel	
2. Pay the required fee and get claim stub	2. Receives payment, issues Official receipt, release the Claim Stub and prepare endorsement of PSA applications to the City registrar's Office for submission to PSA.	PSA Fee for BC, MC, DC – Php 155.00 + SF;	3 minutes	City Treasurer's Office assigned Personnel for Collection /Satellite Office assigned Personnel	
3. Wait for and receive notification from Satellite Office thru text or call for claiming the PSA document/s.	3. Notify applicant on the availability and claiming of PSA documents from City registrar's Office	None	2 minutes	Satellite Office assigned Personnel	
4. Present claim stub and claim the PSA document/s with City and PSA Official Receipt	4. Release the PSA document/s	None	2 minutes	Satellite Office assigned Personnel	
	TOTAL	Based on assessment	12 minutes		





6. PUBLIC INFORMATION ASSISTANCE

OFFICE OR DIVISION	mus Satellite Office				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All				
CHECKLIST OF	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
None		Satellite Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Ask queries about other services of	1. Attends to inquiry/ies about other	None	2 minutes or more	Satellite Office assigned	
the City Government and other	services of the City Government.		depending on the	Personnel	
relevant details.			queries.		
	TOTAL	Based on assessment	2 minutes		







CITY HEALTH OFFICE EXTERNAL SERVICES







1. PROVIDE IMMUNIZATION SERVICES

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All pregnant residents of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Existing Growth Chart Form (For first time clients, the midwife on duty will provide City Health O the Growth Chart Form)				
Barangay Clearance	gay Clearance Respective Barangay			
One (1) Government Issued or any v	t Issued or any valid I.D. Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the data being asked	 Check the existing record of the client For first time client, new form will be given and fill up 	None	3 minutes	Barangay Health Center: Midwife on duty
2. Undergo the physical examination	2. Record the vital signs and conduct physical examination	None	15 minutes	Barangay Health Center: Midwife on duty
3. Receive immunization	3.1 Provide immunization	None	5 minutes	Barangay Health Center: Midwife on duty
	3.2 Provide post-immunization instructions	None	3 minutes	
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	26 minutes	





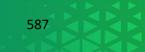


2. PROVIDE PRE-NATAL EXAMINATION

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All pregnant residents of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
	d (For first time clients, the Midwife on duty	City Health Office		
will provide the Home-Based Mother	Record)			
Barangay Clearance	Barangay Clearance Respective Barangay			
One (1) Government Issued or any valid I.D. Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the data being asked	1. Accomplish the Home-Based Mother	None	3 minutes	Barangay Health Center:
	Record			Midwife on duty
2. Undergo the physical	2. Record the vital signs and conduct	None	15 minutes	Barangay Health Center:
examination	physical examination			Midwife on duty
5	3. Provide Pre-Natal Examination Health	None	10 minutes	Barangay Health Center:
Examination Health Education	Education and available medicines			Midwife on duty
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	28 minutes	







3. PROVIDE FAMILY PLANNING SERVICES

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All Women of Reproductive Age 15-49 years	old residents of Imus		
	OF REQUIREMENTS		WHERE TO SECUR	RE
	Family Planning New Acceptor, Current	City Health Office		
	hanging method, the midwife on duty will	- ,		
provide the Family Planning Form 1)				
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any v	alid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being	1. Interview the client, accomplish Family	None	3 minutes	Barangay Health Center:
asked	Planning Form1			Midwife on duty
2. Undergo the physical	2. Assess and conduct physical	None	15 minutes	Barangay Health Center:
examination	examination. Record the vital signs and			Midwife on duty
	remarks finding.			
3. Undergo Family Planning	3.1 Provide Family Planning Counseling	None	10 minutes	Barangay Health Center:
Counseling.				Midwife on duty
	3.2 Provide the available Family Planning	None	3 minutes	
	methods/commodities in the clinic.			
4. Schedule of next follow up visit.	4. Provide the date of next visit.	None	3 minutes	Barangay Health Center:
				Midwife on duty
	Fill-out Client Satisfac	U U	0.4 million 1 million	
	TOTAL	None	34 minutes	







4. PROVIDE MEDICAL CONSULTATION

The health care provider evaluates the patient's condition, provides medical advice and recommends treatment.

OFFICE OR DIVISION	City Health Office				
CLASSIFICATION	Highly-Technical	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVIC	E All residents of Imus				
CHECKL	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Existing Individual Treatment Rewill provide the Individual Treatm	cord (For first time clients, the Midwife on duty ent Record)	City Health Office			
Barangay Clearance		Respective Barangay			
One (1) Government Issued or a	ny valid I.D.	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Provide medical history	1. Interview the patient	None	5 minutes	Barangay Health Center: Midwife on duty	
2. Undergo the examination	2.1 Record the vital signs and conduct physical examination	None	15 minutes	Barangay Health Center: Midwife on duty	
	2.2 Prescribe the appropriate medicine(s) and medical advice	None	5 minutes		
3. Receive the medicine	3. Provide the medicine (if available)	None	2 minutes	Barangay Health Center: Midwife on duty	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	27 minutes		

NOTE: If hospitalization is required, fill-out the referral form to the hospital-of-choice.







5. PROVIDE NON-COMMUNICABLE MEDICINES

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Barangay Clearance		Respective Barangay Health Stations		
One (1) Government Issued or any v	alid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Proceed to the Health Worker on duty (nurse, midwife).	1.1 Assess patient (20 years old and above), takes and records vital signs using PhilPEN risk assessment form	None	5 minutes	Nurse / Midwife on duty
	1.2. Extract blood sample (for blood sugar)	None	2 minutes	
	1.3. Records the results at PhilPEN risk assessment form.	None	1 minute	
	1.4. Refer patient to medical officer on duty	None	1 minute	
2. Proceed to the medical officer on duty and present the referral form	2.1 Perform physical examination and management	None	4 minutes	Medical officer on duty
	2.2. Prescribes medicines	None	1 minute	
	2.3 Proceeds to the nurse / midwife on duty	None	1 minute	
3. Proceed to the nurse / midwife on duty	3.1. Checks the PhilPen Risk assessment form / prescription from medical officer	None	1 minute	Nurse /Midwife on duty
	3.2 Issues prescribed medicines	None	1 minute	
	3.3 Conducts health teaching	None	2 minute	
	3.4 Schedules next follow up visit	None	1 minute	
	Fill-out Client Satisfac	<u>v</u>	1	
	TOTAL	None	20 minutes	

CITIZEN'S CHARTER

6. PROVIDE DENTAL CARE SERVICES

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				RE
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any valid I.D. Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register the name in the logbook	1.1 Assist the client and provide a call	None	3 minutes	Dental Aide
and receive a call number	number			
	1.2 Record the patient's blood pressure and	None	5 minutes	
	vital signs			
2. Undergo teeth examination	2. Examine the teeth of the patient	None	5 minutes	Dentist on duty
3. Receive dental care service	3.1 Provide dental care service (tooth	None	45 minutes	Dentist on duty
(tooth extraction, prophylaxis and				2
gum treatment)				
g	3.2 Prescribe the appropriate medicine (if			
	available)	None	2 minutes	
	Fill-out Client Satisfac		2	
	TOTAL	None	1 hour	
NOTE: Clients can avail the fo	llowing services: Tooth Extraction, Prophylaxis			reatmont

For critical cases, the patient is being referred to other public/private clinics/hospitals that can accommodate his/her needs.





7. ISSUANCE OF ANTI-TUBERCULOSIS RESULTS AND MEDICINES

	City Lloolth Office			I
OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
	OF REQUIREMENTS		WHERE TO SECUR	RE
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any v		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being asked and undergo the examination		None	5 minutes	Barangay Health Center: Midwife on duty
	1.2 Refer to TB DOTS Clinic	None		
2. Submit the specimen	2.1 Collect the specimen	None	5 minutes	Armand Lasquete; AmielynMangalubnan; Marites Chua
	2.2 Provide the releasing date of the result	None	2 minutes	NTP Nurse
	2.3 Assess the result of the specimen	None	2 days	Dra. Maria Rossini de Ausen; Dra. Ma. Rhodora Coronado; Dra. Noralyn del Mundo; Dra. Gelyn Golamco; Dra. Cherie Lyn Tumilba- Boque; Dra Jennifer Roamar Doctors
	2.4 If positive, enroll the patient to NTP Nurse	None	20 minutes	Romina Bautista; Wilson Uy; Rhina Rea Padura; Mary Laine Martinez

CITIZEN'S CHARTER



3. Receive the medicine	3. Issue the TB medicine supply band and provide instructions of intake	None	5 minutes	Romina Bautista; Wilson Uy; Rhina Rea Padura; Mary Laine Martinez
	TOTAL	None	2 days, 37 minutes	

NOTE: All TB patients enrolled will undergo the HIV testing for free at Imus Reproductive and Wellness Center (Velarde Health Center)

8. ISSUANCE OF ANTI-LEPROSY MEDICINES

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
CHECKLIST C	OF REQUIREMENTS		WHERE TO SECUR	RE
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any va	lid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being asked	1. Gather the background information and medical history of the patient	None	3 minutes	Romina Bautista; Wilson Uy; Rhina Rea Padura; Mary Laine Martinez
2. Undergo the examination	2.1 Examine the patient for signs and symptoms of leprosy and conduct laboratory examination	None	30 minutes	Romina Bautista; Wilson Uy; Rhina Rea Padura; Mary Laine Martinez
	2.2 Enroll the patient for multi-drug therapy and provide lecture to the patient	None	10 minutes	Romina Bautista; Wilson Uy; Rhina Rea Padura; Mary Laine Martinez
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	43 minutes	





9. ISSUANCE OF HEALTH-RELATED CERTIFICATIONS (BURIAL TRANSFER AND EXHUMATION PERMIT, CERTIFICATE OF POTABILITY AND MEDICAL CERTIFICATE FOR VARIOUS PURPOSES)

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE	For death occurred in Imus (Burial Transfer and	d Exhumation Permit); A	II business establishmen	ts in Imus (Certificate of
SERVICE	Potability); All residents of Imus (Medical Certif	icate)		
	IECKLIST OF REQUIREMENTS WHERE TO SECURE			RE
	Burial Transfer and Exhumation Permit)	City Civil Registrar's O		
Latest Physical and Chemical Test of Potability)	and Microbiological Test Result (for Certificate	Respective Laboratory		
Accomplished Medical Certificate F	orm from Tricycle Regulatory Unit (for	Tricycle Regulatory Un	it	
Certificate of Tricycle Franchise) - F				
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any	valid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements	1. Assess the requirements	None	3 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors Dra. Maria Rossini de Ausen; Dra. Ma. Rhodora Coronado; Dra. Noralyn del Mundo; Dra. Gelyn Golamco; Dra. Cherie Lyn Tumilba- Boque; Dra. Jennifer Roamar Doctors
2. Undergo medical examination	2.1 Conduct medical examination (for Medical Certificate)	None	10 minutes	Dra. Maria Rossini de Ausen;

CITIZEN'S CHARTER

				Dra. Ma. Rhodora Coronado; Dra. Noralyn del Mundo; Dra. Gelyn Golamco; Dra. Cherie Lyn Tumilba- Boque; Dra Jennifer Roamar Doctors
	2.2 Process the request	None	5 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors
3. Receive the document	3. Release the document	None	2 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors Dra. Maria Rossini de Ausen; Dra. Ma. Rhodora Coronado; Dra. Noralyn del Mundo; Dra. Gelyn Golamco; Dra. Cherie Lyn Tumilba- Boque; Dra Jennifer Roamar Doctors
	Fill-out Client Satisfacti	None	20 minutes	
	TOTAL		20 mmate3	





10. ISSUANCE AND RENEWAL OF SANITARY PERMIT

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2B – Government to Business			
WHO MAY AVAIL THE	All business establishments in Imus			
SERVICE				
	T OF REQUIREMENTS	WHERE TO SECURE		
For New Applications				
Accomplished Business Assessme		Business Permits and Licensing Office		
Latest result of Water Microbiologic water station) -original	al Examination (for food establishment and	Water testing laboratory		
and water station	Analysis Examination for food establishment	Water testing laboratory		
Health Certificate of staff for food e -original	stablishment and water station, salon and spa	City Health Office		
Urinalysis (1 month validity)- origina	al	Department of Health(DOH) Accredited Laboratory		
Fecalysis (1 month validity)- origina		Department of Health(DOH) Accredited Laboratory		
Chest Xray (6 months validity)- orig	jinal	Department of Health(DOH) Accredited Laboratory		
Drug Test (1 year validity)- original		Department of Health(DOH) Accredited Laboratory		
Pest Control Certification		Any pest control services		
Sanitary Clearance for the last thre already inspected)	e (3) months (proof that the establishment is	City Health Office		
For Renewal Applications				
Accomplished Business Assessme		Business Permits and Licensing Office		
Latest result of Microbiological Exa station) Monthly test from January t	mination (for food establishment and water to December of the previous year	Respective Laboratory		
	ation of employees - two (2) results within the	Respective Clinics		
5	stablishment and water station, salon and spa	City Health Office		
Urinalysis (1 month validity)- origina	al	Department of Health(DOH) Accredited Laboratory		
Fecalysis (1 month validity)- origina		Department of Health(DOH) Accredited Laboratory		





Chest Xray (6 months validity)- original		Department of Health(DOH) Accredited Laboratory			
Drug Test (1 year validity)- original		Department of Health(DOH) Accredited Laboratory			
Previous Sanitary Clearance		City Health Office			
Pest Control Certification		Any pest control servic	es		
Certificate of Disposal from Privation infectious waste)	ate Contractor (for health care facility-Disposal of	Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present the requirements	1.1 Assess the requirements	None	3 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez	
	1.2 Process the request	None	3 minutes	Sanitary Inspectors	
2. Receive the document	2. Release the document	None	2 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors	
	Fill-out Client Satisfa	Ū Ū			
	TOTAL	None	43 minutes		

NOTE: All business establishments undergo the site inspection beforehand and receive the Sanitary Clearance to be presented during the application and renewal of Sanitary Permit.







I. IOOOANOE OF HEAEITH OENTIT				
OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All employed individuals in the City of Imus			
	OF REQUIREMENTS		WHERE TO SECUR	RE
 Health Certificate from Department o Results of Fecalysis Results of Chest X-ray Results of Urinalysis Results of Drug Test 	f Health (DOH) Accredited Laboratories	From DOH Accredited	Laboratories	
Vaccination Card		Client		
One (1) Government Issued or any va	alid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements	2. Verify the submitted requirements and refer to the City Treasurer's Office for the payment	None	5 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors
2. Claim the Order of Payment	2. Issue Order of Payment	None	2 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Sanitary Inspectors
3. Pay the required fee	3. Accept the payment and issue an Official Receipt (O.R.)	Php 130.00	15 minutes	City Treasurer's Office (Windows 8 and 9)
4. Receive the document	4. Release the document	None	1 minute	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Alghem Bryan Madriaga Edward Zeus Apao Marlo Ibabao

11. ISSUANCE OF HEALTH CERTIFICATE FOR NON- FOOD HANDLER- EMPLOYMENT PURPOSES ONLY

CITIZEN'S CHARTER

				Rica Rivera Ricardo Santarin Sanitary Inspectors
Fill-out Clie	ent Satisfaction	n Rating Form		
	TOTAL	Php 130.00	23 minutes	







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12. ISSUANCE OF HEALTH CERTIFICATE FOR FOOD HANDLERS- EMPLOYMENT PURPOSES ONLY

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE	All employed individuals in the City of Imus			
SERVICE				
CHECKL	T OF REQUIREMENTS WHERE TO SECURE			RE
Health Certificate from Departme	nt of Health (DOH) Accredited Laboratories	From DOH Accredited	Laboratories	
 Results of Fecalysis 				
 Results of Chest X-ray 				
 Results of Urinalysis 				
 Results of Drug Test 				
Vaccination Card		Client		
One (1) Government Issued or a		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements	1. Verify the submitted requirements	None	5 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Alghem Bryan Madriaga Edward Zeus Apao Marlo Ibabao Rica Rivera Ricardo Santarin
2. Attend the lecture	2. Handing out leaflet and discuss Food Safety	None	10 minutes	Felisa delos Santos; Ruben Añonuevo Jr; Liana Erica Baloy; Bernie Reyes; Arnold Sanchez Alghem Bryan Madriaga Edward Zeus Apao Marlo Ibabao Rica Rivera Ricardo Santarin

CITIZEN'S CHARTER

3. Undergo examination	3. Conduct Food safety examination	None	10 minutes	Felisa delos Santos;
				Ruben Añonuevo Jr;
				Liana Erica Baloy;
				Bernie Reyes;
				Arnold Sanchez
				Alghem Bryan Madriaga
				Edward Zeus Apao
				Marlo Ibabao
				Rica Rivera
				Ricardo Santarin
4. Claim the Order of Payment	4. Issue Order of Payment	None	2 minutes	Felisa delos Santos;
				Ruben Añonuevo Jr;
				Liana Erica Baloy;
				Bernie Reyes;
				Arnold Sanchez
				Alghem Bryan Madriaga
				Edward Zeus Apao
				Marlo Ibabao
				Rica Rivera
				Ricardo Santarin
5.Pay the required fee	5. Accept the payment and issue an Official	Php 130.00	15 minutes	City Treasurer's Office
	Receipt (O.R.)			(Windows 8 and 9)
6. Receive the document	6. Release the document	None	1 minute	Felisa delos Santos;
				Ruben Añonuevo Jr;
				Liana Erica Baloy;
				Bernie Reyes;
				Arnold Sanchez
				Alghem Bryan Madriaga
				Edward Zeus Apao
				Marlo Ibabao
				Rica Rivera
				Ricardo Santarin
				Sanitary Inspectors
	Fill-out Client Satisfactio	<u> </u>	40 m 1	
	TOTAL	Php 130.00	43 minutes	

CITIZEN'S CHARTER



13. PROVIDE HIV TESTING AND SATELLITE TREATMENT HUB

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
	T OF REQUIREMENTS WHERE TO SECURE			RE
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any v	valid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being asked	counseling	None	30 minutes	Dr. Ferdinand Mina; Romina Bautista; Rhina Rea Padura; Wilson Uy;; Mary Laine Martinez Nheafe Reden Redruco HIV Counselors
2. Undergo HIV Testing	2.1 Conduct HIV Testing2.2 Conduct post-test counseling (if positive)	None None	40 minutes 15 minutes	Armand Lasquete Dr. Ferdinand Mina; Romina Bautista; Rhina Rea Padura; Wilson Uy; Mary Laine Martinez Nheafe Reden Redruco HIV Counselors
3. Receive treatment	4. Provide treatment	None	15 minutes	Dr. Ferdinand Mina
	Fill-out Client Satisfac	0		
	TOTAL	None	1 hour, 40 minutes	

NOTE: You can avail the service at Imus Reproductive and Wellness Center located at Velarde Health Center







14. PROVIDE ANTI-RABIES VACCINATION

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECU	RE
Barangay Clearance		Respective Barangay		
One (1) Government Issued or any va	alid I.D.	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being asked	1. Interview and record the vital signs of the patient	None	5 minutes	Romina Bautista Arlene Angeles Aprilyn Villas Cecil Balingit-Lacbayen Nheafe Reden Redruco
2. Undergo the physical examination	2. Assess the patient and conduct physical examination and categorization	None	15 minutes	Dr. Ferdinand Mina; Dra. Gelyn Golamco Dra. Ma. Rhodora Coronado; Dra. Maria Rossini M. De Ausen Dra. Noralyn Del Mundo Dra. Jennifer Roamar Dra. Cherie Lyn Tumilba- Boque
3. Receive anti-rabies vaccination	3. Provide anti-rabies vaccination	None	5 minutes	Romina Bautista Arlene Angeles Aprilyn Villas Cecil Balingit-Lacbayen Nheafe Reden Redruco
4 Get the details of next schedule	4. Give the date of next follow-up visit	None	1 minute	Romina Bautista Arlene Angeles Aprilyn Villas Cecil Balingit-Lacbayen Nheafe Reden Redruco

CITIZEN'S CHARTER

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TOTAL	None	26 minutes	
NOTE: In second where there is no evoluble outline is reasonable the netions will be re-	fame all (a. a (la anna shellar an	where the all share the states of	a a a success a sha (a the a base a sha

NOTE: In cases where there is no available anti rabies vaccine, the patient will be referred to other public or private clinics that can accommodate their needs.

15. PROVIDE MATERNAL CARE SERVICES

OFFICE OR DIVISION	City Health Office	City Health Office			
CLASSIFICATION	Highly-Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents of Imus				
	OF REQUIREMENTS		WHERE TO SECUR	RE	
Barangay Clearance		Respective Barangay			
One (1) Government Issued or any v		Client			
Existing Home-based Mother Record		Barangay Health Center			
Attended at least three (3) sessions of Health Centers)	of Pre-natal Examination (held at Barangay	Barangay Health Cent	ers		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Provide the information being asked	1. Interview and assess the patient	None	5 minutes	Birthing home 1: Midwife on duty	
2. Undergo the physical examination	2. Record the vital signs of the patient and conduct physical examination	None	15 minutes	Birthing home 1: Midwife on duty	
3. Deliver the baby	3.1 Monitor the progress (for true labor) and deliver the baby	None	6 hours	Birthing home 1: Midwife on duty	
	3.2 Observe the patient and the baby (after delivery)	None	2 hours		
4. Pay the required fees	4. Receive the payment.	Refer to 2008 Revenue Code	5 minutes	Birthing home 1: Midwife on duty	
5. Discharge at the birthing home and receive medicines and post- discharge instruction	5. Discharge the patient with take home medicines and post-discharge instructions	None	1 day	Birthing home 1: Midwife on duty	
	Fill-out Client Satisfac	tion Rating Form			
	TOTAL	None	2 days		

NOTE: For emergency, the Birthing Home will cater to the needs of the patient regardless of its residency

CITIZEN'S CHARTER



16. PROVIDE NEWBORN SCREENING

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All newborn delivered after 24 hours			
	T OF REQUIREMENTS		WHERE TO SECURI	E
Barangay Clearance of mother/gua		Respective Barangay		
One (1) Government Issued or any		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the information being asked	1.1 Interview and assess the patient	None	2 minutes	Birthing Home 1: Midwife on duty
	1.2 Record the vital signs of the patient and conduct physical examination	None	2 minutes	
		None	2 minutes	
	1.3 Fill out newborn screening filter card			
2. Undergo newborn screening test.	2. A small blood sample is taken on baby's heel and placed on newborn screening filter card.	None	5 minutes	Birthing Home 1: Midwife on duty
3. Pay the required fees	3. Receive the payment.	Philhealth Dependent who is born in Imus Birthing home 1 - None	2 minutes	Birthing Home 1: Midwife on duty
	Fill out Olient Setisfee	Born in other birthing home facility- Php 1,800.00		
	Fill-out Client Satisfac	Php 1,800.00	13 minutes	
	IUIAL		13 111111111111111111111111111111111111	





17. PROVIDE NUTRITIONAL SERVICES

OFFICE OR DIVISION	City Health Office					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents of Imus with age 0-59 months					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
None		N/A				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Provide the information being asked	1. Fill up the OPT Form	None	5 minutes	Barangay Nutrition Scholar (BNS)		
2. Undergo the weighing and height/length measurement	2.1 Record the actual weight and height/length measurement and submit to the City Nutrition Program Council	None	5 minutes	Barangay Nutrition Scholar (BNS)		
	2.2 Assess the nutritional status	None	15 minutes	Cristina Balana; Andrilita Santiago City Nutrition Program Council		
3. Receive nutritional supplies (Micro-nutrients and GP Program) and instructions	3. Provide nutritional supplies (Micro- nutrients and GP Program) and instructions (for malnourished children)	None	5 minutes	Cristina Balana; Andrilita Santiago City Nutrition Program Council		
	Fill-out Client Satisfact	ion Rating Form				
	TOTAL	None	30 minutes			





18. PROVIDE COVID-19 VACCINATION

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus (AGES5-85)			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Birth Certificate and valid ID (for 5-17	7 years old)	Client		
One (1) Government Issued or any v	1) Government Issued or any valid I.D. of Parent/Guardian of 5-17 years old Client			
Vaccination Card for 2 nd dose / boost	on Card for 2 nd dose / booster dose Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the data being asked	1. Check the documents of the client	None	5 minutes	BHW/BNS on duty
0	2. Provide counseling and watch videos	None	5 minutes	Nurse/Midwife on duty
signing of consent form	about COVID-19 vaccine			
3. Present the Bayanihan Form	3.1 Check Bayanihan Form	None	2 minutes	Nurse/Midwife on duty
	3.2 Administer Covid-19 Vaccine	None	3minutes	
4.Post Vaccination Instructions	Monitoring and assess for any adverse	None	15 minutes	Nurse/Midwife on duty
	reaction			
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	30 minutes	







19. ISSUANCE OF QUARANTINE MEDICAL CERTIFICATE

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE	All residents of Imus that are Clinically Recov	vered COVID patient		
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
Barangay Certificate		Barangay Hall		
Monitoring Logsheet		Barangay Hall/Contact	tracer	
Hard copy of RT-PCR or Antigen Re	Hard copy of RT-PCR or Antigen Result Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements	1. Verify the submitted documents	None	5 minutes	CESU Staff
2. Received the documents	2. Release of documents	None	1 minutes	CESU Staff
	Fill-out Client Satisfac	U U		
	TOTAL	None	6 minutes	







20. PROVIDE SWAB TESTING (RT-PCR AND ANTIGEN)

OFFICE OR DIVISION	City Health Office			
CLASSIFICATION	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
WHO MAY AVAIL THE SERVIC	All residents of Imus that are suspect for COV	/ID; patient for admissic	on or surgery or for medic	al procedure
CHECKLI	ST OF REQUIREMENTS	OF REQUIREMENTS WHERE TO SECURE		
For RT-PCR				
Manifested with COVID signs an	d symptoms	Client		
Doctor's request form		Any physician		
Active Philhealth number		Client		
For Antigen				
Valid ID		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements	1. Verify the submitted documents	None	3 minutes	CESU Staff
2. Filling-up of forms	2.Checking of filled-up forms	None	5 minutes	CESU Staff
3. Preparing for swabbing	3.Swabbing and preparing the specimen	None	5 minutes	CESU Staff
4.Waiting for result (for antigen test only)	4.Waiting for test result and releasing of official result	None	15 minutes	CESU Staff
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	28 minutes	





21. ISSUANCE OF VACCINE CERTIFICATE

OFFICE OR DIVISION	City Health Office	City Health Office				
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizen	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All residents of Imus and other client who we	re vaccinated in the City	of Imus			
CHECKLIS	F OF REQUIREMENTS		WHERE TO SECUR	RE		
Vaccination Card		Client				
Valid ID		Client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Present the requirements	1. Verify the submitted documents	None	3 minutes	Vaccination Hub Staff		
2. Received the documents	2. Release of documents	None	1 minute	Vaccination Hub Staff		
3. Present documents to CESU	3. Signing and for Dry Seal	None	1 minute	CESU Staff		
	Fill-out Client Satisfac		5 minutos			
	IUIAL	None	5 minutes			







22. ADOLESCENT HEALTH AND DEVELOPMENT PROGRAM

OFFICE OR DIVISION	City Health Office				
CLASSIFICATION	Highly-Technical				
TYPE OF TRANSACTION	G2C – Government to Citizen				
WHO MAY AVAIL THE SERVICE	All adolescents and teenage pregnant				
	F REQUIREMENTS	WHERE TO SECURE			
Referral letter from Midwife / Schools	3	City Health Office			
Any Valid ID		Client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Get queueing number	1. Give number	None	1 minutes	AFHF Coordinator (CHO 1, 2 & 3)	
2. Filling – up forms	2. Initial interview/assessment data gathering and physical diagnosis	None	5 minutes	AFHF Coordinator (CHO 1, 2 & 3)/ Dr. Gelyn G. Golamco Dr. Rhodora Coronado Dr. Cherrie Lyn S. Tumilba-Boque	
3. Adolescent undergoes assessment and counselling	3. Do HEEEADSSS (home, education, employment, eating, activity, drugs, sexuality, safety, suicide)	None	15 minutes	AFHF Coordinator (CHO 1, 2 & 3)	
4. Provision of Medical Assessment and management	4. Patient interview, physical exam, request laboratory if needed and managed the case seen	None	20 minutes	Dr. Gelyn G. Golamco Dr. Rhodora Coronado Dr. Cherrie Lyn S. Tumilba-Boque	
5. Secure family planning counselling and service	5. Counselling on safe motherhood and responsible parenthood	None	10 minutes	BHS Midwives / AFHF Coordinator (CHO 1, 2 & 3)	
6. Secure referral form for further evaluation and management to teenaged pregnant	6. Refer client to teen parent clinic or accredited level 3 hospital	None	2 minutes	AFHF Coordinator (CHO 1, 2 & 3)	
7. Get the details of next schedule	7. Give the date of next follow-up visit	None	1 minute	AFHF Coordinator (CHO 1, 2 & 3)	
		sfaction Rating Form		1	
	TOTAL	None	54 inutes		





23. CONDUCT ALCOHOL, SMOKING AND SUBSTANCE INVOLVEMENT SCREENING TEST (ASSIST)

OFFICE OR DIVISION		City Health Office			
CLASSIFICATION		Highly-Technical			
TYPE OF TRANSACTION		G2C – Government to Citizen			
WHO MAY AVAIL THE SERVICE		Persons who use drugs (PWUDs)			
CHECKLIST O	F REQU	IREMENTS		WHERE TO SECU	IRE
Endorsement Letter			Respective Baran	gay	
Drug Test Result			Client		
CLIENT STEPS		AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the requirements being asked	1. Che	eck the documents of the client	None	2 minutes	Trained Screeners: Aprilyn Villas,RN Wilson Uy, RN
2. Undergo Screening		nduct_screening using SRQ and ST) Tool	None	15 minutes	Trained Screeners: Aprilyn Villas,RN Wilson Uy, RN
3. Received the documents	3. Issu treatm	uance of the result and referral to nent	None	3 minutes	Trained Screeners: Aprilyn Villas,RN Wilson Uy, RN
		Fill-out Client Satisfaction Ra	ating Form		
		тоти	AL None	20 minutes	





24. CONDUCT DRUG DEPENDENCY EXAMINATION (DDE)

OFFICE OR DIVISION	City Health Office			
	Highly-Technical			
TYPE OF TRANSACTION	G2C – Government to Citizen			
	Persons who use drugs (PWUDs)			
	OF REQUIREMENTS		WHERE TO SECU	RE
ASSIST Tool Result (Severe)		Trained Screeners		
If from Court Order: Recommendation	on Letter from RTC	Regional Trial Cour	t	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide the requirements being aske	d 1. Check the documents of the client	None	2 minutes	Accredited Physician: Maria Rossini M. De Ausen, M.D.
2. Undergo signing of consent form	2. Provide Consent Form	None	5 minutes	Accredited Physician: Maria Rossini M. De Ausen, M.D.
3. Undergo Drug Dependency Examina	tion 3. Conduct Drug Dependency Examination	None	1 hour	Accredited Physician: Maria Rossini M. De Ausen, M.D.
4. Received the documents	4. Issuance of Drug Dependency Examination Result	None	5 minutes	Accredited Physician: Maria Rossini M. De Ausen, M.D.
	Fill-out Client Satisfactio	n Rating Form		
	TOTAL	None	1 hour and 12 minutes	





CITY OF IMUS DIAGNOSTIC LABORATORY EXTERNAL SERVICES







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1. COVID-19 TESTING BY RT-PCR METHOD FOR OUTPATIENTS

COVID-19 RT-PCR is a reverse transcription polymerase chain reaction (RT-PCR) for the detection of RNA from SARS-CoV-2 in respiratory samples (oropharyngeal and/or nasopharyngeal) collected from individuals with symptoms or other reasons to suspect COVID-19.

(oropharyngear ana/or naeopharynge	al) collected from individuals with symptoms of			
OFFICE OR DIVISION	City of Imus Diagnostic Laboratory			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Gover	nment to Business, G2G	G – Government to Gover	rnment
WHO MAY AVAIL THE SERVICE	ALL			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE
A. For Examination				
1. Sample linelist		Requesting Physician		
2. Laboratory request form		Requesting Physician		
3. Case Investigation Form (Requesting Physician		
	r patient eligible to avail Philhealth benefits:	Requesting Physician	or Referring facility	
Annex E and Philhealth ID				
B. Release of Results				
1. Official Receipt (if any)		Cashier		
	lid ID from the patient and Valid ID of	and Valid ID of Patient or authorized representative		
authorized representative				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish the required documents and present other	1.1 Receive the required documents and inspect based on the completeness of data.	None	30 minutes	Medical technologists Administrative Officer/
relevant documents (ex, doctor's				Administrative Assistant
request) with complete patient's		None		
data to the reception area of City of	Philhealth COVID-19 benefits.			
Imus Diagnostic Laboratory.				
2. Present the forms to the cashier		None for eligible	10 minutes	Administrative Officer/
booth for checking of Philhealth		Philhealth members		Administrative Assistant
documents.	swabbing area.			Cashier
		PHP 2,000 if not a		
2. If not eligible for Philhealth, pay		eligible for	5 minutes	
the amount indicated.	official receipt.	Philhealth and for non Philhealth		
		members		
		members		
		PHP 800 if group of		
		five and wanted to		

CITIZEN'S CHARTER

		avail pooled testing		
3. Proceed to the swab booth for the collection of samples.	3.1 Receive all the documents, verify and instruct the patient on the process of sample collection.	None	10 minutes	Medical Technologist Pathologist Laboratory Clerk Laboratory Alde
	3.2 Perform a swab collection and label all the samples with patient's information, date and time of specimen collection and other relevant details.	None	15 minutes	
	3.3 Instruct the patient on the process of releasing results.	None	5 minutes	
	3.4 Bring samples to the reception area of City of Imus Diagnostic Laboratory for testing (this is done after all the patients on queue are done with the procedure).	None	30 minutes	
	3.5 Receive the samples and endorse it to the processing area for COVID-19 testing by RT-PCR method.	None	30 minutes	
	3.6 Perform COVID-19 testing by RT-PCR.	None	12 hours	
	3.7 Verify the test result.	None	4 hours	
	3.8 Encode the official result and submit a report to the Department of Health.	None	2 hours	
4. Claim the result at the reception area of City of Imus Diagnostic Laboratory	4. Print the official result, ask for proof of	None	10 minutes	Medical Technologist
Or	Or			

CITIZEN'S CHARTER



4. Inquire and claim the result via	4. Reply to patient's inquiry and ask for proof	None	10 minutes	
electronic mail	of payment (if any), proof of			
	identification/authorization letter and release			
	the e-copy of the result to the patient.			
Fill-out Client Satisfaction Rating Form				
	TOTAL	Based on	24 hours	
		assessment		







2. COVID-19 TESTING BY RT-PCR METHOD FOR OTHER REFERRING FACILITIES

COVID-19 RT-PCR is a reverse transcription polymerase chain reaction (RT-PCR) for the detection of RNA from SARS-CoV-2 in respiratory samples (oropharyngeal and/or nasopharyngeal) submitted and collected by the referring facilities from individuals with symptoms or other reasons to suspect COVID-19. **OFFICE OR DIVISION** City of Imus Diagnostic Laboratory **CLASSIFICATION** Simple **TYPE OF TRANSACTION** G2C - Government to Citizens, G2B - Government to Business, G2G - Government to Government WHO MAY AVAIL THE SERVICE ALL CHECKLIST OF REQUIREMENTS WHERE TO SECURE A. For Examination 1. Sample linelist Requesting Physician or Referring facility 2. Laboratory request form Requesting Physician or Referring facility 3. Case Investigation Form (CIF) Requesting Physician or Referring facility 4. Additional requirements for patient eligible to avail Philhealth benefits: Requesting Physician or Referring facility Annex E and Philhealth ID B. Release of Results 1. Official Receipt (if any) Cashier 2. Authorization letter and valid ID from the patient and Valid ID of Patient or authorized representative authorized representative **CLIENT STEPS** AGENCY ACTION FEES TO BE PAID **PROCESSING TIME** PERSON RESPONSIBLE 1. Present and submit the required 1.1 Receive the required documents and None 1 hour Medical technologists documents with complete patient's inspect based on the completeness of data. Administrative Officer/ data to the reception area of City of Administrative Assistant Imus Diagnostic Laboratory. 1.2 Assess if the patient is eligible to avail the Philhealth COVID-19 benefits. 2. Present the forms to the cashier 2.1 Verify patients and request information None for eligible 10 minutes Medical technologists booth for checking of Philhealth and instruct the courier to proceed to the Administrative Officer/ Philhealth members reception area. documents. Administrative Assistant PHP 2,000 if not a 2. If not eligible for Philhealth, pay 2.2 Receive the payment and issue an eligible for 5 minutes the amount indicated. official receipt Philhealth and for non Philhealth members PHP 800 if group of five and wanted to avail pooled testing TOT

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3. Get the Document	3.1 Receive the samples and endorse it to the processing area for COVID-19 testing by RT-PCR method.	None	30 minutes	Medical Technologist Pathologist Laboratory Clerk Laboratory Aide
	3.2 Perform COVID-19 testing by RT-PCR.	None	12 hours	
	3.3 Verify the test result.	None	4 hours	
	3.4 Encode the official result and submit a report to the Department of Health.	None	2 hours	
	3.5 Send the official result to the email address of the referring facility.	None	30 minutes	
4. Claim the result at the reception area of City of Imus Diagnostic Laboratory	· · · ·	None	10 minutes	Medical Technologist Laboratory Clerk
Or	Or			
4. Inquire and claim the result via electronic mail	of payment (if any), proof of identification/authorization letter and release the e-copy of the result to the patient.	None		
	Fill-out Client Satisfact			
	TOTAL	Based on assessment	24 hours	



3. ROUTINE CLINICAL LABORATORY TESTING FOR OUTPATIENTS

Clinical laboratory services are diagnostic tests performed on various patient samples to aid in the diagnosis, monitoring, and treatment of diseases and medical conditions. The laboratory services encompass various disciplines such as clinical chemistry, hematology, and clinical microscopy.

neulcal conditions. The laboratory se	i vices encompass vanous disciplines such as (cimical chemistry, hemat	lology, and clinical micro	scopy.
OFFICE OR DIVISION	City of Imus Diagnostic Laboratory			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Gover	mment to Business, G2G	G – Government to Gove	rnment
WHO MAY AVAIL THE SERVICE	ALL			
	OF REQUIREMENTS		WHERE TO SECUP	RE
A. Examination				
1. Prescription		Rural Health Physician facilities	from Imus City Health C	Offices/Physician from other
2. Patient Information Slip		City of Imus Diagnostic	c Laboratory Reception	
3. Laboratory Request Form		City of Imus Diagnostic	c Laboratory Reception	
4. Charge slip (if applicable)				
5. Senior Citizen's I.D. (if app	•		izens Affairs, 1F, New G	
6. Persons with Disabilities (i	f applicable)	Persons with Disability	Affairs Office, 1F, New (Government Center
B. Release of Results				
1. Official Receipt (if any)		Cashier		
 Authorization letter and va authorized representative 	lid ID from the patient and Valid ID of	Patient or authorized representative		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
 1.1 Acquire a queuing number at the reception area and wait for your number to be called. 1.2 A priority lane is designated for senior citizens, pregnant, and persons with disabilities. <i>Condition specific:</i> Cutoff for fasting samples: 	1. Call out a number from the queuing	None	10minutes	Laboratory Receptionist/Medical Technologist
10:00 A.M.				

2. Accomplish the patient information slip (for new patients).	2.2 Receive and inspect specimen condition (if applicable).			
3. Acquire a charge slip from the reception area and proceed to the cashier booth for payment (if applicable).		None	10 minutes	Laboratory Receptionist/Medical Technologist
	3.2 Instruct the patient to settle the fees in the cashier booth (if applicable).	Testing fees to be paid in the cashier booth are based on City Ordinance no. 05-2020 s. 2023		Cashier
4. Present the official receipt to the reception area.	4. Copy the official receipt number and log all the necessary information in the PhilHealth logbook.	None	5 minutes	Laboratory Receptionist/Medical Technologist
5. Proceed to the blood extraction area.	5.1 Endorse the patient along with laboratory request forms to the phlebotomist for blood extraction.	None	1 minute	Medical Technologist
	5.2 Verify patient identity and explain the blood collection process.	None	2 minutes	
	5.3 Perform the blood collection and label all the tubes with the patient's full name.	None	30 minutes	
	5.4 Advise the patient about the turnaround time in releasing results.	None	1 minutes	
	5.5 Float the samples to their respective sections for testing (done for every 10 samples).	None	10 minutes	
6. Wait for the results.	6.1 Process all the samples accordingly. Clinical Microscopy: 2 hours Hematology: 2 hours Clinical Chemistry: 3 hours	None	3 hours	Medical Technologist

CITIZEN'S CHARTER



	6.2 Verify and release the generated results in the electronic portal.	None	1 hour	
7. Claim the result at the reception area of the City of Imus Diagnostic Laboratory.Or	7.1 Ask for the official receipt and valid I.D. of the patient. For patients' representatives, ask for an authorization letter along with a photocopy of both the patient's and the representative's valid I.D.	None	10 minutes	Laboratory Receptionist/Medical Technologist
7. Inquire and claim the result via electronic mail/portal.	7.2 Print and release the official result.	None		
Condition specific: Clinical Chemistry: Every 5:00 P.M. Hematology: 3 hours after extraction Clinical Microscopy: 3 hours after extraction	7.3 Reply to patient's inquiry and ask for proof of payment (if any), proof of identification/authorization letter and release the e-copy of the result to the patient.	None		
	Fill-out Client Satisfact	ion Rating Form		
	TOTAL	Based on assessment	5 hours and 29 minutes	







4. SPECIAL LABORATORY TESTING FOR OUTPATIENTS

A special test is conducted on various patient samples to aid the physician in the diagnosis of a specific medical condition, monitor certain progression, and develop appropriate treatment plans. The laboratory services encompass various disciplines such as Immunology, Serology and Bacteriology.

OFFICE OR DIVISION	City of Imus Diagnostic Laboratory			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Gov	vernment to Business, G20	<u> G – Government to Gover</u>	rnment
WHO MAY AVAIL THE SERVICE	ALL			
CHECKLIST	OF REQUIREMENTS		WHERE TO SECURE	
A. Examination				
1. Prescription		Rural Health Physician front from the facilities	om Imus City Health Offic	ces/Physician from other
2. Patient Information Slip		City of Imus Diagnostic L	aboratory Reception	
3. Laboratory Request Form		City of Imus Diagnostic L	aboratory Reception	
4. Charge slip (if applicable)			• •	
5. Senior Citizen's I.D. (if ap	olicable)	Office of the Senior Citize	ens Affairs, 1F, New Gov	ernment Center
6. Persons with Disabilities (Persons with Disability Af	ffairs Office, 1F, New Go	vernment Center
B. Release of Results				
1. Official Receipt (if any)		Cashier		
2. Authorization letter and va	lid ID from the patient and Valid ID of	Patient or authorized representative		
authorized representative				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Acquire a queuing number at	1. Call out a number from the queuing	None	10 minutes	Laboratory
the reception area and wait for your				Receptionist/Medical
number to be called.	based on the testing prerequisites.			Technologist
				-
A priority lane is designated for				
senior citizens, pregnant, and				
persons with disabilities.				
2. Present the prescription form to		None	5 minutes	Laboratory
the reception area.	completeness of data.			Receptionist/Medical
		1		Technologist
2. Accomplish the patient	2.1 Receive and inspect specimen			-
information slip (for new patients).	condition (if applicable).			
information slip (for new patients).			30 minutes	Laboratory

CITIZEN'S CHARTER

cashier booth for payment (if applicable).				Technologist
	3.2 Instruct the patient to settle the fees in the cashier booth (if applicable).	Testing fees to be paid in the cashier booth are based on City Ordinance no. 05-2020 s. 2023		Cashier
4. Present the official receipt to the reception area.	4. Copy the official receipt number and log all the necessary information in the PhilHealth logbook.	None	2 minutes	Laboratory Receptionist/Medical Technologist
5. Proceed to the specimen collection area.	5.1 Endorse the patient along with laboratory request forms to the phlebotomist for specimen collection.	None	1 minute	Medical Technologist
	5.2 Verify patient identity and explain the specimen collection process.	None	5 minutes	
	5.3 Perform specimen collection and label all the tubes with the patient's full name.	None	30 minutes	
	5.4 Advise the patient about the running day and turnaround time in releasing results.	None	1 minute	
	5.5 Float the samples to their respective sections for testing (done for every 10 samples).	None	10 minutes	
6. Wait for the results.	6.1 Temporary storage of the samples until the actual day of testing.	None	5 days	Medical Technologist
	6.2 Process all the samples accordingly.Immunology: 4 hoursSerology: 4 hoursBacteriology: 5 days	None		Medical Technologist

CITIZEN'S CHARTER



	6.3 Verify and release the generated results in the electronic portal.	None		Medical Technologist
8. Claim the result at the reception	•	None	10 minutes	Laboratory
area of the City of Imus Diagnostic				Receptionist/Medical
Laboratory.	representatives, ask for an authorization			Technologist
Or	letter along with a photocopy of both the patient's and the representative's valid			
	I.D.			
8. Inquire and claim the result via				
electronic mmail/portal.	8.2 Print and release the official result.			
Condition specific:	8.3 Reply to the patient's inquiry and ask			
Immunology: 3 days after extraction	for proof of payment (if any), proof of			
Serology: 3 days after extraction	identification/authorization letter, and			
Bacteriology: 5 days after specimen	release the e-copy of the result to the			
collection	patient.			
	Fill-out Client Satisf	u u	– • • • • •	
	TOTAL	Based on assessment	5 days, 1 hour, 44	
			minutes	







5. DRUG TESTING (SCREENING) FOR OUTPATIENTS

Drug of abuse testing is employed under the Comprehensive Dangerous Acts of 2002 or Republic Act of 9165. It involves the detection and analysis of specific substances or their metabolites in the urine.

specific substances of their metabolite						
OFFICE OR DIVISION	City of Imus Diagnostic Laboratory					
CLASSIFICATION	Complex					
TYPE OF TRANSACTION	G2C – Government to Citizens, G2B – Government to Business, G2G – Government to Government					
WHO MAY AVAIL THE SERVICE	ALL					
	OF REQUIREMENTS		WHERE TO SECURE			
A. Examination						
1. Drug Testing Consent Forn		Drug Testing Reception A	rea			
2. Custody and Control Form						
2.1 CCF DT-002A: Do		Drug Testing Reception A				
2.2 CCF DT-002B: Co		Drug Testing Reception A				
2.3 CCF DT-002C: La		Drug Testing Reception A				
	onfirmatory Laboratory Copy	Drug Testing Reception A	rea			
B. Release of Results						
1. Official receipt (if any)		Cashier/Drug Testing Analyst				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.1 Acquire a queuing number at the reception area and wait for your number to be called.	1. Call out a number from the queuing system.	None	10 minutes	Drug Test Analyst		
A priority lane is designated for senior citizens, pregnant, and persons with disabilities.						
2. Proceed to the drug testing reception area once the number was called.	2. Verify client information for any pending result. If with a pending result, testing cannot be conducted.	None	15 minutes	Drug Test Analyst		
3. Pay the drug testing fee at the cashier's booth.	3. Charge the client/donor for a drug testing fee	P 200.00	10 minutes	Cashier		
4. Present the official result to the drug testing reception area.	4. Copy the official receipt number and log all the pertinent information in the logbook.	None	2 minutes	Drug Test Analyst		
5. Accomplish the drug testing consent form and four (4) custody and control forms.	5. Receive and inspect the forms for the completeness of data.	None	30 minutes	Authorized Specimen Collector		

CITIZEN'S CHARTER

6. Proceed to the Biometrics Area.	6. Register the client in the Biometrics	None	1 hour	Drug Test Analyst
7.1 Proceed to the waterless specimen collection area.	7.1 Instruct the client to remove all unnecessary outer garments and empty his/her pockets.	None	30 minutes	Authorized Specimen Collector
7.2 Provide sufficient urine sample				
	7.2 Observe the entire collection			
7.3 Submit the sample to the authorized specimen collector	procedure			
·	7.3 Receive, inspect, and label the specimen container with the client's details.			
	7.4 Advise the patient about the running day and turnaround time in releasing results.			
8. Wait for results.	8. Process the received samples accordingly.	None	2 hours	Drug Test Analyst
9. Present the Official Receipt and claim the result at the reception area of the City of Imus Diagnostic	of the patient.	None	10 minutes	Drug Test Analyst
Laboratory (Drug Testing)	9.1 Release the official result.			
	Fill-out Client Satisf			
	TOTAL	P 200.00	4 hours, 52 minutes	







OSPITAL NG IMUS EXTERNAL SERVICES







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1. PAGPROSESO NG ADMISYON NG PASYENTE

Ang Admitting Department ay ang nagproproseso ng admisyon ng pasyente mula sa Emergency Department, maging ang Direct Admission hanggang sa Nursing Ward. Ito ay inaasahang makapaghatid ng kalidad na serbisyo mula sa admisyon ng pasyente hanggang ito ay makalabas ng Ospital ng Imus. Maipaalam at maipaintindi ng maayos sa mga pasyente at kamag-anak nito ang kanilang mga karapatan at responsibilidad habang sila ay nasa ospital.

OPISINA o DIBISYON	. ,	Ospital ng Imus - Admitting D	· · ·	0 7	•
KLASIPIKASYON Simple					
URI NG TRANSAKSYON G2C – Government to Citizens; G2G – Government to Government					
SINO ANG NANGANGAILANGA		Lahat			
	KAILANGANG DO	KUMENTO		SAAN MAKUKU	JHA
Patient Data Sheet			Admitting Department		
Patient Informed Consent			Admitting Department		
Patient's Companion Consent Fo	orm		Admitting Department		
COVID Ward Waiver Form			Admitting Department		
Admission Slip			Emergency Departmer		
Government Issued ID o Valid ID	1		Pangasiwaan/ Ahensya		bibigay ng Valid ID
Resulta ng Rapid Antigen Test			Laboratory Departmen		
HAKBANG NG KLIYENTE	AKSYC	ON NG AHENSYA	HALAGA NG	TAGAL NG	TAONG NAKATALAGA
			BABAYARAN	AKTIBIDAD	
1. Pumunta sa Admitting		pasyente o kamag-anak nito	Wala	2 minuto	Henry S. Barbon
Department para asikasuhin		kanilang maaaring paglagyan			Minnie Grace R. Villena
ang admisyon ng pasyente dala	at ang rate nito.	t ang rate nito.			Danica C. Medina
ang Admission Slip nang may kumpletong detalve na	1.2 Itawag sa \	Nard Nurse on duty upang	Wala	1 minuto	Ruth Joie S. Samson Marina Medel R. Cuevas
kumpletong detalye na manggagaling sa Emergency	•	ia-admit na pasyente at	VVdla		Admitting Department
Department.	. ,	tamang kwarto ng pasyente.			Admining Department
Department.		0 01 9			
		ng Nurse sa Emergency	Wala	1 minuto	
		g ipaalam ang kwartong pag-	vvala	1 mindto	
	aadmitan ng pasye	ente.			
	1 4 Alamin and mo	a pangunahing impormasyon			
		encode sa system o Bizbox	Wala	15 minuto	
para sa Patient Data Sheet (PDS					
	1.5 Kuhanan ng litrato ang magbabantay para				
	•	ID kasabay ng pagkuha ng			
	Valid ID ng comp	anion para sa pag-iingat na	Wala	1 minuto	

CITIZEN'S CHARTER

2. Magbigay ng isang (1) Government Issued o valid ID.	 maibalik ang Companion's ID sa Admitting Department sa oras ng pag-discharge ng pasyente o pagpapalit ng magbabantay. 2. Tiyakin ang mga kailangang impormasyon base sa ID na ibinigay. 	Wala	1 minuto	Henry S. Barbon Minnie Grace R. Villena Danica C. Medina Ruth Joie S. Samson Marina Medel R. Cuevas Admitting Department
3. Punan ang mga detalyeng hinihingi sa Admitting Form. Basahin, intindihin at pirmahan ang Patient Informed Consent, Patient's Companion Consent Form at COVID Ward Waiver Form para sa admisyon ng pasyente (maaaring ang magbabantay o alinmang kamag-anak na nasa tamang edad ang pumirma kung hindi kaya ng mismong pasyente.	3. Ipaliwanag ng maayos at malinaw ang mga Consent Forms ng pasyente at ng magbabantay para sa admisyon nito.	Wala	15 minuto	Henry S. Barbon Minnie Grace R. Villena Danica C. Medina Ruth Joie S. Samson Marina Medel R. Cuevas Admitting Department
4. Ipagbigay alam sa Admitting Personnel kung may Philhealth o wala ang pasyente.	4. Tanungin kung may Philhealth o wala ang pasyente. Papuntahin ang pasyente o kamag- anak sa Benefits Section para maberipika at malaman ang proseso ng Philhealth at ang mga dapat gawin.	Wala	1 minuto	Henry S. Barbon Minnie Grace R. Villena Danica C. Medina Ruth Joie S. Samson Marina Medel R. Cuevas Admitting Department
5. Bumalik sa Admitting Department at tanggapin ang Patient Data Sheet, Admission Kit at Patient ID Band at ang mga napirmahang Patient Informed Consent, Patient's Companion Consent Form at COVID Ward Waiver. Ito ay	kamag-anak ng pasyente at magbilinna bumalik sa Emergency Department.	Wala	1 minuto	Henry S. Barbon Minnie Grace R. Villena Danica C. Medina Ruth Joie S. Samson Marina Medel R. Cuevas Admitting Department



ibibigay sa Nurse on duty sa						
Emergency Department.						
Sagutan ang Client Satisfaction Rating Form						
	KABUUAN	Wala	38 minuto			

2. BEREPIKASYON NG ESTADO O KALAGAYAN NG PHILHEALTH MEMBERSHIP

Pag-alam sa estado o kalagayan ng Philhealth Membership sa pamamagitan ng Philhealth Portal upang malaman kung maaaring mabigyan ng benepisyo ang pasyente ng nasabing ahensya.

ang pacyerne ng nacabing anoncy					
OPISINA o DIBISYON		Ospital ng Imus – Benefits S	Section		
KLASIPIKASYON Simple					
URI NG TRANSAKSYON		G2C – Government to Citize	en		
SINO ANG NANGANGAILANGA	N NG SERBISYO	Mga kasapi o miyembro ng	PhilHealth o kumakataw	an sa kanila	
TSEKLIST NG	KAILANGANG DOK	UMENTO		SAAN MAKUKU	IHA
Philhealth ID			PhilHealth - Local Hea	Ith Insurance Office	
Member's Data Record (MDR) ng	y miyembro		PhilHealth - Local Hea	Ith Insurance Office	
Government Issued ID ng miyem			Pangasiwaan/ Ahensya	a ng Gobyerno na nag	bibigay ng Valid ID
HAKBANG NG KLIYENTE	AKSYO	NG AHENSYA	HALAGA NG	TAGAL NG	TÁONG NAKATALAGA
			BABAYARAN	AKTIBIDAD	
1. Ipasa ang PhilHealth ID,	1.1 Tanggapin a	ng pagkakakilanlan upang	Wala	1 minuto	Clerk I
Member's Data Record (MDR) o	beripikahin sa PhilH	ealth Portal.			Administrative Assistant II
Government Issued ID (alin man					Administrative Officer I
sa tatlo) ng miyembro.					Benefit Section
	0	Philheath Portal at hanapin	Wala	7 minuto	
	ang pangalan o	Philhealth number ng			
	miyembro.				
2. Tanggapin ang resulta ng	2. Iprint ang re	sulta ng berepikasyon at	Wala	5 minuto	Clerk I
berepikasyon at makinig sa	ipaliwanag sa kliy	ente ang nilalaman nito.			Administrative Assistant II
paliwanag ng Philhealth	Kapag ang resulta	ay nagsasaad na hindi			Administrative Officer I
Personnel.	maaaring gamitin a	ng benepisyo, ipaalam ang			Benefit Section
	mga kailangang gav	vin ayon sa Philhealth.			
		Sagutan ang Client Satis	faction Rating Form		
		KABUUAN	Wala	13 minuto	





3. PAGPROSESO NG PHILHEALTH INSURANCE BENEFIT

Pagproseso ng mga dokumento at kailangang impormasyon ng pasyente upang magamit ang inilaan na benepisyo ng Philhealth base sa pagsusuri na isinagawa ng doktor.

OPISINA o DIBISYON Ospital ng Imus – Benefits S			Section		
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citize	ens		
SINO ANG NANGANGAILANGAN NG	SERBISYO	Mga kasapi o miyembro ng	PhilHealth o kumakataw	/an sa kanila	
TSEKLIST NG KAILA	NGANG DOK	UMENTO		SAAN MAKUKU	JHA
Claim Signature Form (CSF)			Ospital ng Imus - Bene	fits Section	
Claim Form 2 (CF2)			Ospital ng Imus - Bene	fits Section	
Philhealth Benefit Eligibility			Ospital ng Imus - Bene	fits Section	
Certification of Non-Admission to Other H	lospitals and	Waiver of Liability	Ospital ng Imus - Bene	fits Section	
HAKBANG NG KLIYENTE	AKSYON NG AHENSYA		HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Magtungo sa Benefits Section Window upang punan ang mga kinakailangang dokumento (CSF, CF1, CF2, PBEF at Certification of Non- Admission to Other Hospitals and Waiver of Liability.	mula sa Phili ibigay sa kin	rint ng CSF, CF2 at PBEF nealth Information System at atawan ng pasyente upang ang mga kailangang n.	Wala	7 minuto	Clerk I Administrative Assistant II Administrative Officer I Benefit Section
		• • • •	Wala	5 minuto	Clerk I Administrative Assistant II Administrative Officer Benefit Section
		Sagutan ang Client Satis	faction Rating Form		
		KABUUAN	Wala	12 minuto	





4. PAGTATANONG TUNGKOL SA BILL NG PASYENTE

Ito ay upang malaman kung magkano na ang humigit o kumulang na babayaran ng pasyente.

OPISINA o DIBISYON		Ospital ng Imus - Billing Section			
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to C	Citizen		
SINO ANG NANGANGAILANG	AN NG SERBISYO	Pasyente			
TSEKLIST NG F	AILANGANG DOKU	MENTO		SAAN MAKUKUHA	
Patient Information Slip			Outpatient Department; Emerg	ency Department; Ac	dmitting Department
Government Issued ID o Valid II	2		Pangasiwaan/ Ahensya ng Gol	oyerno na nagbibigay	y ng Valid ID
HAKBANG NG KLIYENTE	AKSYON N	IG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Pumunta sa Billing Section ng Ospital upang magtanong tungkol sa kanilang babayarin. Ipakita ang Patient Information Slip o anumang Government Issued o Valid ID ng pasyente.	ng pasyente. Kung wala ito, maaaring pasulatin ang pasyente/kamag-anak ng buong pangalan ng pasyente sa log sheet.		Wala Wala	2 minuto 3 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
2. Kuhanin at dalhin ang SOA at suriin ang mga babayaran.			Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
		Sagutan ang Client S	Satisfaction Rating Form		
		KABUUAN	Wala	6 minuto	







5. PAGPROSESO NG BILL NG PASYENTE (PASYENTE SA EMERGENCY DEPARTMENT)

Ito ay upang makuha ang pinal na babayarin ng pasyente sa Emergency Department at mabayaran sa Cashier.

no ay upang makuna ang p	nnai na babayann ng	pasyenie sa Emerge	ncy Department at mabayaran s		
OPISINA o DIBISYON Ospital ng Imus - Billi			ling Section		
KLASIPIKASYON Simple					
URI NG TRANSAKSYON G2C – Government to			to Citizen		
SINO ANG NANGANGAILANGA	N NG SERBISYO	Ospital ng Imus – Pa	asyente		
TSEKLIST NG KA	ILANGANG DOKUM	ENTO		SAAN MAKUKUHA	
Patient Information Slip			Out Patient Department; Eme	rgency Department; A	dmitting Department
Government Issued ID o Valid ID			Pangasiwaan/ Ahensya ng Go	byerno na nagbibigay	ng Valid ID
Senior Citizen ID			Local Government Unit - Office	e of the Senior Citizen	's Affair
Person with Disability (PWD) ID			Local Government Unit - Perso	ons with Disability Affa	airs Offce
HAKBANG NG KLIYENTE	AKSYON N	G AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
 Naabisuhan ang pasyente na maaari na siyang umuwi. 	 te 1.1 Tawagan sa telepono at abisuhan ang Billing Staff na ang pasyente ay handa nang pauwiin at nai-tag nang May Go Home (MGH) sa Hospital Information System (HIS). 1.2 Suriin ang profile ng pasyente. Ang mga angkop na diskwento ay ibibigay sa mga Senior Citizen o PWD na pasyente. 		Wala	1 minuto	Nurse I Emergency Department
			Wala	2 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Department
	1.3 Iprint ang St (SOA) at Itemized B	atement of Account ill.	Wala	1 minuto	5 - 1
	1.4 Tawagan ang Emergency Department Staff at ipasabi sa pasyente/kamag-anak na maaari na nilang kunin ang SOA sa Billing Section.		Wala	1 minuto	
2. Pumunta sa Billing Section at ipakita ang Patient Information Slip o Government Issued ID o Valid ID, at ang Senior Citizen ID o PWD ID, anuman ang naaangkop.		Senior Citizen o PWD di pa ito nakalagay sa i System (HIS).	Wala	2 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Department

CITIZEN'S CHARTER

3. Kunin ang SOA.	3. Ibigay ang printed SOA sa pasyente/kamag-anak ng pasyente, papirmahin at papuntahin sa Cashier upang magbayad. Kung walang babayaran sa bill, magbigay ng Patient's Clearance Form at pabalikin sa Emergency Department.		1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Department
	KABUUAN	Wala	8 minuto	







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6. PAGPROSESO NG BILL NG NAKAADMIT NA PASYENTE

Ito ay upang makuha ang pinal na bill ng nakaadmit na pasyente at mabayaran sa Cashier.

	ninai na bili ng nakaadi	nit na pasyente at mabayara				
OPISINA o DIBISYON Ospital ng		Ospital ng Imus - Billing Se	spital ng Imus - Billing Section			
KLASIPIKASYON Sin		Simple	Simple			
URI NG TRANSAKSYON		G2C – Government to Citiz	zen			
SINO ANG NANGANGAILANGA	N NG SERBISYO	Pasyente				
TSEKLIST NG	KAILANGANG DOKL	JMENTO		SAAN MAKUKU	JHA	
Professional Fee Form			Ospital ng Imus – Nurs	ing Ward		
Patient Discharge Slip			Ospital ng Imus – Nurs			
Person with Disability (PWD) ID			Local Government Unit	t - Office of the Senior	Citizen's Affair	
Senior Citizen ID			Local Government Unit	t		
HAKBANG NG KLIYENTE	AKSYON	NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Naabisuhan ang pasyente na maaari na siyang umuwi.	a 1.1 Tawagan sa telepono at abisuhan ang Billing Staff na ang pasyente ay handa nang pauwiin at nai-tag nang May Go Home (MGH) sa Hospital Information System (HIS).		Wala	1 minuto	Nurse I Nursing Ward	
	kung tama ang bilan	file ng pasyente at bilangin g ng araw ng kwarto. Ang wento ay ibibigay sa mga) na pasyente.	Wala	3 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	
2. Pumunta sa Billing Section upang isumite ang mga kailangang dokumento.	n 2.1 Tanggapin ang Professional Fee Form,		Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	
	doktor ay magkatulad		Wala	2 minuto		
3. Pumunta sa Benefits Section upang magpasa ng mga kailangang dokumento.	5 51 5		Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	
	3.2 Ibawas ang mg Philhealth.	a angkop na diskwento ng	Wala	2 minuto		

CITIZEN'S CHARTER

	4. Isaayos at kumpletuhin ang bill ng pasyente, iprint ang SOA at papuntahin ang pasyente sa Medical Social Service Department.	Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
upang malaman ang diskwento	5.1 Ibigay ang mga karagdagang diskwento base sa pagsang-ayon ng Medical Social Service Personnel at iprint ang final SOA at itemized bill.	Wala	3 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
	5.2 Ipaliwanag ang lahat ng babayaran. Papirmahin ang pasyente/kamag-anak ng pasyente sa SOA para sa Benefits Section, Cashier at Billing Section.	Wala	4 minuto	
	5.3 Papuntahin ang pasyente/kamag-anak ng pasyente sa Cashier upang magbayad. Kung walang babayaran sa bill, magbigay ng Patient's Clearance Form at pabalikin sa Nursing Ward.	Wala	1 minuto	
	Sagutan ang Client Satisfa	•	-	
	KABUUAN	Wala	19 minuto	







7. PAGPROSESO NG BILL SA OUTPATIENT DEPARTMENT NG OPERATING ROOM (OR)/ DELIVERY ROOM (DR)/ HEMODIALYSIS Ito ay upang makuha ang pinal na bill sa Outpatient Department ng Operating Room/ Delivery Room o Hemodialysis Section na pasyente at mabayaran sa

Ito ay upang makuha ang pinal na bill sa Outpatient Department ng Operating Room/ Delivery Room o Hemodialysis Section na pasyente at mabayaran sa Cashier.

OPISINA o DIBISYON		Ospital ng Imus - E	Billing Section			
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON		G2C – Governmer	nt to Citizen			
SINO ANG NANGANGAILAN	GAN NG SERBISYO	Pasyente				
TSEKLIST NG KAILANGANG DOKUMENTO			S	SAAN MAKUKUHA		
Professional Fee Form			Ospital ng Imus - Operating Room – Hemodialysis	n; Ospital ng Imus - D	Pelivery Room; Ospital ng Imus	
Person with Disability (PWD) I	D		Local Government Unit - Persons	with Disability Affairs	Office	
Senior Citizen ID			Local Government Unit - Office of	the Senior Citizen's	Affair	
HAKBANG NG KLIYENTE	AKSYON NG A	AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Naabisuhan ang pasyente na maaari na siyang umuwi.			Wala	1 minuto	Nurse I OR/DR/Hemodialysis	
			Wala	3 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	
2. Pumunta sa Billing Section upang isumite ang mga kailangang dokumento.	2.1 Tanggapin ang Form at ang Senior C (kung naaangkop).		Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	
	2.2 Berepikahin kung Professional Fee Fo Hospital Information pangalan ng mga dokto	rm at ang nasa System (HIS) na	Wala	2 minuto		
 Pumunta sa Benefits Section upang magpasa ng mga kailangang dokumento. 	Philhealth, papuntah	syente ay may in sa Benefits mite ang mga	Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section	

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	3.2 Ibawas ang mga angkop na diskwento ng Philhealth. Iprint ang final Statement of Account (SOA) at itemized bill.	Wala	2 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
4. Bumalik sa Billing Section upang kunin ang pinal na bill.		Wala	4 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
	4.2 Papuntahin ang pasyente/kamag- anak ng pasyente sa Cashier upang magbayad. Kung walang babayaran sa bill, magbigay ng Patient's Clearance Form at pabalikin sa OR/ DR o Hemodialysis.	Wala	1 minuto	Records Officer I Clerk IV Accounting Clerk II Billing Section
	Sagutan ang Cli	ent Satisfaction Rating Form		
	KABUUAN	Wala	15 minuto	







8. PAGTANGGAP NG BAYAD SA OUTPATIENT NA MGA TRANSAKSYON (PASYENTE SA OUTPATIENT DEPARTMENT)

Ito ay pagtanggap ng bayad para sa gamot, eksaminasyon sa laboratoryo, dayagnostikong proseso, at iba pa sa Outpatient na mga transaksyon.

ito ay pagtanggap ng bayad p	bara sa gamot, eks	aminasyon sa laboratoryo,	dayagnostikong proseso, at it	ba pa sa Oulpallent na	nga transaksyon.
OPISINA o DIBISYON Ospital ng Imus - Cash Op		perations Department			
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citi	izens		
SINO ANG NANGANGAILANGAN			ng Pasyente sa Outpatient De	•	
TSEKLIST NG KA	ILANGANG DOK	JMENTO		SAAN MAKUKUHA	
Alinman sa mga sumusunod:					
Order of Payment Slip			Outpatient Department		
Pharmacy Charge Slip			Pharmacy Department		
Laboratory Charge Slip			Laboratory Department		
Dental Charge Slip			Radiology Department		
X-ray Charge Slip			Radiology Department		
Ultrasound Charge Slip			Radiology Department		
Request			Attending Physician		
Senior Citizen ID			Local Government Unit - Office of the Senior Citizen's Affair		
Persons with Disability (PWD) ID			Local Government Unit - Persons with Disability Affairs Office		
HAKBANG NG KLIYENTE	AKSYO	N NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Ipakita ang babayarin sa ospital	1.1 Tanggapin	ang mga babayarin sa	Wala	2 minuto	Cashier I
na nakasaad sa alinman sa	ospital na nak	asaad sa alinman sa			Cash Operations
sumusunod:	sumusunod:				Department
-Request	-Request				
-Order of Payment Slip	-Order of Paymer	•			
-Pharmacy Charge Slip	-Pharmacy Char				
-Laboratory Charge Slip	-Laboratory Char				
-Dental Charge Slip	-Dental Charge S				
-X-ray Charge Slip	-X-ray Charge Sl				
-Ultrasound Charge Slip	-Ultrasound Char	ge Slip			
	1.0 Tinggan of the	umporo ona nakopulat sa	Wala	2 minute	
		umpara ang nakasulat na je slip at sa presyo na	vvaia	2 minuto	
		spital Information System			
	(HIS).	spital miormation System			

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	1.3 Kwentahin ang kabuuang halaga ng babayarin.	Wala	2 minuto	
	1.4 Alamin ang rates sa bawat kategorya ng pasyente na maaaring makakuha ng diskwento.	Wala	1 minuto	
2. Para sa diskwento (kung meron), ipakita ang Senior Citizen o PWD ID.	2. Tanggapin ang mga kaugnay na dokumento para patunayan na ang pasyente ay Senior Citizen o PWD.	Wala	2 minuto	Cashier I Cash Operations Department
3. Magbayad ng kaukulang babayarin.	3. Tanggapin ang bayad, ihanda ang opisyal na resibo at tatakan ng "Paid" ang request form o charge slip.	Base sa halaga ng nakonsumo na gamit, gamot o pasilidad	3 minuto	Cashier I Cash Operations Department
4. Tanggapin ang opisyal na resibo kasama ang request form o charge slip.	4. Sabihan ang pasyente na pumunta kung saan gagawin ang eksaminasyon o kuhanin ang gamot.	Wala	1 minuto	Cashier I Cash operations Department
	KABUUAN	Base sa halaga ng nakonsumo na gamit, gamot o pasilidad	13 minuto	







9. PAGTANGGAP NG BAYAD SA EMERGENCY NA MGA TRANSAKSYON (PASYENTE SA EMERGENCY DEPARTMENT)

Ito ay pagtanggap ng bayad para sa gamot, eksaminasyon sa laboratoryo at dayagnostikong proseso na nagamit o nakonsumo ng pasyente mula sa Emergency Department.

	Ospital ng Imus - Cash Op	erations Department		
	Simple			
SERBISYO	Pasyente o Kamag-anak r	ng Pasyente sa Emergency De	epartment	
TSEKLIST NG KAILANGANG DOKUMENTO			SAAN MAKUKUHA	
		Local Government Unit – Off	ice of the Senior Citiz	en's Affair
AKSY	ON NG AHENSYA			TAONG NAKATALAGA
1.1 Tanggapin ang Final Statement of Account mula sa pasyente.		Wala	1 minuto	Cashier I Cash Operations Department
1.2 Tingnan ang klasepikasyon ng pasyente sa Statement of Account.		Wala	2 minuto	
1.3 Kwentahin ang kabuuang halaga ng babavarin.		Wala	5 minuto	
2A. Tanggapin ang bayad, ihanda ang opisyal na resibo at tatakan ng "PAID" ang request form.		Base sa halaga ng nakonsumo na gamit, gamot o pasilidad	2 minuto	Cashier I Cash Operations Department
2B. Para sa transaksyon mula 8:00am hanggang 5:00pm, pumunta sa Medical Social Services. Para sa lagpas ng 5:00pm na transaksyon, tanggapin ang Promissory Note at isyuhan ng tatlong (3) kopya ng Patient's Clearance Form at sabihan na bumalik kinabukasan para sa makausap at masuri ng Medical		Wala	5 minuto	
	AKSY 1.1 Tanggap Account mula 1.2 Tingnan pasyente sa S 1.3 Kwenta ng babayarin. 2A. Tanggap opisyal na re ang request fo 2B. Para sa hanggang 5:0 Social Servio 5:00pm na tra Promissory N (3) kopya ng at sabihan na sa makausa	Simple G2C – Government to Citi SERBISYO Pasyente o Kamag-anak r NGANG DOKUMENTO AKSYON NG AHENSYA 1.1 Tanggapin ang Final Statement of Account mula sa pasyente. 1.2 Tingnan ang klasepikasyon ng pasyente sa Statement of Account. 1.3 Kwentahin ang kabuuang halaga ng babayarin. 2A. Tanggapin ang bayad, ihanda ang opisyal na resibo at tatakan ng "PAID" ang request form. 2B. Para sa transaksyon mula 8:00am hanggang 5:00pm, pumunta sa Medical Social Services. Para sa lagpas ng 5:00pm na transaksyon, tanggapin ang Promissory Note at isyuhan ng tatlong (3) kopya ng Patient's Clearance Form at sabihan na bumalik kinabukasan para sa makausap at masuri ng Medical Social Service Department.	G2C – Government to Citizens SERBISYO Pasyente o Kamag-anak ng Pasyente sa Emergency Deventes a Emergency Deventes a Devente Devente Deventes a Emergency Deventes a Statement of Account mula sa pasyente. 1.1 Tanggapin ang Final Statement of Account mula sa pasyente. 1.2 Tingnan ang klasepikasyon ng pasyente sa Statement of Account. 1.3 Kwentahin ang kabuuang halaga ng babayarin. 2A. Tanggapin ang bayad, ihanda ang opisyal na resibo at tatakan ng "PAID" ang request form. 2B. Para sa transaksyon, tanggapin ang Promissory Note at isyuhan ng tatlong (3) kopya ng Patient's Clearance Form at sabihan na bumalik kinabukasan para sa makausap at masuri ng Medical	Simple G2C - Government to Citizens SERBISYO Pasyente o Kamag-anak ng Pasyente sa Emergency Department NGANG DOKUMENTO SAAN MAKUKUHA Billing Section; Cash Operations Department Pangasiwaan/ Ahensya ng Gobyerno na nagbibig Local Government Unit - Persons with Disability A Local Government Unit - Office of the Senior Citiz Cash Operations Department HALAGA NG AKSYON NG AHENSYA HALAGA NG AKSYON NG AHENSYA HALAGA NG AKSYON NG AHENSYA HALAGA NG 1.1 Tanggapin ang Final Statement of Account. Wala 1 minuto 1.2 Tingnan ang klasepikasyon ng pasyente sa Statement of Account. Wala 2 minuto 2A. Tanggapin ang kabuuang halaga ng pisyal na resibo at tatakan ng "PAID" ang request form. Base sa halaga ng nakonsumo na gamit, gamot o pasilidad 2 minuto 2B. Para sa transaksyon mula 8:00am hanggang 5:00pm, pumunta sa Medical Social Services. Para sa lagpas ng 5:00pm na transaksyon, tanggapin ang Promissory Note at isyuhan ng tatlong (3) kopya ng Patient's Clearance Form at sabihan na bumalik kinabukasan para sa makausap at masuri ng Medical Social Service Department. Wala 5 minuto

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kasama ang kopya ng Final Statement	-	Wala	1 minuto	Cashier I Cash Operations Department
	KABUUAN	Base sa halaga ng nakonsumo na gamit, gamot o pasilidad	16 minuto	







10. PAGTANGGAP NG BAYAD SA INPATIENT NA MGA TRANSAKSYON

Ito ay pagtanggap ng bayad para sa gamot, eksaminasyon sa laboratory at diyagnostikong proseso, at iba pa mula sa Inpatient na mga transaksyon.

no dy pagianggap ng baya	la para sa gamot, eko	aminabyon ba laboratory at a	ilyagnostikong proseso, at iba pa maia		niga transatoyon.
OPISINA o DIBISYON		Ospital ng Imus - Cash Ope	rations Department		
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citize	ens		
SINO ANG NANGANGAILANG	AN NG SERBISYO	Pasyente o Kamag-anak ng	Pasyente		
TSEKLIST NG	KAILANGANG DOK	UMENTO	SAAN M	IAKUKUHA	
Final Statement of Account			Billing Section		
Patient Discharge Slip			Nursing Ward		
Persons with Disability (PWD) ID			Local Government Unit - Persons with	ith Disability Affa	irs Office
Senior Citizen ID			Local Government Unit - Office of the	e Senior Citizen's	s Affair
HAKBANG NG KLIYENTE	AKSYO	NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG	TAONG
				AKTIBIDAD	NAKATALAGA
1. Ipakita ang Final Statement	1.1 Tanggapin ang	Final Statement of Account.	Wala	1 minuto	Cashier I
of Account.		asepikasyon ng pasyente sa			Cash Operations
	Final Statement of A		Wala	3 minuto	Department
		ng kabuuang halaga ng			
	babayarin.		Wala	5 minuto	
2. Bayaran ang kaukulang		bayad, ihanda ang opisyal	Base sa halaga ng nakonsumo na	5 minuto	Cashier I
halaga ng babayarin.		kan ng "PAID" ang final	gamit, gamot o pasilidad		Cash Operations
		nt. Magbigay ng tatlong (3)			Department
	kopya ng Patient's C				
3. Tanggapin ang opisyal na		pasyente na pumunta sa	Wala	1 minuto	Cashier I
resibo kasama ang tatlong (3)		ay ang Patient's Clearance			Cash Operations
kopya ng Patient's Clearance	Form.				Department
Form at ibigay sa Nurse sa					
Nursing Ward.					
		KABUUAN	Base sa halaga ng nakonsumo	15 minuto	

CITIZEN'S CHARTER



11. PROSESO NG PAGPAPATALA NG PASYENTE SA DIALYSIS CENTER

Ito ay proseso kung saan ang pasyente ay ipinatatala upang mabigyan ng regular na iskedyul para sa dialysis treatment.

		gular na iskedyul para sa dialysis treatment.			
OPISINA o DIBISYON	Ospital ng Imus – Dialysis Center				
KLASIPIKASYON	Simple				
URI NG TRANSAKSYON	G2C – Government to Citiz	ens			
SINO ANG NANGANGAILANGAN NG SERBISYO	Lahat				
TSEKLIST NG KAILANGANG DOKUMENTO PARA	A SA DIALYSIS CENTER	SAAN MAKUKUHA			
Pinakabagong tatlong (3) kopya ng Monitoring Sheet n	nula sa pinanggalingang	Pinanggalingang Dialysis Center			
Dialysis Center (para sa mga bagong pasyente)					
Medical Abstract					
Listahan ng iniinom na gamot ng Pasyente					
Rekord ng bakuna					
Pinakabagong resulta ng laboratoryo (hindi lalagpas ng	g isang (1) buwan) o				
depende sa rekomendasyon ng doktor					
Complete Blood Count, Blood Chemistry (Creatinine, E	BUN, Na, K, P, Albumin, at	Laboratoryo kung saan ginawa ang eksaminasyon			
iba pa)					
Pinakabagong Hepatitis Profile na ginawa sa Ospital n	g Imus	Ospital ng Imus Laboratory Department			
HbsAg					
Anti-Hbs					
Anti-HCV					
Chest X-ray- hindi lalagpas ng isang buwan o depende	e sa rekomendasyon ng				
doktor					
Pinakabagong RT-PCR (swab test) – hindi lalagpas ng	g pitong araw (7 araw)				
- Para sa mga walang sintomas na hindi kumpleto ang	bakuna o walang bakuna				
laban sa COVID-19					
- Para sa mga may sintomas					
Blood Typing					
Hemodialysis Order ng Attending Nephrologist		Attending Nephrologist			
Certificate of Indigency (kung naaangkop)		Baranggay na Kinasasakupan ng Pasyente			
KAILANGAN DOKUMENTO PARA SA	PHILHEALTH	SAAN MAKUKUHA			
PDD Confirmation Letter (kung naka-enrol)		Philhealth			
PhilHealth – Member's Data Record (MDR)		Philhealth			
Pinakabagong resibo ng PhilHealth Contribution (para	sa mga nagtratrabaho at	Philhealth			
self-paying)		FIIIIIeaiui			
Certification of Utilization (number of dialysis sessions)		Pinanggalingang Dialysis Center			

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Birth Certificate		PSA (Philippine Statistics Authority) Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay ng Valid ID			
Government Issued ID o Valid ID					
HAKBANG NG KLIYENTE	AKSYON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Pagsumite ng mga kinakailangang dokumento.	1. Suriin ang mga dokumentong isinumite ng pasyente o kamag-anak ng pasyente kung ito ay kumpleto at naaayon.	Wala	10 minuto	Nurse I Nurse II Dialysis Center	
2. Ipakita sa Nephrologist ang mga dokumentong isinumite.	2.1 Ipakita sa Nephrologist ang mga dokumentong isinumite ng pasyente o ng kamag-anak ng pasyente.	Wala	30 minuto	Nurse I Nurse II Nephrologist Dialysis Center	
	2.2 Sakaling aprubahan ng Nephrologist ang mga dokumento, ang pasyente ay maaari ng bigyan ng iskedyul ng dialysis kung may bakanteng petsa at oras.	Wala	5 minuto	Nurse I Nurse II Dialysis Department	
	2.3 Kung walang bakanteng slot para sa pagpapadialysis, ilista ang pasyente sa waiting list at abisuhan na lamang kung mayroon ng bakante. Habang wala pang bakante, ang pasyente ay abisuhan na magpadialysis muna sa ibang center.	Wala	2 minuto	Nurse I Nurse II Dialysis Department	
	KABUUAN	Wala	47 minuto		







12. PAGSASAGAWA NG HEMODIALYSIS TREATMENT

Proseso kung saan ang dugo ng pasyente ay nililinis ng artipisyal na bato upang magamit ulit.

OPISINA o DIBISYON	Ospital ng Imus – Dialysis C	Center				
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON		G2C – Government to Citize	zens			
SINO ANG NANGANGAILANGA	AN NG SERBISYO	Lahat				
HAKE	BANG NG KLIYENTE			SAAN MAKUKU	HA	
Doctor's Order Sheet			Ospital ng Imus – Dialy	/sis Center		
Hemodialysis Monitoring Sheet			Ospital ng Imus – Dialy			
Laboratory Flow Sheet			Ospital ng Imus – Dialy	/sis Center		
Informed Consent for Hemodialys	sis		Ospital ng Imus – Dialy	/sis Center		
Hemodialysis Standing Order She	eet		Ospital ng Imus – Dialy	/sis Center		
Hemodialysis Medication Sheet			Ospital ng Imus – Dialy			
Problem List			Ospital ng Imus – Dialy			
Hepatitis Profile			Ospital ng Imus – Dialy	/sis Center		
Hemodialysis Clinical Abstract			Ospital ng Imus – Dialysis Center			
Hemodialysis Patient Education			Ospital ng Imus – Dialysis Center			
Consultation/ Hospitalization She	et		Ospital ng Imus – Dialysis Center			
Dietary Assessment			Ospital ng Imus – Dialysis Center			
Advance Directive			Ospital ng Imus – Dialysis Center			
X-ray Report			Ospital kung saan nagpagawa ng X-ray			
HAKBANG NG KLIYENTE	AKSYOI	N NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Lagdaan ang dokumento na nagbibigay ng pahintulot na isagawa ang dialysis procedure.	Hemodialysis sa pa kung hindi makaya Ang Nurse ay magsi pahintulot.	Informed Consent para sa asyente o kamag-anak nito ang pumirma ng pasyente. isilbing saksi sa pagpirma ng	Wala	3 minuto	Nurse I Dialysis Center	
	patakaran at pamar dialysis.	y ng mga inaprubahang naraan sa pagsasagawa ng	Wala	10 minuto	Nurse I Dialysis Center	
2. Magtimbang upang makuha ang pre-weight.		pasyente sa pagtitimbang bang bago magdialysis	Wala	1 minuto	Nurse I Dialysis Center	



3. Umupo sa dialysis bed.	3.1 Kuhaan ng vital signs ang pasyente bago ang simula ng dialysis treatment. Kung may nakitang hindi normal sa vital signs ng pasyente, ito ay agad na ipagbigay alam sa Physician on Duty o Nephrologist. Kung normal naman ang vital sign ng pasyente ay maaari nang simulan ang dialysis treatment.	Wala	3 minuto	Nurse I Physician on Duty Nephrologist Dialysis Center
	3.2 Kung ang pasyente ay naka fistula o graft, linisin at suriin ang access kung ito ay may thrill at bruit. Kung ang pasyente ay naka-catheter, ang balot ng catheter ay buksan at linisin ng mabuti. Gamit ang aseptic technique	Wala	10 minuto	Nurse I Dialysis Center
	3.3 Kung ang pasyente ay natusukan na ng karayom sa fistula/graft o nalinisan na ang catheter, maaari nang simulan ang dialysis treatment.	Wala	4 oras	
	3.4 Magcheck ng vital signs tuwing ika- tatlumpung (30) minuto ng dialysis treatment o mas madalas kung kinakailangan. Anumang pagbabagong mapapansin sa vital signs ng pasyente ay ipagbigay-alam kaagad sa Physician on Duty o Nephrologist.	Wala	4 minuto	
	3.5 Kapag natapos na ng pasyente ang apat (4) na oras na dialysis treatment, ang dugong natira sa linya ay kailangan ng ibalik lahat sa pasyente. Kapag naibalik na ang dugo, ang pasyente ay kuhanan ng panghuling vital signs. Anumang pagbabagong mapapansin sa vital signs ng pasyente ay ipagbigay-alam kaagad sa Physician on Duty o Nephrologist.	Wala	5 minuto	Nurse I Physician on Duty Nephrologist Dialysis Center

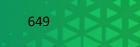
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	3.6 Ang pasyenteng nakafistula o graft ay	Wala	15 minuto	Nurse I
	kailangang tanggalan ng karayom at ampatan			Dialysis Center
	ng sampung (10) minuto o higit pa depende sa			
	pagdurugo ng pinagtusukan.			
		Wala	5 minuto	
	3.7 Linisin ang catheter ng mabuti, gamit ang			
	aseptic technique lagyan ng cover ang port at			
	balutin ng maayos upang hindi mabasa o			
	maimpeksyon.			
4. Kung mayroong dalang		Wala	1 minuto	Nurse I
iniksyon (Erythropoietin) ang	hemoglobin kung ito ay may order ng doktor.			Dialysis Center
pasyente na pampataas ng				
hemoglobin, ibigay ito sa Nurse.	4.2 Tanggalin ang mga linya sa dialysis machine			
	at idisinfect ang mga makina pagkatapos ng	Wala	3 minuto	Nurse I
	dialysis treatment ng pasyente.			Dialysis Technician
				Dialysis Center
	KABUUAN	Wala	5 oras	







13. PAGDISCHARGE NG PASYENTE SA DIALYSIS CENTER

Ito ay proseso kung saan inihahanda ang pasyente sa kanyang pag-uwi pagkatapos ng dialysis treatment.

no ay proseso kung saan ininanar	iua any pasye	nie sa kanyang pag-uwi pag	kalapus ny ulaiysis treati	nent.	
OPISINA o DIBISYON Ospital ng Imus – Dialysis (Center		
KLASIPIKASYON	Simple				
URI NG TRANSAKSYON		G2C – Government to Citiz	ens		
SINO ANG NANGANGAILANGAN NG	SERBISYO	Lahat			
HAKBANG I	NG KLIYENTE			SAAN MAKUKU	HA
Professional Fee Form			Ospital ng Imus – Dialy	sis Center	
Patient's Clearance Form			Cashier		
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Ang pasyente o kamag anak ay maghanda sa pag-uwi.		ay ng instruksyon ng mga undin ng pasyente.	Wala	2 minuto	Nurse I Administrative Aide IV Dialysis Center
	1.2 I-tag ang pasyente sa Hospital Information System (HIS) ng may-go- home at tawagan ang Billing Section upang ipagbigay-alam na tapos na ang dialysis treatment.		Wala	1 minuto	Nurse I Administrative Aide IV Dialysis Center Records Officer I Billing Section
2. Tumungo sa Billing Section para ibigay ang Professional Fee Form.	pasyente o nasaan ang	g Professional Fee Form sa kamag-anak at ituro kung Billing Section kung saan ang Patient's Clearance	Wala	3 minuto	Nurse I Administrative Aide IV Dialysis Center
3. Bumalik sa Dialysis Center upang ibigay ang Patient's Clearance Form sa Dialysis Nurse at Security Guard.	mula sa pas	g Patient's Clearance Form yente o kamag-anak nito at lahat ang patient's chart.	Wala	5 minuto	Nurse I Administrative Aide IV Dialysis Department
4. Alamin ang susunod na iskedyul ng dialysis treatment at maaari nang umuwi.	siyang umuw	ang pasyente na maaari na ri at ibigay ang iskedyul para na dialysis treatment.	Wala	3 minuto	Nurse I Administrative Aide IV Dialysis Center
		KABUUAN	Wala	14 minuto	





14. PAGTANGGAP NG PASYENTE SA EMERGENCY DEPARTMENT

Ang Emergency Department ay responsable sa pagbibigay ng agarang lunas sa mga pasyenteng nangangailangan nito. Ito ay inaasahang makakapagbigay ng kalidad na serbisyo, maabot ang inaasahang satispaksyon ng pasyente, makapaghatid ng agarang lunas sa mga alalahanin ng pasyente tungkol sa kanilang kalusugan.

kalusugan.					
OPISINA o DIBISYON Ospital ng Imus – Emergend			cy Department		
KLASIPIKASYON Simple					
URI NG TRANSAKSYON		G2C – Government to Citiz	ens		
SINO ANG NANGANGAILANGAN NG S	SERBISYO	Lahat ng Pasyenteng dinad	ala sa Emergency Depa	rtment (ED)	
TSEKLIST NG KAILAI	NGANG DOK	UMENTO		SAAN MAKUKUH	Α
Emergency Department Data Sheet			Emergency Departmen	ıt	
Prescription Pad			Emergency Departmen	ıt	
Admission Slip			Emergency Departmen	ıt	
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Pumunta sa Emergency Department ng Ospital ng Imus.	Kunin ang	ng pasyente sa Triage Area. detalye at vital signs at ledical Officer III.	Wala	6 minuto	Security Guard Security Department Nurse I Nursing Service Department
	lahat ng or kasama na	ng pasyente at gawin ang der ng Medical Officer III ang mga pagsusuring oratoryo, x-ray, ultrasound, n).	Wala	1 oras at 30 minuto	Nurse I Nursing Service Department
	medikal na g ang disposis	ng resulta ng pagsusuring inawa sa pasyente. Tukuyin yon ng pasyente kung ito ay auwiin o kailangang iadmit.	Wala	14 minuto	Medical Officer III Medical Department
2. Kung ang pasyente ay maaari ng umuwi, papuntahin sa Billing/ Cashier at bayaran ang kaukulang babayarin.	umuwi, itawa	g pasyente ay maaari ng ag sa Billing Section upang babayarin ng pasyente.	Depende sa halaga ng eksaminasyon, gamot at gamit	10 minuto	Nurse I Nursing Service Department

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3. Kunin ang reseta sa doktor o nurse.	3. Bigyan ng reseta ng gamot (kung ito ay naaangkop).	Wala	5 minuto	Medical Officer III Medical Department
				Nurse I Nursing Service Department
4. Kung ang pasyente ay kailangang iadmit, pumunta sa Admitting Department dala ang Admission Slip para sa pagproseso ng admisyon ng pasyente.	iadmit, ito ay ipaalam sa Admitting Department para maproseso ang	Wala	5 minuto	Nurse I Nursing Service Department
	Depende sa halaga ng eksaminasyon, gamot at gamit	2 oras, 10 minuto		







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15. PAGRELEASE NG KATAWAN NG NAMATAY NA PASYENTE

Ito ay pagdokumento ng paglabas at pagbibigay ng labi ng pasyente sa Ospital ng Imus sa magseserbisyong punerarya.

OPISINA o DIBISYON		Ospital ng Imus – Emergen	cv Department	, , , ,	
KLASIPIKASYON Simple					
URI NG TRANSAKSYON G2C – Government to Citiz			ens		
SINO ANG NANGANGAILANGAN NG	SERBISYO	Namatay na pasyente			
TSEKLIST NG KAILA	NGANG DOK			SAAN MAKUKUI	HA
Patient's Clearance Form			Cash Operations Depart	ment; Billing Section	
Release of the Body Form			Emergency Department		
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
 Nalaman ng kamag-anak ang pagkamatay ng pasyente. 	1.1 Kumpirmahin ang pagkamatay ng pasyente sa pamamagitan ng "Flat Line" sa ECG Tracing at ipaalam sa kamaganak ng pasyente.		Wala	5 minuto	Medical Officer III Medical Department
1.2 Idokumento ang lahat ng detalye ng pagkamatay ng pasyente.		Wala	5 minuto	Nurse I Nursing Service Department	
					Medical Officer III Medical Department
		ang pasyente ay walang g COVID-19, isagawa ang n care".	Wala	10 minuto	Nurse I Nursing Service Department
	ng COVID- Department	g pasyente ay may sintomas 19, itawag sa Laboratory para masagawa ang RT- lagay ang labi sa Cadaver	Wala	2 minuto	Nurse I Nursing Service Department
2. Bayaran ang kaukulang babayarin ng pasyente.	Hospital Infe itawag sa Bi	ing lahat ng babayarin sa ormation System (HIS) at illing Section upang maiyos in ng pasyente.	Depende sa halaga ng eksaminasyon, gamot at gamit	5 minuto	Nurse I Nursing Service Department

CITIZEN'S CHARTER



 3. Asikasuhin ang punerarya na magseserbisyo sa namatay na kamaganak. 3. Dalhin sa cadaver holdin bangkay habang inaantay ang nagseserbisyo na punera 	g pagdating	5 minuto	Nurse I Nursing Service Department GSO Personnel
	KABUUAN Depende sa halaga ng eksaminasyon, gamot at gamit	32 minuto	







16. PAGLIPAT NG PASYENTE SA IBANG OSPITAL

Ito ay ang paglipat ng pasyente sa ibang ospital sa kadahilanang may mga eksaminasyon, pamamaraan ng paggamot na hindi angkop sa Level 1 na ospital.

ispital.					
OPISINA o DIBISYON Ospital ng Imus – Emerge			ency Department		
KLASIPIKASYON Simple					
URI NG TRANSAKSYON		G2C – Government to Cit	izens		
SINO ANG NANGANGAILANGAN NG	SERBISYO	Pasyente na kailangang l	umipat ng Ospital		
TSEKLIST NG KAILA		MENTO		SAAN MAKUKU	HA
Medical Abstract or Discharge Summary	1		Emergency Departmer	nt	
Institutional Referral Form			Emergency Departmer	nt	
Release from Responsibility			Emergency Departmer	nt	
Ambulance Conduction Form			Emergency Departmer		
HAKBANG NG KLIYENTE	AKSY	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
sa ibang ospital o nalaman na ng kailangang mailipat ang pasyente sa M ibang ospital. 1. ng Ip	ng kailangan Medical Abstra	n at kumpletuhin ang lahat g dokumento tulad ng act or Discharge Summary Referral Form .		10 minuto	Nurse I Nursing Service Department Medical Officer III Medical Department
	ng pasyente Ipaalam sa dr	ibang ospital ang paglipat at ang kalagayan nito. iver ng ambulansya ang syente sa ibang ospital.	Wala	10 minuto	Medical Officer III Medical Department Nurse I Nursing Service Department
	1.3 Magfill-up Form.	ng Ambulance Conduction	Wala	2 minuto	Driver I Nursing Service Department Nurse I Nursing Service Department

CITIZEN'S CHARTER

				Medical Officer III Medical Department
				Security Guard Security Department
2. Makinig at pirmahan ang Release from Responsibility.	2. Ipaliwanag at papirmahan sa pasyente o kamag-anak ang Institutional Referral Form.	Wala	5 minuto	Nurse I Nursing Service Department
3. Magbayad ng kaukulang babayarin.	3.1 Ayusin ang lahat ng babayarin sa Hospital Information System (HIS) at itawag sa Billing Section upang maiayos ang kaukulang babayarin ng pasyente.	Depende sa halaga ng eksaminasyon, gamot at gamit	5 minuto (stop time)	Nurse I Nursing Service Department Ms. Alicia C. Camama Chief Nurse, NSD
	3.2 Ilipat ang pasyente sa ibang ospital.	Wala	Depende sa distansya ng paglilipatang Ospital	Nurse I Nursing Service Department Medical Officer III Medical department Driver I Nursing Service Department
	Depende sa halaga ng eksaminasyon, gamot at gamit	32 minuto		







17. PAGDISCHARGE NG PASYENTE SA EMERGENCY DEPARTMENT

Ito ay ang pagpapalabas ng pasyente sa ospital pagkatapos mabigyan ng karampatang lunas at makitaan ng senyales na maaari na itong makauwi.

ne ay ang pagpapalabae ng paeye	nice ou copital	pagkalapus mabigyan ng ka	rampatang lanas at ma	ikitaan ng senyales na m	aaan na itong makauwi.		
OPISINA o DIBISYON		Ospital ng Imus – Emergen	Ospital ng Imus – Emergency Department				
KLASIPIKASYON		Simple	Simple				
URI NG TRANSAKSYON		G2C – Government to Citize	ens				
SINO ANG NANGANGAILANGAN NG	SERBISYO	Mga Pasyente sa Emergen	cy Department (ED)				
TSEKLIST NG KAILA	NGANG DOK	UMENTO		SAAN MAKUKUH	Α		
Doctor's Order Sheet			Emergency Departme	ent			
Emergency Patient Data Sheet			Emergency Departme	ent			
Prescription Pad			Emergency Departme	ent			
Statement of Account			Billing Section (8:00ar	n hanggang 5:00pm); Ca	sh Operations Department		
			(5:01pm hanggang 7:				
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGANG	TAGAL NG	TAONG NAKATALAGA		
			BABAYARAN	AKTIBIDAD			
1. Nabigyan ng karampatang lunas ang pasyente at handa ng umuwi.	1.1 Mag-is	yu ng May Go Home Order.	Wala	5 minuto	Medical Officer III Medical Department		
ilaga (HIS) at ta		etuhin lahat ng babayarin at ospital Information System ede na umuwi ang pasyente ang Billing Section para g kaukulang babayarin ng	Wala	5 minuto	Nurse I Nursing Service Department		
	ng pasyente Emergency	so ang kaukulang babayarin at tawagan ang Nurse sa Department para ang kamag-anak sa Billing	Wala	4 minuto	Accounting Clerk II Billing Section		
	1.4 Papuntahin ang kamag-anak ng pasyente sa Billing Section.		Wala	1 minuto	Nurse I Nursing Service Department		
2. Pumunta sa Billing Section upang kuhanin ang Final Statement of Account (SOA).	ang kamag	sue ng SOA at papuntahin g-anak ng pasyente sa ng magbayad.	Wala	1 minuto	Accounting Clerk II Billing Section		

CITIZEN'S CHARTER

3. Pumunta sa Cashier upang magbayad.	3. Tanggapin ang bayad at mag-issue ng opisyal na resibo at dalawang (2) Patient's Clearance Form.	Depende sa halaga ng eksaminasyon, gamot at gamit	3 minuto	Cashier I Cash Operations Department
4. Kung ang pasyente ay maaari ng umuwi, kunin ang reseta sa doktor o nurse.	4. Kung ang pasyente ay maaari ng umuwi, ibigay at ipaliwanag ang reseta ng gamot (kung ito ay naaangkop).	Wala	3 minuto	Nurse I Nursing Service Department Medical Officer III Medical Department
5. Ibigay ang Patient's Clearance Form sa Nurse at Security Guard at maaari ng umuwi.	5. Idischarge sa Hospital Information System (HIS) ang pangalan ng pasyente at gabayan palabas ng Emergency Department.	Wala	3 minuto	Cashier I Cash Operations Department Nurse I Nursing Service Department Security Guard Security Department
	Depende sa halaga ng eksaminasyon, gamot at gamit	25 minuto		







18. PAGSUSURING DAYAGNOSTIKO SA HEART STATION UNIT

Ang Heart Station ay responsible sa pagtanggapng pasyente mula sa Emergency Department, inpatient at outpatient upang maisagawa ang kinakailangang dayagnostikong pagsusuri para sa kalagayan sa puso.

layaynosiikony paysusun para sa	i Kalagayan sa puse).			
OPISINA o DIBISYON	A o DIBISYON Ospital ng Imus – Heart Station		on Unit		
KLASIPIKASYON	ASIPIKASYON Simple				
URI NG TRANSAKSYON		G2C – Government to Citizer	IS		
SINO ANG NANGANGAILANG	AN NG	Outpatient; Inpatient at mga p	pasyente mula sa Emerg	ency Department	
TSEKLIST NG	KAILANGANG DC	KUMENTO		SAAN MAKUKU	HA
Referral o Prescription Pad			Doktor na nagpagawa	ng eksaminasyon	
Senior Citizen ID			Local Government Unit		
Person with Disability (PWD) ID			Local Government Unit	 Persons woth Disab 	oility Affairs Office
HAKBANG NG KLIYENTE	AKSYO	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Ipakita sa Heart Station Unit ang Diyagnostikong Request or Prescription Pad para sa pagsusuri.	Form ng pasyer Requesting Phy	suriin ang binigay na Request nte na galing sa kaniyang sician kung nauukol sa wa sa Heart Station Unit.	Wala	2 minuto	Heart Station Staff
	1.2 Isulat sa Patient Schedule Logbook ang pangalan ng pasyente, contact number, araw at oras ng iskedyul ng diyagnostikong pagsusuri.		Wala	3 minuto	
	-	pasyente ang halaga ng anyang pinapagawa.	Wala	2 minuto	
2. Pumunta sa Heart Station Unit sa nakaiskedyul na araw at oras at ibigay ang Request o Prescription Pad.	2. Tanggapin ang request at itala sa Logbook. Ipasok ang mga kinakailangang impormasyon ng pasyente sa Hospital Information System (Bizbox) upang mabigyan ng charge slip ang pasyente.		Wala	Heart Station Staff	5 minuto
3. Pumunta sa Cashier para magbayad ng kaukulang halaga para sa diyagnostikong eksaminasyon.		ng pasyente sa Cashier at ang kopya ng charge slip.	2D Echo (Plain) – Php 2,500.00 2D Echo (Doppler) – Php 2,600.00	Heart Station Staff	1 minuto





4. Bumalik sa Heart Station Unit pagkatapos magbayad sa cashier at ipakita ang resibo ng pingbayaran. 4. Tanggapin ang resibo (OR). Isulat sa patient logbook ang numero ng OR para sa reference. Wala Heart Station Staff 1 minuto 5. Manatili sa upuan sa may tapat ng Heart Station Unit at maghintay tawagin ang pangalan. 5. Ihanda ang makina na gagamitin sa eksaminasyon. Tawagin ang pangalan ng pangalan. Wala Heart Station Staff 15 minuto 6. Sumailalim diyagnostikong proseso. 6. Isagawa ang proseso. Wala Heart Station Staff 2D Echo - 45 minuto 7. Balikan ang resulta sa nakatakdang araw at oras na pagkuha. 7.1 Para sa mga Inpatient: laakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda. Wala Heart Station Staff 2D Echo - 45 minuto 7.2 Para sa mga Outpatient: Sabihan na balikan ang resulta sa raw at oras o kaya ay tumawag muna sa Heart Station Unit landline number. Wala Heart Station Staff 2 minuto			Venous Vascular Doppler – Php 5,000.00 Arterial Vascular Doppler – Php 5,000.00 Venous and Arterial Vascular Doppler – Php 9,500.00 Carotid Vascular Doppler – Php 4,500.00		
tapat ng Heart Station Unit at maghintay tawagin ang pangalan.eksaminasyon. Tawagin ang pangalan ng pasyente.leksaminasyon. Tawagin ang pangalan ng pasyente.6. Sumailalim diyagnostikong proseso.sa c6. Isagawa ang proseso.WalaHeart Station Staff2D Echo - 45 minuto ECG - 7 minuto Vascular UTZ - 2 oras hanggang 4 oras7. Balikan ang resulta sa nakatakdang araw at oras na pagkuha.7.1 Para sa mga Inpatient: laakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda.WalaHeart Station Staff2D Echo - 45 minuto ECG - 7 minuto Vascular UTZ - 2 oras hanggang 4 oras7. Balikan ang resulta sa nakatakdang araw at oras na pagkuha.7.1 Para sa mga Inpatient: laakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda.WalaHeart Station Staff2 minuto7.2 Para sa mga Outpatient: Sabihan na balikan ang resulta sa itinakdang araw at oras o kaya ay tumawag muna sa HeartWalaHeart Station Staff2 minuto	Unit pagkatapos magbayad sa cashier at ipakita ang resibo ng		Wala	Heart Station Staff	1 minuto
6. Šumailalim diyagnostikong proseso. sa 6. Isagawa ang proseso. Wala Heart Station Staff 2D Echo - 45 minuto ECG – 7 minuto Vascular UTZ – 2 oras hanggang 4 oras 7. Balikan ang resulta sa nakatakdang araw at oras na pagkuha. 7.1 Para sa mga Inpatient: Iaakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda. Wala Heart Station Staff 2D Echo - 45 minuto ECG – 7 minuto Vascular UTZ – 2 oras hanggang 4 oras 7. Balikan ang resulta sa 7.1 Para sa mga Inpatient: Iaakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda. Wala Heart Station Staff 2 minuto 7.2 Para sa mga Outpatient: Sabihan na balikan ang resulta sa itinakdang araw at oras o kaya ay tumawag muna sa Heart Nala Heart Station Staff 1	tapat ng Heart Station Unit at maghintay tawagin ang	eksaminasyon. Tawagin ang pangalan ng	Wala	Heart Station Staff	15 minuto
7. Balikan ang resulta sa nakatakdang araw at oras na pagkuha. 7.1 Para sa mga Inpatient: Wala Heart Station Staff 2 minuto 9 nakatakdang araw at oras na pagkuha. 1aakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda. Wala Heart Station Staff 2 minuto 7.2 Para sa mga Outpatient: 7.2 Para sa mga Outpatient: Sabihan na balikan ang resulta sa itinakdang araw at oras o kaya ay tumawag muna sa Heart Image State		6. Isagawa ang proseso.	Wala	Heart Station Staff	ECG – 7 minuto Vascular UTZ – 2 oras
Sagutan ang Client Satisfaction Rating Form	nakatakdang araw at oras na	 Iaakyat ang resulta at ibigay sa Nars kalakip ang kanilang buong pangalan at lagda. 7.2 Para sa mga Outpatient: Sabihan na balikan ang resulta sa itinakdang araw at oras o kaya ay tumawag muna sa Heart Station Unit landline number. 		Heart Station Staff	



KABUUAN	2D Echo (Plain) –	38 minuto	2D Echo – 1 oras at 14
	Php 2,500.00		minuto
	2D Echo (Doppler) –		ECG – 36 minuto
	Php 2,600.00		Vascular Ultrasound – 4
	Venous Vascular		oras, 29 minuto
	Doppler – Php		
	5,000.00		
	Arterial Vascular		
	Doppler – Php		
	5,000.00		
	Venous and Arterial		
	Vascular Doppler –		
	Php 9,500.00		
	Carotid Vascular		
	Doppler – Php		
	4,500.00		







19. GABAY SA PAGSUMITE NG REQUEST AT PAGKUHA NG RESULTA SA LABORATORYO

Ito ay pagproseso ng mga pagsusuring medikal sa laboratoryo na kailangan ng pasyente upang mabigyan ng tamang lunas ng doktor. Ang layunin ng Laboratory Department ay makapagbigay ng tama at wastong resulta ng pagsusuring medikal sa itinakdang oras na magagamit ng doktor bilang basehan sa pagbibigay ng karampatang lunas sa pasyente. Makapagbigay ng gabay sa mga pasyente at kamag-anak nito sa pagsumite ng kahilingang pagsusuring medikal hanggang pagkuha ng resulta.

PISINA o DIBISYON LASIPIKASYON IRI NG TRANSAKSYON SINO ANG NANGANGAILANGAN NG TSEKLIST NG KAIL/ aboratory Request Form		Lahat ng Pasyenteng Nang	ens; G2B - Government		Government to Government
IRI NG TRANSAKSYON SINO ANG NANGANGAILANGAN NG TSEKLIST NG KAIL/		G2C – Government to Citize Lahat ng Pasyenteng Nang			Government to Government
INO ANG NANGANGAILANGAN NG TSEKLIST NG KAIL		Lahat ng Pasyenteng Nang			Government to Government
TSEKLIST NG KAIL			angailangan ng Pagsusi	iring Medikal sa Labor	
	ANGANG DOK	UMENTO			
aboratory Request Form				SAAN MAKUKU	
, ,				* * *	nent; Outpatient Department
Patient Information Slip			Emergency Departmer		ent
Charge Slip (kung naaangkop)			Billing Section; Laborat		
aboratory Request ng Doktor (kung sa			Doktor o Ospital kung	saan nagpakonsulta	
Prihinal na Approved Guarantee Letter	(kung naaangk	op)	Opisyal ng Gobyerno		
enior Citizen ID (kung naaangkop)			LGU – Office of the Se		
ersons with Disability ID (kung naaang			City Government – Per		
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG	TAGAL NG	TAONG NAKATALAGA
			BABAYARAN	AKTIBIDAD	
. Kumuha ng numero sa Receiving	1. Tumawag	ng Numero.	Wala	2 minuto	Medical Technologist
Counter at hintayin matawag.					Laboratory Clerk/ Aide
					Laboratory Department
. Ibigay ang Laboratory Request Form	2. Basahin	ang Laboratory Request	Wala	5 minuto	Medical Technologist
t specimen (kung naangkop) sa		Approved Guarantee Letter			Laboratory Clerk/ Aide
akatalagang kawani ng Laboratory.	· •	angkop), at bigyan ng struksyon ang pasyente.			Laboratory Department
. Kunin ang charge slip sa		g Charge Slip ang pasyente	Tingnan sa Ibaba	5 minuto	Medical Technologist
akatalagang kawani at pumunta sa	o kamag-ana	k at papuntahin sa Cashier.			Clerk/ Aide
Cashier.					Laboratory Department
. Bumalik sa Laboratory at ipakita ang	4.1 Tanggap	in ang Opisyal na Resibo at	Wala	5 minuto	Medical Technologist
esibo upang maisagawa ang		÷ · · ·			Laboratory Clerk/ Aide
aukulang proseso.	impormasyo	n sa receiving logbook.			Laboratory Department

CITIZEN'S CHARTER

	KABUUAN	Tingnan sa Ibaba	35 minuto	
katunayan na natanggap na ang resulta.	kumuha ng resulta.			Laboratory Clerk/ Aide Laboratory Department
6. Pumirma sa receiving logbook bilang	6. Papirmahin sa receiving logbook ang	Wala	2 minuto	Medical Technologist
esuita.	ginawang eksaminasyon.			Laboratory Clerk/ Aide Laboratory Department
		Wala	5 minuto	•
5. Ipakita ang resibo sa pagkuha ng esulta.	 **Para sa resulta ng Routine Blood Chemistry: Outpatient: ito ay makukuha pagkatapos ng apat (4) na oras. Inpatient: ito makukuha pagkatapos ng tatlong (3) oras. Emergency Department: ito ay makukuha pagkatapos ng isang oras at tatlumpung (1 ½) minuto. **Para sa resulta ng Clinical Microscopy/ Hematology: Outpatient/ Inpatient: ito ay makukuha pagkatapos ng dalawang (2) oras. Emergency Department: ito ay makukuha pagkatapos ng isang oras at tatlumpung (1 ½) minuto. **Para sa resulta ng Bacteriology/ Send Out: Ito ay makukuha pagkatapos ng dalawa (2) hanggang limang (5) araw. 5. Kuhanin ang Opisyal na resibo at tingnan kung mayroon ng resulta ang 	Wala	5 minuto	Medical Technologist Laboratory Clerk/ Aide
	 4.3 Sabihan ang pasyente kung kailan makukuha ang resulta. **Para sa resulta ng Fasting Blood Chemistry, Serology at Immunology ito ay makukuha tuwing ika-lima (5:00) ng hapon. 	Wala	1 minuto	Medical Technologist Laboratory Clerk/ Aide Laboratory Department
	4.2 Ipaliwanag at isagawa ang nakasaad na eksaminasyon.	Wala	10 minuto	Medical Technologist Laboratory Department



Item ID	Pangalan ng Eksaminasyon	Halaga	Item ID	Pangalan ng Eksaminasyon	Halaga
LAB0001	AFB (ACID FAST BACILLI)	PHP 200.00	LAB0150	T4 THYROXINE (ECLIA)	PHP 430.00
LAB0002	AFP (ALPHA FETOPROTEIN)	PHP 850.00	LAB0151	TESTOSTERONE	PHP 1,500.00
LAB0003	ALBUMIN	PHP 120.00	LAB0152	THYROGLOBULIN (ECLIA)	PHP 2,000.00
LAB0004	ALKALINE PHOSPHATASE	PHP 150.00	LAB0153	TMG (TRICHOMONAS, MONILLA, GRAM STAIN)	PHP 250.00
LAB0005	ALT/SGPT	PHP 130.00	LAB0154	TORCH TEST (TOXOPLASMA, CMV, RUBELLA, HSV) SCREENING	PHP 2,800.00
LAB0006	AMMONIA	PHP 1,225.00	LAB0155	TOTAL ACID PHOSPHATASE (ACP)	PHP 1,500.00
LAB0007	AMYLASE	PHP 335.00	LAB0156	TOTAL CALCIUM	PHP 135.00
LAB0008	ANTI HAV IG G	PHP 700.00	LAB0157	TOTAL CHOLESTEROL	PHP 120.00
LAB0009	ANTI HAV IGM	PHP 420.00	LAB0158	TOTAL IRON BINDING CAPACITY (TIBC) WITH IRON	PHP 800.00
LAB0010	ANTI HBC IGM	PHP 500.00	LAB0159	TOTAL PROTEIN	PHP 170.00
LAB0011	ANTI HBC TOTAL	PHP 480.00	LAB0160	TOTAL PSA (PROSTATE-SPECIFIC ANTIGEN)	PHP 1,110.00
LAB0012	ANTI HBE	PHP 480.00	LAB0161	TOXIC GRANULATION (TG)	PHP 80.00
LAB0013	ANTI HBS	PHP 720.00	LAB0162	TOXOPLASMA SCREENING	PHP 850.00
LAB0014	ANTI-HCV	PHP 890.00	LAB0163	TPAG (TOTAL PROTEIN ALBUMIN GLOBULIN)	PHP 350.00
LAB0015	APTT (ACTIVATED PARTIAL THROMBOPLASTIN TIME)	PHP 370.00	LAB0164	TP-PA (QUALI)	PHP 450.00
LAB0016	ASO SCREENING	PHP 350.00	LAB0165	TP-PA WITH DILUTION	PHP 1,500.00
LAB0017	ASO WITH DILUTION	PHP 470.00	LAB0166	TRANSFERRIN SATURATION	PHP 850.00



LAB0018	AST/SGOT	PHP 130.00	LAB0167	TRIGLYCERIDES	PHP 180.00
LAB0019	B-HCG (H MOLE)	PHP 1,000.00	LAB0168	TROPONIN I (QUALI)	PHP 980.00
LAB0020	B-HCG (QUANTITATIVE)	PHP 1,400.00	LAB0169	TROPONIN I (QUANTI)	PHP 1,200.00
LAB0021	BLEEDING TIME	PHP 85.00	LAB0170	TROPONIN T (QUANTI)	PHP 2,760.00
LAB0022	BLOOD C/S	PHP 1,500.00	LAB0171	TSH THYROID STIMULATIING HORMONE (ECLIA)	PHP 750.00
LAB0023	BLOOD TYPING	PHP 130.00	LAB0172	TZANCK SMEAR	PHP 200.00
LAB0024	BLOOD URIC ACID (BUA)	PHP 115.00	LAB0173	URINALYSIS (10 PARAMETERS)	PHP 110.00
LAB0025	BODY FLUID ANALYSIS (GLUCOSE, TOTAL PROTEIN, CELL CT/DIFF CT, PH)	PHP 1,350.00	LAB0174	URINALYSIS (4 PARAMETERS)	PHP 60.00
LAB0026	BUN (BLOOD UREA NITROGEN)	PHP 115.00	LAB0175	URINE ALBUMIN	PHP 670.00
LAB0027	C3	PHP 650.00	LAB0176	URINE ALBUMIN / PROTEIN (DIPSTICK)	PHP 45.00
LAB0028	CA 125 (OVARY)	PHP 1,800.00	LAB0177	URINE C/S	PHP 950.00
LAB0029	CA 15-3 (BREAST)	PHP 1,850.00	LAB0178	URINE CHLORIDE	PHP 440.00
LAB0030	CA 72-4	PHP 3,300.00	LAB0179	URINE CREATININE	PHP 350.00
LAB0031	CA19 9	PHP 2,200.00	LAB0180	URINE GLUCOSE (DIPSTICK)	PHP 45.00
LAB0032	CARCINOEMBRYONIC-ANTIGEN (CEA)	PHP 900.00	LAB0181	URINE KETONE (DIPSTICK)	PHP 45.00
LAB0033	CBC (COMPLETE BLOOD COUNT) WITH PLATELET COUNT	PHP 200.00	LAB0182	URINE PH (DIPSTICK)	PHP 45.00
LAB0034	CHLORIDE	PHP 140.00	LAB0183	URINE POTASSIUM	PHP 450.00
LAB0035	CLOTTING TIME	PHP 85.00	LAB0184	URINE PROTEIN	PHP 450.00



LAB0036	CLOTTING TIME, BLEEDING TIME	PHP 125.00	LAB0185	URINE SODIUM	PHP 450.00
LAB0037	CMV SCREENING	PHP 850.00	LAB0186	URINE SPECIFIC GRAVITY (DIPSTICK)	PHP 45.00
LAB0038	COOMB'S TEST (DIRECT & INDIRECT)	PHP 200.00	LAB0187	WBC DIFFERENTIAL COUNT	PHP 150.00
LAB0039	CORRECTED CALCIUM	PHP 250.00	LAB0188	WHOLE BLOOD	PHP 1,800.00
LAB0040	СРК МВ	PHP 1,300.00	LAB0189	ELECTROPHORESIS (HEMOGLOBIN/PROTEIN)	PHP 4,025.00
LAB0041	CPK MB WITH TOTAL	PHP 600.00	LAB0190	LUPUS ANTICOAGULANT	PHP 4,370.00
LAB0042	СРК ММ	PHP 890.00	LAB0191	ANA (SLE)	PHP 690.00
LAB0043	CPK TOTAL	PHP 400.00	LAB0192	ANA (SLE WITH DILUTION)	PHP 1,300.00
LAB0044	CREATININE	PHP 115.00	LAB0193	ANTI CARDIOLIPIN IgG	PHP 3,500.00
LAB0045	CREATININE CLEARANCE	PHP 480.00	LAB0194	ANTI CARDIOLIPIN IgM	PHP 3,500.00
LAB0046	CROSS MATCHING	PHP 600.00	LAB0195	ANTI CCP	PHP 4,000.00
LAB0047	CRP	PHP 350.00	LAB0196	ANTI SMOOTH MUSCLE ABS (IF)	PHP 8,100.00
LAB0048	CRP WITH DILUTION	PHP 570.00	LAB0197	ALLERGY PANEL	PHP 3,800.00
LAB0049	CRT (CLOT RETRACTION TIME)	PHP 120.00	LAB0198	MUMPS IgG	PHP 3,340.00
LAB0050	DBIB / B1B2	PHP 185.00	LAB0199	NT PRO-BNP	PHP 5,200.00
LAB0051	D-DIMER	PHP 2,800.00	LAB0200	RUBEOLA IgG / MEASLES IgG	PHP 4,000.00
LAB0052	DENGUE DUO (IG G/IGM/NS1)	PHP 1,450.00	LAB0201	VARICELLA IgG	PHP 4,200.00
LAB0053	I - DENGUE NS1 AG (QUALI)	PHP 1,550.00	LAB0202	C3 (COMPLEMENT 3)	PHP 700.00
LAB0054	DIGOXIN	PHP 750.00	LAB0203	C4 (COMPLEMENT 4)	PHP 730.00



LAB0055	ESR (ERYTHROCYTE SEDIMENTATION RATE)	PHP 150.00	LAB0204	FRUCTOSAMINE ASSAY	PHP 520.00
LAB0056	EXPANDED NEWBORN SCREENING	PHP 1,800.00	LAB0205	HIGH SENSITIVE CRP	PHP 750.00
LAB0057	FBS / RBS / 2HPBS (FASTING BLOOD SUGAR / RANDOM BLOOD SUGAR / 2 HRS. POST PRANDIAL BLOOD SUGAR) (EACH)	PHP 95.00	LAB0206	HBV DNA	PHP 5,760.00
LAB0058	FECAL OCCULT BLOOD DETERMINATION	PHP 200.00	LAB0207	HIV VIRAL LOAD	PHP 7,200.00
LAB0059	FECALYSIS (ROUTINE)	PHP 60.00	LAB0208	CORTISOL	PHP 800.00
LAB0060	FERRITIN	PHP 1,100.00	LAB0209	ESTRADIOL	PHP 1,400.00
LAB0061	FIBRINOGEN	PHP 1,100.00	LAB0210	PROGESTERONE	PHP 1,495.00
LAB0062	FLUID ALBUMIN (PLEURAL, PERICARDIAL, PERITONEAL)	PHP 475.00	LAB0211	PROGESTERONE WITH DILUTION	PHP 2,415.00
LAB0063	FLUID GLUCOSE (PLEURAL, PERICARDIAL, PERITONEAL, AMNIOTIC, SYNOVIAL)	PHP 475.00	LAB0212	BIOPSIES (ENDOSCOPIC, CORE NEEDLE, PUNCH ETC)	PHP 2,300.00
LAB0064	FLUID LDH (PLEURAL, PERICARDIAL, PERITONEAL, AMNIOTIC, SYNOVIAL)	PHP 550.00	LAB0213	BIOPSY SMALL	PHP 1,500.00
LAB0065	FLUID PROTEIN (PLEURAL, PERICARDIAL, PERITONEAL, AMNIOTIC, SYNOVIAL)	PHP 475.00	LAB0214	BIOPSY MEDIUM	PHP 2,300.00
LAB0066	FLUID -WBC WITH DIFFERENTIAL COUNT	PHP 570.00	LAB0215	BIOPSY LARGE	PHP 3,900.00
LAB0067	FRESH FROZEN PLASMA	PHP 1,000.00	LAB0216	BIOPSY RADICAL	PHP 5,600.00





LAB0068	FSH (FOLLICLE-STIMULATING HORMONE)	PHP 900.00	LAB0217	PAP SMEAR	PHP 400.00
LAB0069	FT3 (ECLIA)	PHP 730.00	LAB0218	NON GYNE WITHOUT CELL BLOCK (4 SLIDES ONLY)	PHP 2,100.00
LAB0070	FT4 (ECLIA)	PHP 730.00	LAB0219	NON GYNE WITH CELL BLOCK	PHP 2,900.00
LAB0071	GGT (GAMMA-GLUTAMYL TRANSFERASE)	PHP 380.00	LAB0220	DRUG TEST	PHP 250.00
LAB0072	GLUCOSE JUICE (50,75 AND 100 GRAMS)	PHP 150.00	LAB0221	SODIUM, POTASSIUM, CHLORIDE, IONIZED CALCIUM	PHP 900.00
LAB0073	GLYCOMARK (1,5 AG)	PHP 1,200.00	LAB0222	ONI CHEM 6 (FBS, BUN, CREA, BUA, CHOLE, TAG)	PHP 740.00
LAB0074	GRAM STAIN (GS)	PHP 200.00	LAB0223	ONI CHEM 8 (FBS, BUN, CREA, BUA, CHOLE, TRIG, AST, ALT)	PHP 1,000.00
LAB0075	GROWTH HORMONE	PHP 2,800.00	LAB0224	ONI CHEM 10 (FBS, BUN, CREA, BUA, LIPID PROF, AST, ALT)	PHP 1,250.00
LAB0076	H PYLORI STOOL ANTIGEN	PHP 1,600.00	LAB0225	Processing Fee	PHP 150.00
LAB0077	H. PYLORI (QUALITATIVE)	PHP 1,000.00	LAB0226	CD4	PHP 2,500.00
LAB0078	H. PYLORI IG G(QUANTITATIVE)	PHP 1,950.00	LAB0227	COVID RAPID TEST	PHP 1,500.00
LAB0079	H. PYLORI IGM (QUANTITATIVE)	PHP 1,950.00	LAB0228	COMPATIBILITY TESTING	PHP 50.00
LAB0080	H/H (HEMATOCRIT/HEMOGLOBIN)	PHP 125.00	LAB0229	HISTOPATH MISCELLANEOUS (FORMALIN, ALCOHOL 95%, ETC.)	PHP 100.00
LAB0081	HBA1C	PHP 650.00	LAB0230	C – ALBUMIN	PHP 120.00
LAB0082	HBEAG	PHP 480.00	LAB0231	C – ALKALINE PHOSPHATASE	PHP 150.00
LAB0083	HBSAG SCREENING (QUALI)	PHP 240.00	LAB0232	C – ALT/SGPT	PHP 130.00

CITIZEN'S CHARTER

LAB0084	HBSAG WITH TITER(QUANTI)	PHP 590.00	LAB0233	C – AMYLASE	PHP 335.00
LAB0085	HEMODIALYSIS PANEL 1 (NA, K, PRE/POST BUN, CA, PHOS, ALB, CREA, URIC)	PHP 1,200.00	LAB0234	C – APTT (ACTIVATED PARTIAL THROMBOPLASTIN TIME)	PHP 425.00
LAB0086	HEMODIALYSIS PANEL 2	PHP 1,450.00	LAB0235	C – AST/SGOT	PHP 130.00
LAB0087	HEMODIALYSIS PANEL 3	PHP 1,850.00	LAB0236	C – BLOOD URIC ACID (BUA)	PHP 115.00
LAB0088	HD PANEL 4 (HBSAG, ANTI-HBS, ANTI- HCV)	PHP 2,000.00	LAB0237	C – BODY FLUID ANALYSIS (GLUCOSE, TOTAL PROTEIN, CELL CT/DIFF CT, PH)	PHP 1,350.00
LAB0089	HD PANEL 5 (FERRITIN, IRON, TIBC)	PHP 2,550.00	LAB0238	C – BUN (BLOOD UREA NITROGEN)	PHP 115.00
LAB0090	HDL (HIGH-DENSITY LIPOPROTEIN) + LDL (LOW-DENSITY LIPOPROTEIN)	PHP 210.00	LAB0239	C – CBC (COMPLETE BLOOD COUNT) WITH PLATELET COUNT	PHP 200.00
LAB0091	HE 4	PHP 4,000.00	LAB0240	C – CHLORIDE	PHP 140.00
LAB0092	HEMATOCRIT	PHP 70.00	LAB0241	C – CREATININE	PHP 115.00
LAB0093	HEMOGLOBIN	PHP 70.00	LAB0242	C – CREATININE CLEARANCE	PHP 480.00
LAB0094	HEMOGLOBIN, HEMATOCRIT, PLATELET COUNT	PHP 220.00	LAB0243	C – DBIB/B1B2	PHP 185.00
LAB0095	HEPA PROFILE 4: HEPA B AND C PROFILE (HBSAG, ANTI HBS, ANTI HBC TOTAL, ANTI HCV)	PHP 1,850.00	LAB0244	C – D-DIMER	PHP 2,800.00
LAB0096	HEPAPROFILE 1 : HEPA B SCREENING (HBSAG TITER + ANTI HBS)	PHP 1,300.00	LAB0245	C – FBS / RBS / 2HPBS (FASTING BLOOD SUGAR / RANDOM BLOOD SUGAR / 2 HRS. POST PRANDIAL BLOOD SUGAR) (EACH)	PHP 95.00



LAB0097	HEPAPROFILE 2 : HEPA B FULL PANEL (HBSAG, ANTI HBS, HBE AG, ANTI HBE, ANTI HBC IGM, ANTI HBC IGG)	PHP 2,500.00	LAB0246	C – FLUID ALBUMIN (PLEURAL, PERICARDIAL, PERITONEAL)	PHP 475.00
LAB0098	HEPAPROFILE 3: HEPA A AND B PROFILE (HEPA 2+ ANTI HAV)	PHP 3,300.00	LAB0247	C – FLUID GLUCOSE (PLEURAL, PERICARDIAL, PERITONEAL, AMNIOSTIC, SYNOVIAL)	PHP 475.00
LAB0099	HEPAPROFILE 5: HEPA A, B, C PROFILE	PHP 4,300.00	LAB0248	C – FULID PROTEIN (PLEURAL, PERICARDIAL, PERITONEALN AMNIOTIC, SYNOVIAL)	PHP 475.00
LAB0100	HIV RAPID (QUALITATIVE)	PHP 700.00	LAB0249	C – FLUID – WBC WITH DIFFERENTIAL COUNT	PHP 570.00
LAB0101	HSV SCREENING	PHP 850.00	LAB0250	C – HBA1C	PHP 750.00
LAB0102	INDIA INK	PHP 300.00	LAB0251	C – HDL (HIGH-DENSITY LIPOPROTEIN) + LDL (LOW- DENSITY LIPOPROTEIN)	PHP 210.00
LAB0103	INORGANIC PHOSPHORUS	PHP 250.00	LAB0253	C – HEMODIALYSI PANEL 1 (NA, K, PRE/POST BUN, CA, PHOS, ALB, CREA, URIC)	PHP 1,000.00
LAB0104	IONIZED CALCIUM	PHP 530.00	LAB0254	C – HEMODIALYSIS PANEL 2	PHP 1,450.00
LAB0105	IRON (FE)	PHP 400.00	LAB0255	C – HEMODIALYSIS PANEL 3	PHP 1,850.00
LAB0106	KIDNEY STONE ANALYSIS BY FTIR	PHP 2,500.00	LAB0256	C – HEMOGLOBIN	PHP 70.00
LAB0107	KOH WET SMEAR (POTASSIUM HYDROXIDE)	PHP 180.00	LAB0257	C – HEMOGLOBIN, HEMATOCRIT, PLATELET COUNT	PHP 150.00
LAB0108	LDH / LACTATE DEHYDROGENASE (SERUM)	PHP 250.00	LAB0258	C – INORGANIC PHOSPHORUS	PHP 250.00



LAB0109	LE PREPARATION (LUPUS ERYTHEMATOSUS)	PHP 280.00	LAB0259	C – IONIZED CALCIUM	PHP 530.00
LAB0110	LH (LUTEINIZING HORMONE)	PHP 950.00	LAB0260	C – LDH / LACTATE DEHYDROGENASE (SERUM)	PHP 250.00
LAB0111	LIPASE	PHP 330.00	LAB0261	C – LIPASE	PHP 330.00
LAB0112	LIPID PROFILE (TOTAL CHOLESTEROL, TRIGLYCERIDES, HDL)	PHP 550.00	LAB0262	C – LIPID PROFILE (TOTAL CHOLESTEROL, TRIGLYCERIDES, HDL)	PHP 550.00
LAB0113	LIVER PANEL (ALT, AST, ALP, DBIB ,TPAG)	PHP 900.00	LAB0263	C – LIVER PANEL (ALT, AST, ALP, DBIB, TPAG)	PHP 900.00
LAB0114	MAGNESIUM	PHP 300.00	LAB0264	C – MAGNESIUM	PHP 300.00
LAB0115	MALARIAL SMEAR SCREENING (MS)	PHP 170.00	LAB0265	C – ONI CHEM 10 (FBS, BUN, CEA, BUA, LIPID PROF, AST, ALT)	PHP 1,250.00
LAB0116	MICRAL TEST (MICRO ALBUMIN)	PHP 350.00	LAB0266	C – ONI CHEM 6 (FBS, BUN, CREA, BUA, CHOLE, TAG)	PHP 740.00
LAB0117	MICROALBUMIN/CREATININE RATIO	PHP 1,650.00	LAB0267	C – ONI CHEM 8 (FBS, BUN, CREA, BUA, CHOLE, TRIG, AST, ALT)	PHP 1,000.00
LAB0118	I-NEWBORN SCREENING (REGULAR)	PHP 600.00	LAB0268	C – PERIPHERAL BLOOD SMEAR	PHP 220.00
LAB0119	OGCT-ORAL GLUCOSE CHALLENGE TEST (50 GRAMS)	PHP 530.00	LAB0269	C – PLATELET COUNT (PC)	PHP 120.00
LAB0120	OGTT -ORAL GLUCOSE TOLERANCE TEST (100,75,50 GRAMS)	PHP 660.00	LAB0270	C – POTASSIUM (K+)	PHP 140.00
LAB0121	OTHER C/S (EXUDATES, RESPIRATORY & OTHER BODY FLUIDS)	PHP 1,250.00	LAB0271	C – POTASSIUM AND SODIUM	PHP 270.00



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LAB0122	PACKED RED BLOOD CELLS	PHP 1,500.00	LAB0272	C – POTASSIUM, SODIUM, CHLORIDE	PHP 410.00
LAB0123	PARATHYROID HORMONE (PTH)	PHP 1,850.00	LAB0273	C – POTASSIUM, SODIUM, CHLORIDE, TOTAL CALCIUM, IONIZED CALCIUM	PHP 1,105.00
LAB0124	PERIPHERAL BLOOD SMEAR	PHP 220.00	LAB0274	C – PT (PROTHROMBIN TIME)	PHP 405.00
LAB0125	PLATELET COUNT (PC)	PHP 120.00	LAB0275	C – RED CELL INDICES (RCI)	PHP 100.00
LAB0126	POTASSIUM (K+)	PHP 140.00	LAB0276	C – RETICULOCYTES COUNT	PHP 200.00
LAB0127	POTASSIUM AND SODIUM	PHP 270.00	LAB0277	C – SODIUM (NA-)	PHP 140.00
LAB0128	POTASSIUM, SODIUM, CHLORIDE	PHP 410.00	LAB0278	C – SODIUM, POTASSIUM, CHLORIDE, IONIZED CALCIUM	PHP 900.00
LAB0129	POTASSIUM, SODIUM, CHLORIDE, TOTAL CALCIUM, IONIZED CALCIUM	PHP 1,105.00	LAB0279	C – TOTAL CALCIUM	PHP 135.00
LAB0130	PREGNANCY TEST (SERUM)	PHP 300.00	LAB0280	C – TOTAL CHOLESTEROL	PHP 120.00
LAB0131	PREGNANCY TEST (URINE)	PHP 190.00	LAB0281	C – TOTAL IRON BINDING CAPACITY (TIBC) WITH IRON	PHP 800.00
LAB0132	PROCALCITONIN	PHP 5,040.00	LAB0282	C – TOTAL PROTEIN	PHP 170.00
LAB0133	PROLACTIN	PHP 850.00	LAB0283	C – TOXIC GRANULATION (TG)	PHP 80.00
LAB0134	PROSTATIC ACID PHOSPHATASE (MALE)	PHP 1,720.00	LAB0284	C – TPAG (TOTAL PROTEIN ALBUMIN GLOBULIN)	PHP 350.00
LAB0135	PT (PROTHROMBIN TIME)	PHP 320.00	LAB0285	C – TRIGLYCERIDES	PHP 180.00
LAB0136	RA/ RF QUALITATIVE (RHEUMATOID FACTOR)	PHP 360.00	LAB0286	C – URINE ALBUMIN	PHP 670.00
LAB0137	RA/RF WITH DILUTION	PHP 600.00	LAB0287	C – URINE CHLORIDE	PHP 440.00

LAB0138	RBC MORPHOLOGY (URINE)	PHP 180.00	LAB0288	C – URINE CREATININE	PHP 350.00
LAB0139	RED CELL INDICES (RCI)	PHP 100.00	LAB0289	C – URINE POTASSIUM	PHP 450.00
LAB0140	RETICULOCYTES COUNT	PHP 200.00	LAB0290	C – URINE PROTEIN	PHP 450.00
LAB0141	RH (RHESUS) TYPING	PHP 100.00	LAB0291	C – URINE SODIUM	PHP 450.00
LAB0142	RPR QUALITATIVE (RAPID PLASMA REAGIN) (VDRL) (SYPHILIS)	PHP 200.00	LAB0292	C – WBC DIFFERENTIAL COUNT	PHP 150.00
LAB0143	RUBELLA SCREENING	PHP 850.00	LAB0295	C – FLUID LDH (PLEURAL, PERICARIDAL, PERITONEAL, AMNITIC, SYNOVIAL)	PHP 550.00
LAB0144	SALMONELLA KIT IGG & IGM (QUALITATIVE)	PHP 1,600.00	LAB0296	C – OGCT – ORAL GLUCOUSE CHALLENGE TEST (50 GRAMS)	PHP 530.00
LAB0145	SEMEN ANALYSIS (WHO)	PHP 850.00	LAB0297	C – OGTT – ORAL GLUCOSE TOLERANCE TEST (100, 75, 50 GRAMS)	PHP 660.00
LAB0146	SODIUM (NA-)	PHP 140.00	LAB0298	C – H/H (HEMATOCRIT/HEMOGLOBIN)	PHP 125.00
LAB0147	STOOL C/S	PHP 1,500.00	LAB0299	C – FERRITIN	PHP 1,100.00
LAB0148	STOOL PH	PHP 300.00	LAB0300	C – PROCALCITONIN	PHP 5,040.00
LAB0149	T3 TRIIODOTHYRONINE (ECLIA)	PHP 430.00	LAB0301	C – TROPONIN I (HS)	PHP 1,950.00







20. PREPARASYON AT PAGBIBIGAY NG MGA SERTIPIKASYON (MEDICAL CERTIFICATE: CERTIFICATE OF CONFINEMENT, INPATIENT, OPD-EMERGENCY AND OUTPATIENT)

Proseso ng pagprepara at pagbibigay ng mga sertipikasyon sa mga pasyente na nagpakonsulta sa Emergency Department (ED) at Outpatient Department (OPD) at mga pasyente sa Nursing Ward ng Ospital ng Imus. Ang Sertipikasyon ay isang nakatitik na salaysay ng doktor na nagpapatunay ng resultang medikal ng isang pasyente. Ito ay nagsisilbing katunayan sa estado ng kalusugan ng pasyente kung ito ay maaari ng bumalik sa normal na pang araw-araw na gampanin.

OPISINA o DIBISYON				Information Management Department		
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON		G2C – Government to Citiz				
SINO ANG NANGANGAILANGAN NG SER		Pasyente o Awtorisadong k				
TSEKLIST NG KAILANGANG DOKUMENTO			Inalawan ng Pasyenle	SAAN MAKUKUH	٨	
		DIVIENTO			A	
Kung Pasyente: Government Issued ID o Valid ID			Dengesiween/Abanava	na Cabyarna na naghil		
			Pangasiwaan/ Ahensya		bigay ng valid iD	
Requisition Slip			Health Information Man	agement Department		
Kung Kinatawan ng Pasyente				0		
Government Issued ID o Valid ID ng Pasyer		ing dokumento na	Pangasiwaan/ Ahensya	ng Gobyerno na nagbit	bigay ng Valid ID	
magpapatunay ng pagkakakilanlan ng pasye		towar an Dooverto	Deserve and Albertain			
Government Issued ID o Valid ID ng Awtoris	sadong Kina	tawan ng Pasyente	Pangasiwaan/ Ahensya	ng Gobyerno na nagbir	bigay ng valid ID	
Authorization Letter			Pasyente			
Requisition Slip			Health Information Management Department			
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Punan ng impormasyon ang Requisition Slip.	1. Tangga	pin ang Requisition Slip.	Wala	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department	
dokumento sa pagkuha ng sertipikasyon.	dokumento	tin ang mga ipinakitang ng pasyente o kinatawan nan kung ito ay kumpleto.	Wala	4 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido	

CITIZEN'S CHARTER



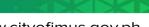
	Kung hindi kumpleto, ipaalam at ipaliwanag na kailangang makumpleto muna ang mga kailangang dokumento at impormasyon bago maaprubahan ang rekwesisyon.			Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	2.2 Tingnan sa Hospital Information System (HIS) at kuhanin ang medical chart ng pasyente upang masuri kung may kamalian sa pagtatala.	Wala	30 minuto	
	2.3 Isagawa at iimprenta ang hinihiling na sertipikasyon.	Wala	3 minuto	
	2.4 Kunin ang lagda ng doktor na tumingin sa pasyente sa ibabaw ng limbag na pangalan sa sertipikasyon. Kung wala ang doktor na tumingin sa pasyente, maaaring papirmahin ang doktor na tumitingin ng parehong sakit sa sertipikasyon.	Wala	5 minuto	
3. Sagutan ang dokumentong ibibigay ng Records Officer depende sa kung ano ang nirekwes na sertipikasyon.	3. Tanggapin at suriin ang mga kaukulang babayarin.	Wala	3 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department



4. Pumunta sa Cashier at magbayad ng kaukulang babayarin.	4. Bigyan ng instruksyon ang pasyente o awtorisadong kinatawan nito na pumunta sa kahera upang bayaran ang kaukulang babayarin.	PHP 75.00	2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
5. Ipakita ang opisyal na resibo, tanggapin ang sertipikasyon o sertipikadong rekord na hiniling at pumirma sa Releasing Logbook ng Health Information Management Department.	5. Tanggapin at suriin ang opisyal na resibo, ibigay ang sertipikasyon at papirmahin ang pasyente o kinatawan nito sa Releasing Logbook.	Wala	2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	Sagutan ang Client Satisfa	ction Rating Form		
	KABUUAN	PHP 75.00	50 MINUTO	







21. PREPARASYON AT PAGBIBIGAY NG MEDICO-LEGAL REPORT

Proseso ng pagprepara at pagbibigay ng Medico-Legal Report sa mga pasyente na nagpakonsulta sa Ospital ng Imus. Sa Medico-legal Report nakasaad ang kapinsalaang natamo sa isang aksidente o insidenteng naganap sa isang pasyente.

ang kapinsalaang natamo sa isang akside	ente o Inside				
OPISINA o DIBISYON		Ospital ng Imus – Health Informa	ation Management Depar	tment	
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citizens			
SINO ANG NANGANGAILANGAN NG		Pasyente o Awtorisadong Kinata	awan ng Pasyente		
SERBISYO					
TSEKLIST NG KAILANGANG DOKUMENTO				SAAN MAKUKUH	łA
Kung Pasyente					
Government Issued ID o Valid ID			Pangasiwaan/ Ahensya		bibigay ng Valid ID
Requisition Slip			Health Information Man	agement Department	
Philippine National Police (PNP) Reques	t		Philippine National Polic	ce	
Kung Kinatawan ng Pasyente					
Government Issued ID o Valid ID ng Pas		umang dokumento na	Pangasiwaan/ Ahensya	ng Gobyerno na nagl	bibigay ng Valid ID
magpapatunay ng pagkakakilanlan ng pa					
Government Issued ID o Valid ID ng Awt	orisadong K	Kinatawan ng Pasyente	Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay ng Valid ID		
Authorization Letter			Pasyente		
Requisition Slip			Health Information Management Department		
Philippine National Police (PNP) Reques			Philippine National Police		
HAKBANG NG KLIYENTE	Α	KSYON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Punan ng impormasyon ang Requisition Slip.	1. Tang	gapin ang Requisition Slip.	Wala	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
2. Ipakita at ibigay ang mga kailangang dokumento sa pagkuha ng sertipikasyon.	dokumento	satin ang mga ipinakitang o ng pasyente o kinatawan nito at ing ito ay kumpleto. Kung hindi	Wala	4 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido

CITIZEN'S CHARTER

	 kumpleto, ipaalam at ipaliwanag na kailangang makumpleto muna ang mga kailangang dokumento at impormasyon bago maaprubahan ang rekwesisyon. 2.2 Tingnan sa Hospital Information System (HIS) at kuhanin ang medical chart ng pasyente upang masuri kung may kamalian sa pagtatala. 	Wala	30 minuto	Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	2.3 Isagawa at iimprenta ang hinihiling na report.	Wala	3 minuto	
	2.4 Kunin ang lagda ng doktor na tumingin sa pasyente sa ibabaw ng limbag na pangalan sa sertipikasyon. Kung wala ang doktor na tumingin sa pasyente, kukuhanin ng Records Officer ang contact number ng pasyente na maaaring matawagan kapag napirmahan na ng doktor ang nasabing medico-legal report. Kung ang doktor ay kasalukuyang nakaduty sa ospital, papirmahin ang doktor na tumitingin ng parehong sakit sa sertipikasyon.	Wala	5 minuto	
3. Sagutan ang dokumentong ibibigay ng Records Officer depende sa kung ano ang nirekwes na sertipikasyon.	3. Tanggapin at suriin ang mga kaukulang babayarin.	Wala	3 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department

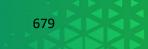




	Sagutan ang Client Satisfac KABUUAN	ction Rating Form PHP 100.00		Health Information Management Department
anggapin ang medico-legal report r niniling at pumirma sa Releasir _ogbook ng Health Informatic Management Department.	a resibo, ibigay ang medico-legal report at g papirmahin ang pasyente o kinatawan nito			Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban
4. Pumunta sa Cashier at magbayad r kaukulang babayarin. 5. Ipakita ang opisyal na resib	awtorisadong kinatawan nito na pumunta sa kahera upang bayaran ang kaukulang babayarin.	PHP 100.00 Wala	2 minuto 2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department Carolyn A. Lapidario







22. PREPARASYON AT PAGBIBIGAY NG SERTIPIKASYON NG KAPANGANAKAN O SERTIPIKASYON NG KAMATAYAN NG PASYENTE

Preparasyon at pagbibigay ng Sertipikasyon ng Kapanganakan sa mga sanggol na ipinanganak sa Ospital ng Imus at Sertipikasyon ng Kamatayan sa mga pasyente na namatay sa Ospital ng Imus.

	Ospital ng Imus – Hea	alth Information Manageme	ent Department		
	Simple				
	G2C – Government to	Citizens			
SERBISYO	Aworisadong Kinataw	an ng Pasyente			
GANG DOKUM	ENTO		SAAN MAKUKUHA		
Kapanganaka	n (Birth Certificate)				
Marriage Certificate (kung kasal ang mga magulang ng bata)					
lang ng bata)		Local government Unit –	Treasurer's Office; Barangay	' Hall	
		Health Information Manag	gement Department		
		Nursing Ward			
laling Pagtatala	at Pagpaparehistro	Health Information Manag	gement Department		
Kamatayan (E	eath Certificate):				
matay na Pasye	ente				
torisadong Kina	tawan ng Pasyente	Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay ng Valid ID			
		Emergency Department; Nursing Ward; Operating Room			
		Health Information Management Department			
		Health Information Management Department			
Ialing Pagtatala	a at Pagpaparehistro	Health Information Management Department			
AKSYON	NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Tanggapin ar	ng Requisition Slip.	Wala	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban	
	ANG DOKUM Kapanganaka a magulang ng ang ng bata) laling Pagtatala Kamatayan (D natay na Pasye orisadong Kina laling Pagtatala AKSYON	Simple G2C – Government to SERBISYO Aworisadong Kinataw SANG DOKUMENTO Kapanganakan (Birth Certificate) a magulang ng bata)	Simple G2C – Government to Citizens SERBISYO Aworisadong Kinatawan ng Pasyente SANG DOKUMENTO Kapanganakan (Birth Certificate) a magulang ng bata) Local Civil Registrar; Phil ang ng bata) Local government Unit – Health Information Manage Nursing Ward aling Pagtatala at Pagpaparehistro Health Information Manage Matay na Pasyente Pangasiwaan/ Ahensya ne orisadong Kinatawan ng Pasyente Pangasiwaan/ Ahensya ne orisadong Kinatawan ng Pasyente Pangasiwaan/ Ahensya ne Imatay na Pasyente Pangasiwaan/ Ahensya ne	G2C – Government to Citizens SERBISYO Aworisadong Kinatawan ng Pasyente SAAN MAKUKUHA SAAN MAKUKUHA Kapanganakan (Birth Certificate) a magulang ng bata) Local Civil Registrar; Philippine Statistics Authority ang ng bata) Local government Unit – Treasurer's Office; Barangay Health Information Management Department Nursing Ward Ialing Pagtatala at Pagpaparehistro Health Information Management Department Kamatayan (Death Certificate): Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay n natay na Pasyente Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay n orisadong Kinatawan ng Pasyente Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay n Emergency Department; Nursing Ward; Operating Ro Health Information Management Department Ialing Pagtatala at Pagpaparehistro Health Information Management Department Ialing Pagtatala at Pagpaparehistro Health Information Management Department Idaling Pagtatala at Pagpaparehistro Health Information Management Department Idaling Pagtatala at Pagpaparehistro Health Information Management Department Idaling Pagtatala at Pagpaparehistro Health Information Management Department </td	

CITIZEN'S CHARTER

2. Ipakita at ibigay ang mga kailangang dokumento sa pagkuha ng sertipikasyon.	2. Siyasatin ang mga ipinakitang dokumento ng pasyente o kinatawan nito at tingnan kung ito ay kumpleto. Kung hindi kumpleto, ipaalam at ipaliwanag na kailangang makumpleto muna ang mga kailangang dokumento at impormasyon bago maaprubahan ang rekwesisyon.	Wala	4 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
3. Sagutan ang dokumentong ibibigay ng Records Officer depende sa kung ano ang nirekwes na sertipikasyon.	 3.1 Para sa sertipikasyon ng kapanganakan, pasagutan ang Newborn Data Sheet kung saan nakasaad ang mga detalye na ipapalagay ng magulang sa sertipikasyon ng kapanganakan ng kanilang anak. Para sa sertipikasyon ng kamatayan, pasagutan sa pinakamalapit na kamag-anak ng namatay na pasyente ang Information Sheet for Death. 	Wala	5 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	3.2 Siyasatin ang mga impormasyon na sinulat ng kinatawan ng pasyente.	Wala	2 minuto	
	3.3 Kuhanin ang medical chart ng pasyente at kumpirmahin kung tama ang nakasaad na detalye.	Wala	7 minuto	
	3.4 Ilagay ang mga importanteng detalye sa sertipikasyon at mag- imprenta ng kopya nito.	Wala	5 minuto	





4. Suriing mabuti kung tama ang mga detalye na nakasaad sa sertipikasyon.	4. Ipakita sa kinatawan ng pasyente ang naimprentang kopya para sa huling pagrerepaso ng detalye na nakasaad sa nasabing sertipikasyon.	Wala	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
5. Pirmahan ang Pagpapalaya ng Pananagutan sa mga Maling Pagtatala at Pagpaparehistro (Kapanganakan) o Pagpapalaya ng Pananagutan sa mga Maling Pagtatala at Pagrerehistro (Kamatayan) bilang katunayan na nasuring mabuti ang sertipikasyon bago maimprenta ng Records Officer.	lagda ng kinatawan ng pasyente at papirmahin ito sa Pagpapalaya ng Pananagutan sa mga Maling	Wala	*2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	5.2 Papirmahin ang doktor sa Birth Certificate/ Death Certificate form.	Wala	*5 minuto	
	5.2 Itala sa Hospital Information System (HIS) ang kaukulang babayarin at ibigay sa kinatawan ng pasyente ang kaukulang babayarin.	Wala	3 minuto	
6. Pumunta sa Cashier upang magbayad ng kaukulang babayarin.		PHP 100.00	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano



	KABUUAN	PHP 100.00	*43 minuto	
		Satisfaction Rating Form		
	ang kinatawan ng pasyente.			Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
8. Tanggapin ang sertipikasyon at pumirma sa Releasing Logbook.	8. Ibigay ang sertipikasyon at papirmahin sa Releasing Logbook	Wala	2 minuto	Carolyn A. Lapidario Maria Christina O.
7. Ibigay ang opisyal na resibo, makinig at intindihin ang mga tagubilin o panuto.	7. Suriin ang opisyal na resibo at magbigay ng mga tagubilin tungkol sa tamang paproseso ng sertipikasyong nirekwes.	Wala	5 minuto	Health Information Management Department Records Officer II Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
				Jicel Kamil I. Saliente Robin G. Montalban







23. PREPARASYON AT PAGBIBIGAY NG SERTIPIKADONG KOPYA NG REKORD

Preparasyon at pagbibigay ng sertipikadong kopya ng rekord sa mga pasyente ng Ospital ng Imus. Ang sertipikadong kopya ng rekord ng pasyente ay binibigay pagkatapos ng kanilang rekwesisyon ng may pirma sa isinatitik na pangalan ng personel ng departamento ng rekords na nagpapatunay ng tamang detalyeng nakasaad sa bawat rekords.

detaiyeng nakasaad sa bawat rekords.						
OPISINA o DIBISYON Ospital ng Imus – H			alth Information Managemer	nt Department		
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON		G2C – Government to	o Citizens			
SINO ANG NANGANGAILANGAN NO	SERBISYO	Pasyente o Awtorisac	long Kinatawan ng Pasyente	9		
TSEKLIST NG KAILAN	GANG DOKUN	IENTO		SAAN MAKUKUH	4	
Kung Pasyente						
Government Issued ID o Valid ID		Pangasiwaan/ Ahensya ng	Gobyerno na nagbibigay	/ ng Valid ID		
Requisition Slip			Health Information Manage	ement Department		
Kung Kinatawan ng Pasyente						
Government Issued ID o Valid ID ng Pa	asyente o Anun	nang dokumento na	Panagsiwaan/ Ahensya ng	Gobyerno na nagbibigay	/ ng Valid ID	
magpapatunay ng pagkakakilanlan ng						
Government Issued ID o Valid ID ng Av	wtorisadong Kir	natawan ng Pasyente	Panagsiwaan/ Ahensya ng	Gobyerno na nagbibigay	/ ng Valid ID	
Authorization Letter			Pasyente			
Requisition Slip			Health Information Management Department			
HAKBANG NG KLIYENTE	AKSYON	ING AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Punan ng impormasyon ang Requisition Slip.	1. Tanggapir	ang Requisition Slip.	Wala	1 minuto	Carolyn A. Lapidario Maria Christina O. Mancenid Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department	
 Ipakita at ibigay ang mga kailangang dokumento sa pagkuha ng sertipikasyon. 	dokumento kinatawan nito kumpleto. Ku ipaalam at	akumpleto muna ang	Wala	4 minuto	Carolyn A. Lapidario Maria Christina O. Mancenid Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano	

CITIZEN'S CHARTER

	mga kailangang dokumento at impormasyon bago maaprubahan ang rekwesisyon.			Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
	2.2 Tingnan sa Hospital Information System (HIS) at kuhanin ang medical chart ng pasyente upang masuri kung may kamalian sa pagtatala, kung hindi kumpleto ang medical chart ng pasyente, kukuhanin ng Records Officer ang contact number ng pasyente na maaaring matawagan kapag kumpleto na at maaari nang mag- imprenta ng sertipikadong kopya ng record.	Wala	30 minuto	
	2.3 Isagawa at iimprenta ang hinihiling na sertipikadong kopya ng rekord batay sa dami ng rekwesisyon.	Wala	3 minuto	
	2.4 Tatakan ng Certified True Copy ang kopya ng rekord at papirmahan sa Records Officer ang nasabing kopya.	Wala	5 minuto	
3. Sagutan ang dokumentong ibibigay ng Records Officer depende sa kung ano ang nirekwes na sertipikasyon.		Wala	3 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department





4. Pumunta sa Cashier at magbayad ng kaukulang babayarin.	4. Bigyan ng instruksyon ang pasyente o awtorisadong kinatawan nito na pumunta sa kahera upang bayaran ang kaukulang babayarin.	Tingnan sa Ibaba	2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
5. Ipakita ang opisyal na resibo, tanggapin ang sertipikasyon o sertipikadong rekord na hiniling at pumirma sa Releasing Logbook ng Health Information Management Department.	5. Tanggapin at suriin ang opisyal na resibo, ibigay ang sertipikadong kopya ng rekord at papirmahin ang pasyente o kinatawan nito sa Releasing Logbook.	Wala	2 minuto	Carolyn A. Lapidario Maria Christina O. Mancenido Aldwin N. Dela Fuente John Mervyn P. Gamayon Kyle A. Ramos Ismhael S. Ilano Jicel Kamil I. Saliente Robin G. Montalban Health Information Management Department
		t Satisfaction Rating Form		
	KABUUAN	Tingnan sa Ibaba	50 MINUTO	

Kaukulang halaga ng Babayaran para sa Sertipikadong Kopya:

Taong nakalipas	Halaga
Dalawang (2) taong nakalipas	PHP 50.00
Tatlo (3) hanggang limang (5) taong nakalipas	PHP 100.00
Anim (6) hanggang walong (8) taong nakalipas	PHP 125.00
Siyam (9) hanggang mahigit sampung (10) taong nakalipas	PHP 150.00
Seripikadong Kopya (Bawat piraso)	PHP 30.00







24. MGA HAKBANG NA SUSUNDIN SA PAGHINGI NG TULONG

Ang Medical Social Service ay responsable sa pagbibigay ng angkop na serbisyo sa mga pasyenteng nangangailangan ng medikal at pinansyal na tulong. Ang layunin ng Medical Social Service ay matulungan ang mga pasyente na magkaroon ng kakayahan na matugunan ang kanilang pinansyal at medikal na pangangailangan patungo sa kanilang kagalingan.

banyanyananyan palunyo sa kanilany	Kagainiyan.				
OPISINA o DIBISYON Ospital ng Imus – Medical			Social Services Departm	ent	
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citize	ens		
SINO ANG NANGANGAILANGAN N	IG SERBISYO	Lahat ng Karapat-dapat na	Residente ng Imus na na	akaadmit sa Ospital ng	g Imus
TSEKLIST NG KAI	UMENTO		SAAN MAKUKU	IHA	
Prescription Pad / Request Slip		Prescribing Doctor			
Charge Slip			Ancillary Department		
Statement of Account			Billing Section		
Medical Certificate / Medical Abstract	or Discharge Su	mmary	Medical Records Depa	rtment	
Barangay Certificate			Barangay		
Voter's Certificate			Local Government Unit	-	
Utility Bills			Pribadong Ahensya na		
HAKBANG NG KLIYENTE	AKSY	ON NG AHENSYA	HALAGA NG	TAGAL NG	TAONG NAKATALAGA
			BABAYARAN	AKTIBIDAD	
1. Pumila at maghintay ng tawag		magsagawa ng panayam	Wala	35 minuto	Social Welfare Officer I
para sa pagsasagawa ng panayam		ang klasipikasyon ng			Medical Social Services
at masuri ng Social Welfare Officer.	pasyente.				Department
2. Para sa OPD/ED na Pasyente:		riin ang mga dokumento na	Wala	35 minuto	Social Welfare Officer I
Ipakita ang reseta/request na may	kailangan upan	g maiproseso ang mga ito.			Medical Social Services
kaukulang presyo o charge slip.					Department
		_			
Para sa In-Patient: Ipakita ang mga		a pasyente kung ano ang	Wala	19 minuto	
kaukulang dokumento na hinihingi		pagsusuri at panayam.			
ng Social Welfare Officer. Kung ang					
pasyente ay pauwi na, ipakita ang					
kopya ng Statement of Account.					
3. Pumunta sa kahera upang		ang pasyente o kamag-anak	Wala	1 minuto	Social Welfare Officer I
bayaran ang mga kaukulang		ier upang bayaran ang			Medical Social Services
babayarin.	kaukulang baba				Department
		Sagutan ang Client Satis			
		KABUUAN	Wala	90 minuto	





25. PROSESO NG PAG-ADMIT NG PASYENTE SA NURSING WARD

Ang Nursing Ward ay responsable sa pagtanggap ng pasyente mula sa Emergency Department at Outpatient Department, paghahatid ng maalaga at maayos na serbisyo sa pasyente hanggang sa makalabas ito ng ospital.

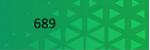
na serbisyo sa pasyente nanggang sa mai	งลเลมสร แบ กบุ	j ospital.			
OPISINA o DIBISYON Ospital ng Imus – Nursing V			Vard		
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2C – Government to Citize	ens		
SINO ANG NANGANGAILANGAN NG S	SERBISYO	Lahat ng Naka-admit na Pa	syente		
TSEKLIST NG KAILANGANG DOKUMENTO				SAAN MAKUKUH	Α
Patient Data Sheet			Admitting Department		
Admitting Form			Admitting Department		
Patient Informed Consent			Admitting Department		
Emergency Patient Data Sheet			Emergency Department		
HAKBANG NG KLIYENTE AKSYON NG AHENSYA			HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Alamin kung anong numero ng kwarto ang inilaan para sa pasyente.	Department Nursing W Nurse ay	tauhan ng Admitting t ay ipapaalam sa Nurse sa /ard ang admisyon. Ang maglalaan ng numero ng paglalagyan ng pasyente sipikasyon.	Wala	2 minuto	Administrative Officer I Clerk III Admitting Department
	mula sa Department pasyente, m	Nurse sa Ward ay gap ng paunang tawag Nurse sa Emergency t para sa admisyon (kaso ng nga nakakabit at kagamitang kailangan ng pasyente).	Wala	2 minuto	Nurse I Nursing Service Department
		a ang kwarto at gamit na nin ng pasyente.	Wala	5 minuto	Nurse I Midwife I
	mula sa Department	Nurse sa Ward ay gap ng pangalawang tawag Nurse sa Emergency t kung ang kwarto ay handa ri ng dalhin ang pasyente.	Wala	2 minuto	Nurse I Nursing Service Department

CITIZEN'S CHARTER

2. Tumungo sa inilaang kwarto ng Admitting Department Personnel.	2. Ang Nurse sa Emergency Department ay maglilipat ng pasyente sa Nursing Ward.	Wala	5 minuto	Nurse I Nursing Service Department
3. Makinig sa mga gabay na ipapaliwanag ng Nurse patungkol sa diet ng pasyente at anumang pamamaraan ng pagsusuri.	kwarto kasama ang pasyente para	Wala	5 minuto	Nurse I Nursing Service Department
	3.2 Ang Nurse sa Emergency Department ay ibibilin ang pasyente sa Ward Nurse on duty para sa patuloy na pangangalaga.	Wala	10 minuto	
	Sagutan ang Client Satisf	action Rating Form		
	KABUUAN	Wala	31 minuto	







26. PAGDISCHARGE NG PASYENTE SA NURSING WARD

Ang Nursing Ward ay responsable sa pagpapalabas ng naka-admit na pasyente pagkatapos mabigyan ng karampatang lunas at makitaan ng senyales na maaari na itong makauwi.

naaan na ilong makauwi.					
OPISINA o DIBISYON Ospital ng Imus – Nursing			Ward		
KLASIPIKASYON Simple					
URI NG TRANSAKSYON G2C – Government to Citi			zens		
SINO ANG NANGANGAILANGAN NG SERBISYO Lahat ng pauuwiin na pas			yente		
TSEKLIST NG KAIL	ANGANG DOKL	JMENTO		SAAN MAKUK	UHA
Patient Discharge Slip			Nursing Ward		
Professional Fee Form			Admitting Department		
Patient Satisfaction Survey (Inpatient)			Nursing Ward		
Patient's Clearance Form			Cash Operations Depa	artment; Billing Sectio	n
Statement of Account			Billing Section		
HAKBANG NG KLIYENTE	AKSYC	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Ang pasyente o kamag anak ay maghanda sa pag-uwi.	 1.1 Ang doktor ay magbibigay ng instruksyon sa mga dapat sundin sa pag-uwi ng pasyente. 1.2 Ang Nurse sa Ward ay magpapaalam sa iba pang doktor kung maaari ng umuwi ang pasyente at kung may mga pahuling bilin. 		Wala	5 minuto	Medical Officer III Medical Specialist I Medical Specialist II Medical Department
			Wala	15 minuto	Nurse I Nursing Service Department
	nagamit at ibalik	alamin ang lahat ng mga ang mga hindi nagamit na nacy Department at ihanda charge Slip.	Wala	15 minuto	
Information home (MGH)		y pasyente sa Hospital ystem (HIS) ng may-go- clearance at tawagan ang rtamento na nagbigay ng syente.	Wala	5 minuto	

CITIZEN'S CHARTER

	1.5 Kapag ang pasyente ay naklaro na sa ibang departamento, ang Nurse sa Ward ay i-tatag ang pasyente para sa pag uwi.	Wala	1 minuto	
	1.6 Tumawag sa Billing Section kung ang pasyente ay maaari ng pauwiin.	Wala	1 minuto	
2. Tumungo sa Billing Section para ibigay ang Patient Discharge Slip kasama ang Professional Fee Form.	2. Ibigay ang Patient Discharge Slip kasama ang Professional Fee Form sa kamag-anak ng pasyente at ituro kung nasaan ang Billing Section.	Wala	1 minuto	Nurse I Nursing Service Department
3. Ang pasyente o kamag-anak ay sasagutan ang Patient Satisfaction Survey (Inpatient) at ihulog sa kahon.		Wala	1 minuto	Nurse I Nursing Service Department
4. Pumunta sa Benefits Section at Cashier.	4. Utusan ang kamag-anak ng pasyente na tumungo sa Benefits Section para sa Philhealth coverage at magbayad sa Cashier.	Depende sa kaukulang babayarin	5 minuto	Nurse I Nursing Service Department
5. Makinig sa instruksyon na ituturo ng Nurse sa Ward at magtanong kung kinakailangan.	5.1 Kapag ang pasyente o kamag-anak ay nakabayad na ng kaukulang babayarin, ang magtuturo ng instruksyon sa pasyente o kamag-anak at tanggalin ang anumang nakakabit na gamit.	Wala	5 minuto	Nurse I Nursing Service Department
	5.2 Ipaalam sa pasyente o kamag-anak nito kung saan dadalhin ang Patient Discharge Slip at Patient's Clearance Form bago umuwi.	Wala	1 minuto	
6. Maghanda para sa pag-uwi.	6. Kumpletuhin ang lahat ng dokumento ng pasyente.	Wala	5 minuto	Nurse I Nursing Service Department
	KABUUAN	Depende sa kaukulang babayarin	1 oras	



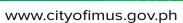


27. KONSULTASYON SA OUTPATIENT DEPARTMENT

Ang Out Patient Department ay nagbibigay ng libreng kalidad na konsultasyon (OB-Gyne, Internal Medicine, Surgery, Pediatrics) sa lahat ng mga pasyenteng nangangailangan ng serbisyong medikal.

OPISINA o DIBISYON Ospital ng Imus – Outpatie			ot Dopartmont			
KLASIPIKASYON		Simple	ng Imus – Outpatient Department			
URI NG TRANSAKSYON		G2C – Government to Citiz	<u></u>			
			ens			
SINO ANG NANGANGAILANGAN NG SERBISYO Lahat						
TSEKLIST NG KAILANGANG DOKUMENTO						
Government Issued ID o Valid ID			Pangasiwaan/ Ahensy		gbibigay ng Valid ID	
Philhealth ID			PhilHealth - Local Hea			
HAKBANG NG KLIYENTE	AKSY	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Maupo sa OPD waiting area at ihanda ang Hospital ID upang mabilis na mahanap ang OPD Chart. Para sa bagong pasyente, sagutan ang mga detalyeng hinihingi sa Out Patient Record	1. Paupuin kanilang oras		Wala	1 minuto	Security Guard on Duty Security Department	
2. Maghintay na tawagin ang numero para sa "screening" o "triaging".	Record aye kinabibilangai lumang cha magbigay ng para sa mga ang pangalar ng pasyente System (HI	g numero ang Out Patient on sa departamentong n ng pasyente. Hanapin ang rt ng mga pasyente at "Outpatient Record Form" bagong pasyente. Irehistro n at iba pang impormasyon sa Hospital Information S). Bigyan ng Patient Slip ang lahat ng bagong		10 minuto	Administrative Officer II Clerk I Nurse I	
3. Maghintay ng tawag para sa "vital signs" (blood pressure, pulse rate, respiratory rate, temperature, O2 sat) timbang at taas.	timbangin, si	ng pangalan ng pasyente at ukatin ang taas o height, nan ng blood pressure.	Wala	6 minuto	Administrative Officer II Clerk I Nurse I	
4. Maupo sa labas ng klinika pagkatapos tawagin sa mikropono ang pangalan.		g Out Patient Record sa saan magpapakonsulta ang		5 minuto	Nurse I Nursing Services Departmer	

CITIZEN'S CHARTER



				Medical Record Officer Health Information Management Department Administrative Officer II Clerk I
5. Kumonsulta sa doktor.	5. Isagawa ang konsultasyon.	Wala	20 minutuo	Medical Officer III Medical Specialist I Medical Specialist II Medical Department
ang order ng doktor o reseta at magpalista para sa susunod na	6. Gabayan ang pasyente sa mga order ng doktor, bigyan ng skedyul ang pasyente ng "follow-up" at kolektahin lahat ng OPD Chart sa mga klinika.	Wala	5 minuto	Nurse I Nursing Services Department Administrative Officer II Clerk
	Sagutan ang Client Satisfa KABUUAN	action Rating Form Wala	47 minuto	







28. PROSESO NG PAGBIBIGAY NG GAMOT SA OUTPATIENT

Ang proseso ng pagbibigay ng gamot sa Outpatient ay ang pagbibigay ng tamang kailangang gamot ng pasyente. Ang pagbili ng gamot ay nangangailangan ng tamang proseso para maibigay ng maayos ang serbisyo.

OPISINA o DIBISYON	Ospital ng Imus – Pharmacy	Department		
KLASIPIKASYON	G2C - Government to Citize	ns		
URI NG TRANSAKSYON	Simple			
SINO ANG NANGANGAILANGAN NO	G SERBISYO Lahat			
TSEKLIST NG KAIL	ANGANG DOKUMENTO		SAAN MAKUKU	JHA
Prescription Pad		Outpatient Department		
HAKBANG NG KLIYENTE	AKSYON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
. Ipakita sa Pharmacist na 1.1 Basahin at suriin ang detalye sa akaduty ang reseta na binigay ng reseta at beripikahin kung mayroong stock ng gamot.		Wala	2 minuto	Pharmacist I Pharmacist II Pharmacy Department
	1.2 Ayusin ang lahat ng babayaran sa Hospital Information System (HIS), iprint ang charge slip at ibigay sa pasyente upang bayaran sa Cashier.	Wala	6 minuto	
2. Pumunta sa Cashier at bayaran sa kahera ang kaukulang babayaran.	2.1 Tanggapin ang bayad ng pasyente at itala sa Hospital Information System (HIS).	Tingnan sa ibaba	5 minuto	Cashier I Cash and Operations Department
	2.2 layos ang gamot na binili ng pasyente.	Wala	(5 minuto)	Pharmacist I Pharmacist II Pharmacy Department
3. Bumalik sa Pharmacy Department at ipakita ang resibo kalakip ng charge slip.	resibo at ibigay ang gamot sa pasyente o kamag-anak nito.	Wala	2 minuto	Pharmacist I Pharmacist II Pharmacy Department
	Sagutan ang Client Satis	action Rating Form		
	KABUUAN	Tingnan sa ibaba	15 minuto	







29. PROSESO NG PAGBIBIGAY NG GAMOT SA MGA PASYENTE SA EMERGENCY DEPARTMENT

Ang proseso ng pagbibigay ng gamot sa pasyente na nasa Emergency Department ay ang pagbibigay ng tamang kailangang gamot ng pasyente. Ang pagbili ng gamot ay nangangailangan ng tamang proseso para maibigay ng maayos ang serbisyo.

Jaybill fly garllot ay hangangallangan i	ig tamang proses	so para maibiyay ny maayos	ang serbisyo.		
OPISINA o DIBISYON Ospital ng Imus – Pharmacy		/ Department			
KLASIPIKASYON		G2G – Government to Gove	ernment		
URI NG TRANSAKSYON Simple					
SINO ANG NANGANGAILANGAN N	G SERBISYO	Lahat			
TSEKLIST NG KAILANGANG DOKUMENTO				SAAN MAKUKU	JHA
Prescription Pad			Emergency Departmen	t	
HAKBANG NG KLIYENTE	AKSY	AKSYON NG AHENSYA		TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Ibigay ang Prescription Pad ng gamot at ipasok sa Hospital Information System (HIS) upang malaman ng Pharmacist on Duty.	1. Basahin at suriin ang detalye sa Prescription Pad at beripikahin kung mayroong stock ng gamot.		Depende sa presyo ng gamot	5 minuto	Pharmacist I Pharmacist II Pharmacy Department
2. Tanggapin at siyasatin kung tama ang naibigay na gamot.	2. Kung mayroong stock ng gamot, ibigay ito sa Nurse on duty.		Wala	1 minuto	Pharmacist I Pharmacist II Pharmacy Department
 Ipasok sa Hospital Information System ang nakuhang gamot sa Pharmacy. 	3. Ipost sa Hospital Information System ang gamot na nakuha para maidagdag sa bill ng pasyente.		Tingnan sa ibaba	1 minuto	Pharmacist I Pharmacist II Pharmacy Department
 Pumunta sa Cashier upang magbayad. 	4. Papuntahin ang pasyente o kamag- anak ng pasyente sa kahera upang magbayad para sa mga nagamit na gamot.		Wala	2 minuto	Nurse on Duty
		Sagutan ang Client Satis	faction Rating Form		
		KABUUAN	Tingnan sa ibaba	10 minuto	







30. PROSESO NG PAGBIBIGAY NG GAMOT SA INPATIENT

Ang proseso ng pagbibigay ng gamot sa Inpatient ay ang pagbibigay ng tamang kailangang gamot ng pasyente. Ang pagbili ng gamot ay nangangailangan ng tamang proseso para maibigay ng maayos ang serbisyo.

ng tamang process para maloigay ng m	lady of any of bio	5,01			
OPISINA o DIBISYON Ospital ng Imus – Pharmad			Department		
KLASIPIKASYON		G2C - Government to Citize	n; G2G – Government to	Government	
URI NG TRANSAKSYON Simple					
SINO ANG NANGANGAILANGAN NO	G SERBISYO	Lahat			
TSEKLIST NG KAIL	ANGANG DOKL	JMENTO		SAAN MAKUKI	JHA
Wala			N/A		
HAKBANG NG KLIYENTE	AKSYC	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Magrequest ng gamot na kailangan ng pasyente sa Hospital Information System (HIS).	1.1 Basahin at suriin ang detalye na nirequest sa Hospital Information System at beripikahin kung mayroong stock ng gamot.		Wala	2 minuto	Pharmacist I Pharmacist II Pharmacy Department
	1.2 Irender a Ihanda ang pasyente.	at iprint ang charge slip. kailangang gamot ng	Tingnan sa ibaba	5 minuto	
2. Tanggapin at siyasatin kung tama ang naibigay na gamot at pangalan ng pasyente. Kung tama, pirmahan ang charge slip at ibalik sa Pharmacist on Duty.	2. Ibigay an Nurse on Duty.	g nakahandang gamot sa	Wala	5 minuto	Pharmacist I Pharmacist II Pharmacy Department
	•	Sagutan ang Client Satis	faction Rating Form		
		KABUUAN	Tingnan sa ibaba	12 minuto	







Item ID	Pangalan ng Gamot	Halaga	Item ID	Pangalan ng Gamot	Halaga
MED0001	AMLODIPINE BESYLATE 5MG TABLET	PHP 1.00	MED0292	ERYTHROMYCIN ETHYL SUCCINATE 200MG/5ML, POWDER SUSPENSION 60ML	PHP 62.00
MED0002	AMLODIPINE BESYLATE 10MG TABLET	PHP 1.00	MED0293	ESMOLOL 10MG/ML 10ML VIAL	PHP 1,320.00
MED0003	AMOXICILLIN TRIHYDRATE 250MG/ML SUSPENSION, 60ML	PHP 24.00	MED0294	FERROUS SULFATE ELEMENTAL IRON 75MG/0.6ML ORAL DROPS BOTTLE 15ML	PHP 24.00
MED0004	AMOXICILLIN TRIHYDRATE 500MG CAPSULE	PHP 2.00	MED0295	FERROUS SULFATE ELEMENTAL IRON 150MG/5ML SYRUP BOTTLE 60ML	PHP 24.00
MED0006	ASCORBIC ACID 500MG TABLET	PHP 1.00	MED0296	FERROUS SULFATE+FOLIC ACID 60MG/400MCG,BLISTER PACK CAPSULE	PHP 1.00
MED0007	ASPIRIN 80MG TABLET	PHP 2.00	MED0297	GLICLAZIDE 30MG TABLET	PHP 4.00
MED0008	ATENOLOL 50MG TABLET	PHP 2.00	MED0298	HEPARIN 1,000IU/ML, 5ML VIAL	PHP 83.00
MED0009	ATORVASTATIN CALCIUM 40MG TABLET	PHP 13.00	MED0299	HEPATITIS B PEDIA VIAL	PHP 197.00
MED0010	AZITHROMYCIN 500MG TABLET	PHP 20.00	MED0300	HUMAN REGULAR INSULIN 100IU/ML VIAL 10ML	PHP 229.00
MED0011	BETAHISTINE HCL 16MG TABLET	PHP 18.00	MED0301	HYPROMELLOSE 10MG/ML EYE DROPS SOLUTION BOTTLE 10ML	PHP 258.00
MED0012	BISACODYL 5MG TABLET	PHP 2.00	MED0302	IBUPROFEN 200MG/5ML SUSPENSION 60ML	PHP 105.00
MED0013	BUDESONIDE 250MCG/ML NEBULE	PHP 39.00	MED0303	INSULIN70/30 VIAL	PHP 208.00
MED0014	BUTAMIRATE CITRATE 50 MG TABLET	PHP 18.00	MED0305	ISOSORBIDE DINITRATE 1MG/ML AMPULE 10ML	PHP 588.00
MED0015	CAPTOPRIL 25MG TABLET	PHP 1.00	MED0306	ISOSORBIDE MONONITRATE 60MG BLISTER PACK TABLET	PHP 9.00
MED0017	CEFALEXIN 500MG CAPSULE	PHP 3.00	MED0307	LACTULOSE 3.3GRAMS/5ML SYRUP 120ML	PHP 96.00
MED0018	CEFIXIME 100MG/5ML SUSPENSION, 60ML	PHP 222.00	MED0308	LEVOFLOXACIN 5MG/ML 100ML VIAL	PHP 235.00





MED0019	CEFIXIME 20MG/ML DROPS, 10ML	PHP 208.00	MED0309 LIDOCAINE HCL 2% PLASTIC 5ML TWIST		PHP 17.00
MED0022	CEFUROXIME 500MG TABLET	PHP 13.00	MED0310	LOPERAMIDE 2MG CAPSULE	PHP 1.00
MED0023	CELECOXIB 200MG CAPSULE	PHP 6.00	MED0311	LOSARTAN POTASSIUM + HCTZ 50MG/12.5MG BLISTER PACK TABLET	PHP 2.00
MED0025	CHLORAMPHENICOL 500MG CAPSULE	PHP 3.00	MED0312	MEBENDAZOLE 100MG/5ML SUSPENSION 60ML	PHP 21.00
MED0026	CIPROFLOXACIN 500MG TABLET	PHP 2.00	MED0313	MEROPENEM 1G VIAL	PHP 251.00
MED0031	CLINDAMYCIN 150MG CAP	PHP 4.00	MED0314	MONTELUKAST 10MG BLISTER PACK TABLET	PHP 13.00
MED0032	CLINDAMYCIN 300MG CAP	PHP 8.00	MED0315	MULTIVITAMINS DROPS 15ML	PHP 25.00
MED0034	CLONIDINE 75MCG TABLET	PHP 8.00	MED0316	MULTIVITAMINS SYRUP 60ML	PHP 26.00
MED0035	CLOPIDOGREL 75MG TABLET	PHP 3.00	MED0317	NALOXONE 400MCG/ML 1ML AMPULE	PHP 440.00
MED0036	COTRIMOXAZOLE 800MG/160MG CAPSULE	PHP 2.00	MED0318	NOREPINEPHRINE BITARTRATE 1MG/ML AMPULE 2ML	PHP 156.00
MED0037	CO-AMOXICLAV 625MG TABLET	PHP 12.00	MED0319	OFLOXACIN 200MG TABLET	PHP 7.00
MED0040	DICLOFENAC NA 50MG TAB	PHP 1.00	MED0320	PARACETAMOL 10MG /ML, 100ML VIAL	PHP 226.00
MED0041	DIPHENHYDRAMINE HCL 50MG/ML AMP	PHP 40.00	MED0321	PHYTOMENADIONE 2MG/0.2ML AMPULE	PHP 29.00
MED0042	DIPHENHYDRAMINE HCL 50MG CAPSULE	PHP 2.00	MED0322	PREDNISONE 10MG/5ML SUSPENSION 60ML	PHP 147.00
MED0044	EPINEPHRINE HCL 1MG/ML AMP	PHP 43.00	MED0323	SALBUTAMOL SULFATE 2MG/5ML SYRUP 60ML	PHP 17.00
MED0046	FERROUS SULFATE TABLET 325MG	PHP 5.00	MED0325	SILVER SULFADIAZINE 15GRAMS	PHP 104.00
MED0050	FOLIC ACID TABLET 5MG CAPSULE	PHP 4.00	MED0326	SILVER SULFADIAZINE 500G JAR	PHP 1,105.00
MED0051	FUROSEMIDE 20MG TABLET	PHP 2.00	MED0327	SIMVASTATIN 40MG BLISTER PACK TABLET	PHP 4.00
MED0052	FUROSEMIDE 40MG TABLET	PHP 3.00	MED0328	SPIRONOLACTONE 25MG BLISTER PACK TABLET	PHP 13.00

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MED0053	FUROSEMIDE 20MG/2ML AMP	PHP 9.00	MED0329	TOBRAMYCIN + DEXAMETHASONE EYE DROPS SOLUTION BOTTLE 5ML	PHP 221.00
MED0054	GENTAMYCIN SO4 80MG/2ML AMP	PHP 6.00	MED0330	TOBRAMYCIN 0.3% EYE DROPS SOLUTION BOTTLE 5ML	PHP 251.00
MED0055	GLICLAZIDE 80MG TABLET	PHP 3.00	MED0331	TRAMADOL HCL 50MG/ML, 2ML AMP	PHP 10.00
MED0056	HYDROCORTISONE 100MG VIAL	PHP 32.00	MED0332	TRIMETAZIDINE 35MG BLISTER PACK TABLET	PHP 12.00
MED0057	HYOSCINE N-BUTYLBROMIDE 10MG TABLET	PHP 8.00	MED0333	VANCOMYCIN 500MG VIAL	PHP 213.00
MED0058	HYOSCINE N-BUTYLBROMIDE 20MG/ML AMPULE	PHP 38.00	MED0334	VERAPAMIL 2.5MG/ML 2ML AMPULE	PHP 197.00
MED0059	IBUPROFEN 400MG TABLET	PHP 2.00	MED0335	ZINC SULFATE MONOHYDRATE DROPS 15ML	PHP 51.00
MED0060	IPRATROPIUM+SALBUTAMOL NEB	PHP 13.00	MED0336	ZINC SULFATE MONOHYDRATE SYRUP 60ML	PHP 56.00
MED0061	ISOXSUPRINE HCL 10MG TABLET	PHP 7.00	MED0337	CETIRIZINE 10MG/ML DROPS 10ML	PHP 101.00
MED0066	LOSARTAN 50MG TABLET	PHP 1.00	MED0338	DOMPERIDONE 10MG TABLET	PHP 2.00
MED0067	LOSARTAN 100MG TABLET	PHP 3.00	MED0339	NIFEDIPINE 10MG SOFTGEL CAPSULE	PHP 4.00
MED0068	MEFENAMIC ACID 500MG CAPSULE	PHP 1.00	MED0340	AMOXICILLIN TRIHYDRATE 100MG/ML DROPS, 15ML	PHP 25.00
MED0069	METFORMIN HCL 850MG TABLET	PHP 5.00	MED0341	D5 IMB 500ML PLASTIC BOTTLE	PHP 63.00
MED0070	METFORMIN HCL 500MG TABLET	PHP 1.00	MED0342	PLAIN NSS 500ML	PHP 58.00
MED0071	METHYLDOPA 250MG TABLET	PHP 10.00	MED0343	HYDROXY ETHYL STARCH 6% 500ML - VOLUVEN	PHP 630.00
MED0073	METHYLPREDNISOLONE 4MG TABLET	PHP 7.00	MED0344	ISONIAZID + RIFAMPICIN + PYRAZINAMIDE + ETHAMBUTOL (FIXCOM 4 TABLET)	PHP 8.00

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MED0074	METOCLOPRAMIDE 5MG/ML 2ML AMPULE	PHP 5.00	MED0345	SUCRALFATE - ISELPIN 1G TAB	PHP 39.00
MED0075	METOCLOPRAMIDE 10MG TABLET	PHP 3.00	MED0346	CLINDAMYCIN 600 MG/AMP 4ML	PHP 105.00
MED0076	METOPROLOL 100MG TABLET	PHP 2.00	MED0347	CEFIXIME - TERGECEF 400MG	PHP 56.00
MED0077	METOPROLOL 50MG TABLET	PHP 1.00	MED0348	INSULIN REGULAR - HUMULIN R VIAL INSULIN REGULAR	PHP 208.00
MED0079	METRONIDAZOLE 500MG TABLET	PHP 2.00	MED0349	NIFEDIPINE - ADALAT GITS 30MG	PHP 33.00
MED0080	METRONIDAZOLE 5MG/ML IV SOLUTION 100ML	PHP 22.00	MED0350	ENALAPRIL 5MG TABLET	PHP 15.00
MED0082	MULTIVITAMINS CAPSULE	PHP 3.00	MED0351	OMEPRAZOLE - MEPRACID 40MG CAP	PHP 12.00
MED0084	NICARDEPINE 1MG/ML 2ML AMP	PHP 107.00	MED0352	VALSARTAN - TAREG 160MG TAB	PHP 25.00
MED0086	OMEPRAZOLE 20MG CAP	PHP 2.00	MED0353	GLICLAZIDE - DIAMICRON MR 60MG TAB	PHP 17.00
MED0087	OMEPRAZOLE 40MG VIAL W/ 10ML SOLVENT	PHP 37.00	MED0354	IPRATROPIUM - ATROVENT UDV NEBULE	PHP 140.00
MED0088	OMEPRAZOLE PLUS 40MG CAP	PHP 12.00	MED0356	C - AEKNIL 150MG/2ML AMP	PHP 76.00
MED0089	OXYTOCIN 10IU/ML AMP	PHP 11.00	MED0357	C - AMPIVEX 1G VL	PHP 163.00
MED0092	PARACETAMOL 250MG/5ML 60ML SUSP	PHP 19.00	MED0358	C - AMPIVEX 500MG	PHP 111.00
MED0093	PARACETAMOL 500MG TABLET	PHP 1.00	MED0359	C - AMRACITAM 4.5G VIAL	PHP 585.00
MED0094	PARACETAMOL 125MG/5ML 60ML SUSP	PHP 19.00	MED0360	C - ANALGEN 50MG/ML 1ML AMP	PHP 65.00
MED0095	PARACETAMOL 100MG/ML 15ML DROPS	PHP 18.00	MED0361	C - ARGIFIX 100MG/5ML	PHP 416.00
MED0096	PIPERACILLIN/TAZOBACTAM 4G/500MG VIAL	PHP 141.00	MED0362	C - ATS 1500 IU	PHP 143.00
MED0097	PIPERACILLIN/TAZOBACTAM 2G/250MG VIAL	PHP 112.00	MED0363	C - AUBREX 200MG	PHP 34.00
MED0098	PLAIN NSS 50ML	PHP 32.00	MED0364	C - AUBREX 400MG	PHP 50.00
MED0099	POTASSIUM CITRATE 10MEQ TABLET	PHP 13.00	MED0365	C - BACTACARE 750MG VIAL	PHP 501.00

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MED0100	PREDNISONE 20MG TABLET	PHP 5.00	MED0366	C - BRONEX 250MCG/ML NEB	PHP 98.00
MED0101	PREDNISONE 5MG TABLET	PHP 1.00	MED0367	C - BUPIRIGHT 5MG/ML AMP	PHP 644.00
MED0103	PROPRANOLOL 10MG TABLET	PHP 7.00	MED0368	C - CALCIUM GLUCONATE 20ML	PHP 115.00
MED0104	RANITIDINE 150MG TABLET	PHP 2.00	MED0369	C - CATACLON 75MCG	PHP 25.00
MED0105	SALBUTAMOL 2.5MG NEBULE	PHP 7.00	MED0370	C - CEFEVEX 1G VL	PHP 1,625.00
MED0107	SIMVASTATIN 20MG TABLET	PHP 2.00	MED0371	C - CEFOVEX 1G VL	PHP 975.00
MED0108	TRAMADOL 50MG CAPSULE	PHP 3.00	MED0372	C - CEFUVEX 1.5G	PHP 644.00
MED0110	TRANEXAMIC ACID 500MG CAPSULE	PHP 8.00	MED0373	C - CEZOLE 40MG VIAL	PHP 390.00
MED0111	VITAMIN B1+B6+B12 100MG/100MG/1 MG 3ML AMPULE	PHP 2.00	MED0374	C - CIROK 500MG TAB	PHP 46.00
MED0112	VITAMIN B-COMPLEX CAPSULE	PHP 2.00	MED0375	C - CLINDAL 150MG CAP	PHP 29.00
MED0114	ALLOPURINOL 100MG TAB	PHP 2.00	MED0376	C - CLINDAL 150MG/ML AMP	PHP 504.00
MED0115	ALLOPURINOL 300MG TAB	PHP 3.00	MED0377	C - CLINDAL 300MG CAP	PHP 52.00
MED0116	ALUMINUM+ MAGNESIUM HYDROXIDE TAB	PHP 4.00	MED0378	C - CLOPATE 75MG TAB	PHP 20.00
MED0118	AMINOPHYLLINE 25MG/ML 10ML AMPULE	PHP 25.00	MED0379	C - D 10 W 500ML	PHP 122.00
MED0119	AMPICILLIN 1GM VIAL	PHP 15.00	MED0380	C - D 50% 50ML	PHP 94.00
MED0120	AMPICILLIN 500MG VIAL	PHP 12.00	MED0381	C - D5 0.3 1L	PHP 122.00
MED0121	AMPICILLIN+SULBACTAM 750MG VIAL	PHP 33.00	MED0382	C - D5 0.3 500ML	PHP 122.00
MED0122	ATROPINE SULFATE 1MG/ML AMP	PHP 10.00	MED0383	C - D5 0.9 NSS 1L	PHP 122.00
MED0123	CEFTRIAXONE 1G VIAL	PHP 27.00	MED0384	C - D5 IMB 1L	PHP 122.00
MED0124	CEFUROXIME 750MG VIAL	PHP 25.00	MED0385	C - D5 IMB 500ML	PHP 122.00
MED0126	CETIRIZINE 10MG TAB	PHP 1.00	MED0386	C - D5 LRS 1L	PHP 122.00
MED0127	CIPROFLOXACIN 2MG/ML VIAL 100ML	PHP 33.00	MED0387	C - D5 NM 1L	PHP 122.00
MED0128	CLARITHROMYCIN FORTE 500MG TABLET	PHP 15.00	MED0388	C - D5 NR 1L	PHP 122.00
MED0129	CLINDAMYCIN 150MG/ML 2ML AMPULE	PHP 142.00	MED0389	C - D5 W 1L	PHP 122.00
MED0130	CLONIDINE 150MCG TABLET	PHP 15.00	MED0390	C - D5 W 250ML	PHP 176.00
MED0131	COLCHICINE 500MCG TABLET	PHP 4.00	MED0391	C - D5 W 500ML	PHP 122.00

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MED0132	DEXAMETHASONE 4MG/ML 2ML AMPULE	PHP 29.00	MED0392	C - DALAMYCIN 150MG/ML 4ML AMP	PHP 455.00
MED0133	DICLOFENAC NA 25MG/ML 3ML AMPULE	PHP 25.00	MED0393	C - DORMICUM 5MG/ML AMP	PHP 221.00
MED0134	DOPAMINE 40MG/ML AMP	PHP 56.00	MED0394	C - ELIBACTAM 750MG VIAL	PHP 468.00
MED0135	ERYTHROMYCIN 5MG/G 0.5% OPTHALMIC OINTMENT 5G	PHP 176.00	MED0395	C - ELICEF 750MG VIAL	PHP 312.00
MED0137	FINASTERIDE 5MG TABLET	PHP 17.00	MED0396	C - EVATOCIN 10 IU AMP	PHP 156.00
MED0138	HYDROCORTISONE 250MG VIAL	PHP 88.00	MED0397	C - FENTANYL AMP	PHP 377.00
MED0139	KETOROLAC 30MG/ML AMP	PHP 24.00	MED0398	C - FUROSAN 10MG/ML 2ML AMP	PHP 63.00
MED0140	LEVOFLOXACIN 500MG TABLET	PHP 13.00	MED0399	C - FUSEM 20MG/2ML AMP	PHP 33.00
MED0141	LORATADINE 10MG TABLET	PHP 3.00	MED0400	C - GLYFORMET 500MG	PHP 7.00
MED0142	METRONIDAZOLE 125MG/5ML SUSPENSION, 60ML	PHP 22.00	MED0401	C - GOUTLESS 500MCG	PHP 6.00
MED0144	NAPROXEN 550MG TABLET	PHP 5.00	MED0402	C - HEMOGEN 10MG/ML AMP	PHP 65.00
MED0145	ORAL REHYDRATION SALT SACHET	PHP 5.00	MED0403	C - HIVENT 1MG/ML NEB	PHP 21.00
MED0146	OXACILLIN 500MG VIAL	PHP 28.00	MED0404	C - HYDROVEX 100MG	PHP 195.00
MED0148	POTASSIUM CHLORIDE 600MG TABLET	PHP 30.00	MED0405	C - HYDROVEX 250MG	PHP 455.00
MED0149	RANITIDINE 25MG/ML AMP	PHP 5.00	MED0406	C - HYOSAN AMP	PHP 111.00
MED0151	PHYTOMENADIONE 10MG AMPULE	PHP 25.00	MED0407	C - KETOVEX AMP	PHP 128.00
MED0152	D10 WATER 500ML	PHP 65.00	MED0408	C - KINOGEN 2MG/ML VIAL	PHP 585.00
MED0153	D5 0.3 NA CL 1L	PHP 65.00	MED0409	C - LARGECEF 750MG VIAL	PHP 325.00
MED0154	D5 0.3 NA CL 500ML	PHP 62.00	MED0410	C - LIDOCAINE 2% TWIST 5ML	PHP 47.00
MED0155	D5 0.9 NA CL 1L	PHP 65.00	MED0411	C - LIFERZIN 250MG VIAL	PHP 47.00
MED0156	D5 0.9 NA CL 500ML	PHP 63.00	MED0412	C - LRS 1L	PHP 122.00
MED0157	D5 IMB 1L	PHP 65.00	MED0413	C - LRS 500ML	PHP 122.00
MED0158	D5 LR 1L	PHP 64.00	MED0414	C - MAGNESIUM SULFATE 20ML	PHP 86.00
MED0159	D5 LR 500ML	PHP 63.00	MED0415	C - MANNITOL 500ML	PHP 332.00
MED0160	D5 NM 1L	PHP 65.00	MED0416	C - MEROPEVEX 1G	PHP 2,405.00

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MED0161	D5 NM 500ML	PHP 59.00	MED0417	C - MEROSAN 1G VIAL	PHP 1,820.00
MED0162	D5 NR 1L	PHP 65.00	MED0418	C - METVEX AMP	PHP 46.00
MED0163	D5 WATER 1L	PHP 65.00	MED0419	C - MORPHINE AMP	PHP 224.00
MED0164	D5 WATER 500ML	PHP 62.00	MED0420	C - MOXIKING 625MG TAB	PHP 39.00
MED0165	DEXTRAN-70 500ML	PHP 536.00	MED0421	C - MYOCARD AMP	PHP 162.00
MED0166	MANNITOL 20% 500ML	PHP 121.00	MED0422	C - MYOTIL 40MG/ML AMP	PHP 208.00
MED0167	PLAIN LR 1L	PHP 58.00	MED0423	C - NIRFOL 10MG/ML VIAL	PHP 647.00
MED0168	PLAIN LR 500ML	PHP 58.00	MED0424	C - NOSTON 1.08G TAB	PHP 20.00
MED0169	PLAIN NSS 1L	PHP 56.00	MED0425	C - NSS 1L	PHP 122.00
MED0170	PLAIN NSS 1L (IRRIGATION)	PHP 56.00	MED0426	C - NSS 20ML	PHP 71.00
MED0172	ACTIVATED CHARCOAL 100G	PHP 220.00	MED0427	C - NSS 500ML	PHP 122.00
MED0173	AMIKACIN 250MG VIAL	PHP 29.00	MED0428	C - NSS 50ML	PHP 81.00
MED0174	AMIKACIN 500MG VIAL	PHP 22.00	MED0429	C - NSS FOR IRRIGATION 1L	PHP 122.00
MED0176	AMIODARONE 50MG/ML 3ML AMP	PHP 329.00	MED0430	C - NUBAIN 10MG/ML AMP	PHP 221.00
MED0177	AMPICILLIN 250MG VIAL	PHP 11.00	MED0431	C - ODASYL 10MG TAB	PHP 10.00
MED0179	ATRACURIUM BESYLATE 10MG/ML AMP	PHP 114.00	MED0432	C - ODASYL 5MG TAB	PHP 6.00
MED0182	BUPIVACAINE HCL 0.5% HEAVY 20MG/4ML- (SENSORCAINE HEAVY 0.5 %)	PHP 168.00	MED0433	C - OMP 40MG VIAL	PHP 501.00
MED0183	BUPIVACAINE HCL HEAVY 0.5% ISOBARIC AMP	PHP 77.00	MED0434	C - ONEXITINE 1G VIAL	PHP 1,039.00
MED0184	CALCIUM GLUCONATE 10MG AMP	PHP 21.00	MED0435	C - PANAZOLE VIAL	PHP 119.00
MED0185	CEFAZOLIN SODIUM 1G VIAL	PHP 27.00	MED0436	C - PANOXIL 500MG VIAL	PHP 237.00
MED0187	CEFOXITIN 1G VIAL	PHP 154.00	MED0437	C - PIMAX 400 MCG TAB	PHP 43.00
MED0189	CO-AMOXICLAV 1.2G VIAL	PHP 484.00	MED0438	C - PLEPRA T 4.5G VIAL	PHP 650.00
MED0190	D5 WATER 250ML	PHP 138.00	MED0439	C - POTASSIUM CHLORIDE 20ML	PHP 86.00
MED0191	D 50% 50ML VIAL	PHP 33.00	MED0440	C - PREDSTER 20MG TAB	PHP 8.00
MED0192	DIAZEPAM 5MG/ML 2ML AMP	PHP 88.00	MED0441	C - QUINOCIP 2MG/ML 100ML VIAL	PHP 650.00

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MED0193	DIGOXIN 250MG/ML 2ML AMP	PHP 163.00	MED0442	C - RANIVEX 25MG/ML 2ML AMP	PHP 143.00
MED0194	DOBUTAMINE 250MG/20ML VIAL	PHP 221.00	MED0443	C - SARTAN 100MG TAB	PHP 24.00
MED0195	EPHEDRINE 50MG/ML AMP	PHP 87.00	MED0444	C - SARTAN 50MG TAB	PHP 18.00
MED0196	FAMOTIDINE 20MG VIAL	PHP 1,124.00	MED0445	C - SODALITE 75	PHP 12.00
MED0197	FENTANYL 50MCG/ML 2ML AMP	PHP 92.00	MED0446	C - SODIUM BICARBONATE 50ML	PHP 195.00
MED0199	GLYCERIN PEDIA SUPPOSITORY	PHP 13.00	MED0447	C - SWFI 1L	PHP 122.00
MED0200	HALOPERIDOL 50MG/ML AMP	PHP 585.00	MED0448	C - SWFI 20ML	PHP 63.00
MED0201	HYDRALAZINE 20MG/ML AMPULE	PHP 91.00	MED0449	C - SWFI 50ML	PHP 71.00
MED0202	IODOMIDOL 612MG/ML 50ML VIAL	PHP 1,775.00	MED0450	C - TAZIVEX 1G VL	PHP 1,008.00
MED0203	IODOSORB SACHET 3G	PHP 819.00	MED0451	C - TAZOVEX 2.25G	PHP 845.00
MED0204	ISOSORBIDE DINITRATE 5MG TAB	PHP 11.00	MED0452	C - TETANUS TOXOID AMP	PHP 130.00
MED0205	ISOXSUPRINE HCL 5MG/ML 2ML AMP	PHP 211.00	MED0453	C - TRAMALIN 50MG/ML 1ML AMP	PHP 195.00
MED0206	KETAMINE 50MG/ML 10ML VIAL	PHP 785.00	MED0454	C - TRANCE 500MG AMP	PHP 78.00
MED0207	LEVOBUPIVACAINE HCL AMP	PHP 377.00	MED0455	C - TRIAGEN 1G VIAL	PHP 325.00
MED0209	MAGNESIUM SULFATE 250MG/ML 10ML VIAL	PHP 38.00	MED0456	C - TRIMECARD 35MG	PHP 12.00
MED0210	METHYLERGOMETRINE 200MCG/ML AMP	PHP 17.00	MED0457	C - TROPIN AMP	PHP 43.00
MED0211	MIDAZOLAM 5MG/ML AMP	PHP 100.00	MED0458	C - URISAM 500MG	PHP 10.00
MED0213	MORPHINE SULFATE 10MG/ML AMPULE	PHP 74.00	MED0459	C - VALIUM 10MG/2ML AMP	PHP 221.00
MED0214	MUPIROCIN 2% 5G OINTMENT	PHP 81.00	MED0460	C - VIPEFIME 1G VIAL	PHP 715.00
MED0215	NALBUPHINE 10MG/ML	PHP 75.00	MED0461	C - VITASONE 100MG VIAL	PHP 207.00
MED0216	NICARDEPINE 10MG/10ML VIAL	PHP 498.00	MED0462	C - ZARNAT 100MG	PHP 28.00
MED0218	OXYMETHAZOLINE NASAL SPRAY	PHP 379.00	MED0463	C - ZARNAT 50MG	PHP 20.00
MED0219	PARACETAMOL 125MG SUPPOSITORY	PHP 26.00	MED0464	C - ZEFTRIGEN 1G VIAL	PHP 520.00
MED0220	PARACETAMOL 250MG SUPPOSITORY	PHP 32.00	MED0465	C -FEXONE 1G VIAL	PHP 457.00
MED0221	PARECOXIB SODIUM 40MG VIAL	PHP 190.00	MED0466	C - Z-FIX 100MG/5ML	PHP 501.00
MED0222	PETHIDINE 50MG/ML 2ML VIAL	PHP 258.00	MED0467	C - ZIPHANOL 2MG/ML AMP	PHP 572.00

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MED0223	PHENOBARBITAL 120MG/ML AMP	PHP 491.00	MED0468	C - ZIROLAC 30MG/ML AMP	PHP 137.00
MED0224	PHENYTOIN 50MG/ML 2ML AMPULE	PHP 124.00	MED0469	C - ZYLEVO 500MG TAB	PHP 41.00
MED0225	POTASSIUM CHLORIDE 2MEQ/ML 20ML AMPULE	PHP 35.00	MED0470	C - KAFTAX 500MG TABLET	PHP 127.00
MED0227	PROPOFOL 1% 10MG/20ML AMPULE	PHP 85.00	MED0471	C - VHERDEX 4MG/ML 2ML VIAL	PHP 166.00
MED0228	SILVER SULFADIAZINE 25G CREAM	PHP 115.00	MED0472	C - FEVERIN 150MG/ML 2ML AMP	PHP 78.00
MED0229	SODIUM BICARBONATE 8.4% 50ML VIAL	PHP 118.00	MED0473	C - GENTACARE 40MG/ML AMP	PHP 81.00
MED0230	STERILE WATER FOR INJ. 1L	PHP 99.00	MED0474	C - ADELANIN 40MG/ML 2ML AMP	PHP 166.00
MED0231	STERILE WATER FOR INJ. 20ML	PHP 27.00	MED0475	C - ATRAX 100MG CAP	PHP 27.00
MED0232	STERILE WATER FOR INJ. 50ML	PHP 30.00	MED0476	C - AZIHOLD-500 MG TAB	PHP 67.00
MED0233	SUCCINYLCHOLINE 10MG/ML 10ML VIAL	PHP 193.00	MED0477	C - ROFLOX 500MG TAB	PHP 39.00
MED0234	TERBUTALINE 500MCG/ML AMP	PHP 62.00	MED0478	C - C-ZETT 600MG SACHET	PHP 60.00
MED0235	TERRAMYCIN OPHT OINTMENT	PHP 0.00	MED0479	C - DECAN 4MG/2ML AMP	PHP 70.00
MED0236	TETANUS ANTITOXIN 1,500 IU AMP	PHP 82.00	MED0480	C - DOMPER 10MG TAB	PHP 16.00
MED0237	TETANUS TOXOID 0.5ML AMP	PHP 46.00	MED0481	C - GEOXICLAV 500MG/125MG TAB	PHP 51.00
MED0238	TRANEXAMIC ACID 100MG/5ML AMP	PHP 20.00	MED0482	C - LACTUL SOLN 100ML	PHP 329.00
MED0240	VITAMIN C AMP	PHP 39.00	MED0483	C - ARTHAN 500MG CAP	PHP 17.00
MED0244	PARACETAMOL 300MG AMP	PHP 6.00	MED0484	C - VESILAC 10MG SUPP	PHP 18.00
MED0245	BENZYL PENICILLIN SODIUM 1,000, 000 UNIT VIAL – (BIOPHEN 1,000,000 UNIT)	PHP 7.00	MED0485	C - VOREN FORTE 50MG CAP	PHP 26.00
MED0246	DIGOXIN 0.25 MCG/TAB	PHP 6.00	MED0486	C - AMIKACIN 100MG/2ML AMP	PHP 170.00
MED0247	CARBOPROST - EVAPROST 250 MCG/ML	PHP 510.00	MED0487	C - PEN G 1M VIAL	PHP 50.00
MED0250	CALTRATE TAB	PHP 73.00	MED0488	C - AMOXICILLIN 100MG DROPS	PHP 93.00
MED0251	RIFAMIXIN 200MG TABLET	PHP 925.00	MED0489	C - AMOXICILLIN 250MG SUSP	PHP 100.00





MED0252	0.9% SODIUM CHLORIDE SOLUTION, 20ML	PHP 39.00	MED0490	C - AMOXICILLIN 500MG CAP	PHP 8.00
MED0253	ACETYLCYSTEINE 100 MG SACHET	PHP 15.00	MED0491	C - ASCORBIC ACID 100MG 60ML	PHP 80.00
MED0254	ACETYLCYSTEINE 200 MG SACHET	PHP 14.00	MED0492	C - CEFALEXIN 250MG/ 60ML SYRUP	PHP 144.00
MED0255	ACETYLCYSTEINE 600 MG EFFERVESCENT TABLET	PHP 37.00	MED0493	C - CETIRIZINE SYRUP 60ML	PHP 246.00
MED0256	ADENOSINE 3MG/ML 2ML VIAL	PHP 338.00	MED0494	C - DIPHENHYDRAMINE 50MG TAB	PHP 9.00
MED0257	ALBUMIN 20% VIAL	PHP 2,727.00	MED0495	C - MULTIVITAMINS TAB	PHP 6.00
MED0258	ALUMINUM HYDROXIDE + MAGNESIUM HYDROXIDE 225MG/200ML/5ML SUSPENSION 120ML	PHP 41.00	MED0496	C - PARACETAMOL 125MG/ 60ML SUSP	PHP 71.00
MED0259	AMIODARONE 200MG TABLET	PHP 27.00	MED0497	C - PARACETAMOL 250MG/ ML SYRUP	PHP 76.00
MED0260	ASCORBIC ACID 100MG/5ML SYRUP,60ML	PHP 21.00	MED0498	C - PARACETAMOL 100MG/ 15ML DROPS	PHP 74.00
MED0261	ASPIRIN, 325MG BLISTER PACK TABLET	PHP 3.00	MED0499	C - VITAMIN B COMPLEX TAB	PHP 4.00
MED0262	AZITHROMYCIN DIHYDRATE 500MG VIAL	PHP 781.00	MED0500	C - CEFUROXIME 500MG TAB	PHP 40.00
MED0263	BCG VIAL	PHP 390.00	MED0501	C - CLOXACILLIN 500MG CAP	PHP 16.00
MED0264	BETAHISTINE 24MG TABLET	PHP 58.00	MED0502	C - METOCLOPRAMIDE 10MG TAB	PHP 7.00
MED0265	BISACODYL 10MG SUPPOSITORY	PHP 28.00	MED0503	C - OMEPRAZOLE 20MG CAP	PHP 37.00
MED0266	BISACODYL 5MG SUPPOSITORY	PHP 43.00	MED0504	C - OMEPRAZOLE 40MG CAP	PHP 87.00
MED0267	BUTORPHANOL 2MG/ML AMPULE	PHP 520.00	MED0505	C - MUPIROCIN 2% OINTMENT 5G	PHP 834.00
MED0268	CARVEDILOL 25MG TABLET	PHP 5.00	MED0506	C - PROPANOLOL 10MG TAB	PHP 5.00
MED0269	CARVEDILOL 6.25MG TABLET	PHP 2.00	MED0507	C - OMACARE 40MG VIAL	PHP 390.00
MED0270	CEFALEXIN MONOHYDRATE 100MG/ML DROPS, 10ML	PHP 24.00	MED0508	C - MIROCID OINTMENT 10G	PHP 430.00





MED0271	CEFALEXIN MONOHYDRATE 250MG/5ML, POWDER FOR SUSPENSION 60ML	PHP 33.00	MED0509	C - SALBUTAMOL NEB	PHP 21.00
MED0272	CEFEPIME 1G VIAL	PHP 109.00	MED0510	C - ERYTHROMYCIN EYE OINT	PHP 273.00
MED0273	CEFTAZIDIME PENTAHYDRATE 1 GRAM VIAL	PHP 52.00	MED0511	C - CARBOPROST 125MCG AMP	PHP 749.00
MED0274	CEFUROXIME 250MG/5ML SUSPENSION,50ML	PHP 195.00	MED0512	C - CEFUROXIME 250MG/ 5ML	PHP 1,235.00
MED0275	CELECOXIB 100MG CAPSULE	PHP 7.00	MED0513	C - BISACODYL 5MG SUPP	PHP 97.00
MED0276	CETIRIZINE DIHYDROCHLORIDE 5MG/ 5ML SYRUP 30ML	PHP 93.00	MED0514	C - SILVER SULFADIAZINE CREAM 25G	PHP 170.00
MED0277	CILOSTAZOL 100 MG TABLET	PHP 17.00	MED0515	C - MONTELUKAST 10MG TAB	PHP 83.00
MED0278	CINNARIZINE 25MG TABLET	PHP 2.00	MED0516	SPIRONOLACTONE - ALDACTONE 25MG TAB	PHP 21.00
MED0279	CLARITHROMYCIN 125MG/5ML SUSPENSION, 50ML	PHP 183.00	MED0517	ACETYLCYSTEINE - FLUIMUCIL 200MG SACHET	PHP 23.00
MED0280	CLOBETASOL PROPIONATE 0.05% OINTMENT TUBE 5 GRAMS	PHP 172.00	MED0518	C - BUPIVACAINE ISOBARIC	PHP 845.00
MED0281	CLOXACILLIN 250MG/5ML SUSPENSION,60ML	PHP 52.00	MED0519	ISOSORBIDE DINITRATE - ISORDIL	PHP 30.00
MED0282	CLOXACILLIN SODIUM 500MG, BLISTER/FOIL PACK CAPSULE	PHP 4.00	MED0520	DAKTARAN ORAL GEL	PHP 338.00
MED0283	CO-AMOXICLAV 457MG/5ML, POWDER FOR SUSPENSION 70ML	PHP 258.00	MED0521	ADENOSINE - ADESAN VIAL	PHP 1,770.00
MED0285	DILTIAZEM 60MG TABLET	PHP 7.00	MED0522	C - APRENOL 1000/5M	PHP 215.00
MED0286	DIPHENHYDRAMINE HCL 12.5MG/5ML SYRUP,60ML	PHP 22.00	MED0523	C - SORBANCE 5MG TAB	PHP 7.00
MED0288	DOXYCYCLINE 100MG CAPSULE	PHP 2.00	MED0524	C - SANTON 5MG/2ML AMP	PHP 860.00
MED0289	DYDROGESTERONE 10MG TABLET	PHP 72.00	MED0525	C - D5NM 500ML	PHP 122.00
MED0290	ENOXAPARIN SODIUM 100MG/ML 0.4ML PRE-FILED SYRINGE	PHP 284.00	MED0526	C - GLOTREK 500MG AMP	PHP 78.00
MED0291	ERYTHROMYCIN 500MG TABLET	PHP 6.00			



31. PISIKAL TERAPI PARA SA MGA OUTPATIENT

Ang pisikal terapi ay isang uri ng serbisyong medikal na naglalayong magpabuti ang paggalaw at kalusugan ng mga pasyente. Ang pisikal terapi sa mga outpatient ay ginagawa para sa mga pasyente na hindi naka-admit sa ospital at nangangailangan ng terapi.

bulpalient ay ginagawa para sa mg	ga pasyerne na minur	naka-aumit sa uspitai at nang	yanganangan ng terapi.				
PISINA o DIBISYON Ospital ng Imus - Physical 7			Therapy Unit ng Rehabilitation Department				
KLASIPIKASYON	ASIPIKASYON Technical						
URI NG TRANSAKSYON		G2C – Government to Citize	en				
SINO ANG NANGANGAILANGA	AN NG SERBISYO	Pasyente					
TSEKLIST NG	KAILANGANG DOK	UMENTO		SAAN MAKUKU	JHA		
Physical Therapy Referral			Doktor na gagawa ng k	konsultasyon ng pasye	ente		
Patient Information Sheet			Physical Therapist				
Physical Therapy Attendance For	rm (kopya para sa OF	PD, PT at pasyente)	Physical Therapist				
HAKBANG NG KLIYENTE	AKSYO	N NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA		
1. Kumonsulta sa doktor ukol sa nararamdamang kundisyon.	5 5	nsultasyon at magbigay ng rapi kung naaangkop.	Wala	*15 minuto	Doktor		
2. Ibigay sa physical therapist ang referral galing sa doktor.	2. Tanggapin and pasyente at ipila par	g referral form mula sa a iskedyul.	Wala	5 minuto	Physical Therapist		
3. Sagutan ang Patient Information Sheet	pasyente.	atient Information Sheet sa Patient Information sheet o sagutan.	Wala	*15 minuto	Physical Therapist		
4. Maghintay at sumagot sa tawag ng pisikal terapist para sa pag-iskedyul.	nakatakdang pasye	pasyente upang ikumpirma	Wala	5 minuto	Physical Therapist		
5. Bumalik sa araw at iskedyul na tinakda para sa pisikal terapi.		problema ng pasyente sa at bigyan ng naaangkop na syong ito.	Wala	1 oras	Physical Therapist		
6.1 Patuloy na bumalik sa iskedyul ng terapi hanggang kinakailangan.	6.1 Magbigay ng	naaangkop na terapi sa g ang pasyente ay ma-	Wala	1 oras	Physical Therapist		

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6.2 Dalhin ang Physical Therapy Attendance Form para idokumento ang pagpunta sa							
terapi. Sagutan ang Client Satisfaction Rating Form							
KABUU	AN Wala	*2 oras at 40 minuto					

*Ang tagal ng serbisyo ay base sa ginawang proseso at dami ng sesyon na kakailanganin ng pasyente.





32. PISIKAL TERAPI PARA SA MGA INPATIENT

Ang pisikal terapi ay isang uri ng serbisyong medikal na naglalayong magpabuti ang paggalaw at kalusugan ng mga pasyente. Ang pisikal terapi sa mga inpatient ay ginagawa para sa mga pasyente na naka-admit sa ospital at nangangailangan ng terapi.

		KABUUAN	Wala	*2 oras at	T
		Sagutan and Client Satis	faction Rating Form		
idokumento ang pagdalo sa terapi					
Therapy Attendance Form para	•	o sa terapi ang pasyente			
ospital. Pirmahan ang Physical		atient Attendance Form sa			
hanggang ma-discharge sa					
hanggang kinakailangan o		g ang pasyente ay ma-			
5. Patuloy na gawin ang terapi		naaangkop na terapi sa	Wala	*1 oras	Physical Therapist
terapist.	terapi para sa kundi				
terapi na pinagagawa ng pisikal		at bigyan ng naangkop na			
4. Gawin ang mga pagsusuri o		problema ng pasyente sa	Wala	*1 oras	Physical Therapist
pasyente.	magterapi.				
pisikal terapist sa kwarto ng		ikumpirma ang kagustuhan ng pasyente na			
3. Maghintay ng pagpunta ng		3. Pumunta sa kwarto ng pasyente upang		5 minuto	Physical Therapist
ang referral sa pisikal terapi.		Station at ipila para iskedyul.			
2. Maghintay na makomunika		referral form mula sa Nurse	Wala	5 minuto	Physical Therapist
sa nararamdamang kundisyon.	5 5	ation kung naaangkop.			
1. Kumonsulta sa doktor ukol	1. Isagawa ang k	onsultasyon at ibigay ang	Wala	*15 minuto	Doktor
HARDANG NG KEITENTE	ANOTO	THO ANEIGTA	BABAYARAN	AKTIBIDAD	
HAKBANG NG KLIYENTE		N NG AHENSYA	Sa doktor na gagawa n HALAGA NG	TAGAL NG	TAONG NAKATALAGA
Physical Therapy Referral	RAILANGANG DUR	UMENTO	Sa daktar na gagawa n		
SINO ANG NANGANGAILANG	KAILANGANG DOK	Pasyente		SAAN MAKUKU	
JRI NG TRANSAKSYON		G2C – Government to Citiz	en		
KLASIPIKASYON Technical					
OPISINA o DIBISYON Ospital ng Imus - Physical T		Therapy Unit ng Rehabili	tation Department		

*Ang tagal ng serbisyo ay base sa ginawang proseso at dami ng sesyon na kakailanganin ng pasyente.





33. PAGKUHA NG PHYSICAL THERAPY PROGRESS NOTES

Ang Physical Therapy Progress Notes ay isang dokumento na naglalarawan ng mga sesyon para sa terapi ng isang pasyente. Ito ay naglalaman ng kung ilang sesyon ang pinuntahan ng pasyente, mga kasalukuyang problema ng pasyente, mga aktibidad na nais mapabuti ang pasyente, mga interbensyon na binigay sa terapi, at rekomendasyon ng tagal ng terapi para sa pasyente.

sa terapi, at rekomendasyon ng tag	gai ng torapi para o						
OPISINA o DIBISYON		Ospital ng Imus - Physical Therapy Unit ng Rehabilitation Department					
KLASIPIKASYON		Complex					
URI NG TRANSAKSYON		G2C – Government to Citizen	G2C – Government to Citizen				
SINO ANG NANGANGAILANGA	N NG	Pasyente					
SERBISYO							
TSEKLIST NG	TSEKLIST NG KAILANGANG DOKUMENTO SAAN MAKUKUHA						
Physical Therapy Requisition Slip			Physical Therapist				
Charge Slip para sa Certified True	e Copy		Health Information Mar	nagement Department			
Official receipt			Cashier				
Kung Pasyente: Government Iss	ued ID o Valid ID	Pangasiwaan/ Ahensya ng Gobyerno na nagbibigay ng Valid ID			bibigay ng Valid ID		
Kung Kinatawan ng Pasyente:							
Government Issued ID o Valid ID	ng Awtorisadong K	inatawan ng Pasyente	Pangasiwaan/ Ahensya	a ng Gobyerno na nag	bibigay ng Valid ID		
Authorization Letter			Pasyente				
HAKBANG NG KLIYENTE	AKSYC	ON NG AHENSYA	HALAGA NG	TAGAL NG	TAONG NAKATALAGA		
			BABAYARAN	AKTIBIDAD			
1. Manghingi ng Physical	1. Magbigay ng F	Physical Therapy Requisition	Wala	1 minuto	Physical Therapist		
Therapy Requisition Slip sa	Slip sa pasyente.						
inyong Physical Therapist.							
2. Sulatan ang Physical	2. Tanggapin ang	Physical Therapy Requisition	Wala	15 minuto	Physical Therapist		
Therapy Requisition Slip at	Slip.						
ibalik sa Physical Therapist.							





3. Maghintay ng tawag mula sa Physical Therapist kung kalian pwedeng kunin ang Physical Therapy Progress Notes.	3.1 Isulat ang Physical Therapy Progress Notes para sa pasyente. Ang pasyente ay tatawagan kapag ito ay nakahanda na para kunin. Ang dokumento ay ibibigay sa Medical Records	Wala	5 araw	Physical Therapist
	Department. 3.2 Iproseso ang Certified True Copy ng Physical Therapy Progress Notes.	Wala		Medical Records Officer
	3.3 Pirmahan ang Certified True Copy ng Physical Therapy Progress Notes.	Wala		Physical Therapist
	3.4 Tawagan ang pasyente kapag ito ay nakahanda na para kunin sa Medical Records Department.	Wala		Physical Therapist
4. Pumunta sa Health Information Management Department para kunin ang charge slip para sa Certified True Copy ng Physical Therapy Progress Notes.	4. Magbigay ng charge slip sa pasyente upang bayaran ang Certified True Copy ng Physical Therapy Progress Notes.	Wala	30 minuto	Medical Records Officer
5. Magbayad sa cashier para sa Certified True Copy ng Physical Therapy Progress Notes.	5. Tanggapin ang bayad ng pasyente at magbigay ng Official Receipt sa pasyente.	Php 30.00	5 minuto	Cashier Personnel
6. Bumalik sa Medical Records Department upang makuha ang Certified True Copy ng Physical Therapy Progress Notes.	6. Ibigay ang Certified True Copy ng Physical Therapy Progress Notes.	Wala	5 minuto	Medical Records Officer
	Sagutan ang Client Satisfa	ction Rating Form		
	KABUUAN	Php 30.00	5 araw at 56 minuto	



34. PAGSUSURING DAYAGNOSTIKO SA RADIOLOGY DEPARTMENT

Ang Radiology Department ay responsable sa pagproseso ng mga pagsusuring medikal kung saan nalikha ng mga larawan na maipapakita ang internal na istraktura ng katawan ng pasyente. Ito ay may layunin na makapagbigay ng kalidad at wastong resulta sa itinakdang oras na magiging basehan ng doktor sa pagbibigay ng karampatang lunas sa pasyente.

syente.					
· · · · · · · · · · · · · · · · ·					
G2C - Government to Citiz	ens; G2G - Government	to Government			
SERBISYO Inpatient at Outpatient					
ANGANG DOKUMENTO		SAAN MAKUKU	IHA		
	Radiology Department				
AKSYON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA		
1.1 Tanggapin ang Radiology Request Form o ang Referral Form at alamin ang kailangang pagsusuri ng pasyente.1.2 Isulat ang iskedyul ng pagsusuri kasama ang lagda ng Radiologic Technologist para matiyak ang pagiging orihinal at pagkakakilanlan ng request form.	Wala	2 minuto 3 minuto	Radiologic Technologist Radiology Department		
1.3 Para sa mga agarang kaso o "emergency procedures", ito ay kinakailangan munang masuri at aprubahan ng doktor.	Wala	10 minuto			
2. Papuntahin ang pasyente sa Cashier upang magbayad ng kaukulang babayaran.	Tingnan sa Ibaba	1 minuto	Radiologic Technologist Radiology Department		
3.1 Tanggapin ang resibo at Radiology Request Form o referral form. Isulat ang radiology number at iba pang mahalagang impormasyon sa "Logbook for Radiology Examinations".		2 minuto	Radiologic Technologist Radiology Department		
	Ospital ng Imus - Radiolog Simple G2C - Government to Citiz SERBISYO Inpatient at Outpatient NGANG DOKUMENTO AKSYON NG AHENSYA 1.1 Tanggapin ang Radiology Request Form o ang Referral Form at alamin ang kailangang pagsusuri ng pasyente. 1.2 Isulat ang iskedyul ng pagsusuri kasama ang lagda ng Radiologic Technologist para matiyak ang pagiging orihinal at pagkakakilanlan ng request form. 1.3 Para sa mga agarang kaso o "emergency procedures", ito ay kinakailangan munang masuri at aprubahan ng doktor. 2. Papuntahin ang pasyente sa Cashier upang magbayad ng kaukulang babayaran. 3.1 Tanggapin ang resibo at Radiology Request Form o referral form. Isulat ang radiology number at iba pang mahalagang impormasyon sa "Logbook	Ospital ng Imus - Radiology DepartmentSimpleG2C - Government to Citizens; G2G - GovernmentSERBISYOInpatient at OutpatientNGANG DOKUMENTORadiology DepartmentAKSYON NG AHENSYAHALAGA NG BABAYARAN1.1 Tanggapin ang Radiology Request Form o ang Referral Form at alamin ang kailangang pagsusuri ng pasyente.Wala1.2 Isulat ang iskedyul ng pagsusuri kasama ang lagda ng Radiologic Technologist para matiyak ang pagiging orihinal at pagkakakilanlan ng request form.Wala1.3 Para sa mga agarang kaso o "emergency procedures", ito ay kinakailangan munang masuri at aprubahan ng doktor.Wala2. Papuntahin ang pasyente sa Cashier upang magbayad ng kaukulang babayaran.Tingnan sa Ibaba3.1 Tanggapin ang resibo at Radiology Request Form o referral form. Isulat ang radiology number at iba pang mahalagang impormasyon sa "LogbookWala	Ospital ng Imus - Radiology Department Simple G2C - Government to Citizens; G2G - Government to Government SERBISYO Inpatient at Outpatient NGANG DOKUMENTO SAAN MAKUKL Radiology Department SAAN MAKUKL Radiology Department TAGAL NG AKSYON NG AHENSYA HALAGA NG TAGAL NG BABAYARAN AKTIBIDAD AKTIBIDAD 1.1 Tanggapin ang Radiology Request Form o ang Referral Form at alamin ang kailangang pagsusuri ng pasyente. Wala 2 minuto 1.2 Isulat ang iskedyul ng pagsusuri kasama ang lagda ng Radiologic orihinal at pagkakakilanlan ng request form. Wala 3 minuto 1.3 Para sa mga agarang kaso o "emergency procedures", ito ay kinakailangan munang masuri at aprubahan ng doktor. Tingnan sa Ibaba 1 minuto 2. Papuntahin ang pasyente sa Cashier upang magbayad ng kaukulang babayaran. Tingnan sa Ibaba 1 minuto 3.1 Tanggapin ang resibo at Radiology radiology number at iba pang mahalagang impormasyon sa "Logbook Wala 2 minuto		

CITIZEN'S CHARTER

	3.2 Isulat ang radiology file number sa opisyal na resibo at magbigay ng maikling paliwanag sa proseso at iba pang kailangang impormasyon na dapat	Wala	5 minuto	
4. Pumunta sa Radiology Department	malaman ng pasyente. 4. Tanggapin at ipila ang Request Form	Wala	2 minuto	Radiologic Technologist
sa nakaiskedyul na araw at oras at ibigay ang nakumpletong Radiology Request Form.	kasama ang iba pang request.			Radiology Department
5. Manatili sa upuan sa tapat ng Radiology Department at maghintay na tawagin ang pangalan.	5. Tawagin ang pangalan ng pasyente. Ihanda ang pasyente at makina na kailangan.	Wala	13 minuto	Radiologic Technologist Radiology Department
6. Sumailalim sa proseso.	6. Isagawa ang proseso.	Wala	30 minuto	Radiologic Technologist Resident Radiologist Radiology Department
7. Manatili at maghintay muli sa nakatalagang lugar na hintayan ng mga pasyente sa harap ng x-ray room.	7. Suriin ang imahe. Ulitin ang pagsusuri kung kailangan.	Wala	15 minuto	Radiologic Technologist Resident Radiologist Radiology Department
8. Balikan ang resulta sa nakatakdang araw at oras ng pagkuha.	8. Para sa Inpatient, ipaalam sa Staff Nurse na maaari nang ibalik ang pasyente sa kanilang kwarto at itatawag nalang kung may resulta na.	Wala	2 minuto	Radiologic Technologist Radiology Department
	Para sa mga outpatient, sabihan na balikan ang resulta sa itinakdang araw at oras ng pagkuha.			
	Sagutan ang Client Satisf		1 oros 25 minuto	
	TOTAL	Tingnan sa Ibaba	1 oras, 25 minuto	





	X-RAY		
Vertebral Column		Skull	
Cervical Spine APL	PHP 450.00	Cranium/ Skull APL	PHP 450.00
Thoracic Spine APL	PHP 500.00	Cranium/ Skull Series	PHP 450.00
Thoraco-Lumbar Spine APL	PHP 700.00	Orbital	PHP 450.00
Lumbar Spine APL	PHP 450.00	Mastoid Process	PHP 450.00
Lumbo Sacral APL	PHP 450.00	Towne's View	PHP 350.00
KUB AP	PHP 450.00	Water's View	PHP 350.00
KUB IVP	PHP 1, 200.00	Upper Extremities: Arm/ Humerus	
Scoliosis Series	PHP 900.00	Elbow	PHP 300.00
Shoulder Girdle		Forearm/ AR	PHP 300.00
Shoulder Joint	PHP 400.00	Hand	PHP 300.00
Clavicle	PHP 400.00	Wrist	PHP 300.00
Scapula	PHP 450.00	Low Extremities	
Pelvis AP	PHP 300.00	Femur/ Thigh	PHP 350.00
Pelvis APL	PHP 450.00	Leg	PHP 350.00
Hip Joint	PHP 450.00	Knee	PHP 300.00
Sacrum APL	PHP 450.00	Ankle	PHP 350.00
Lungs		Foot	PHP 350.00
Pedia Chest AP/L	Skeletal Survey	PHP 1, 500.00	
Chest PA	PHP 250.00	Facial Bone	
Chest PA/ Lateral	PHP 350.00	Zygomatic Bones	PHP 450.00
Apicolordotic View	Php 200.00	TMJ	PHP 450.00
Chest with Bucky	PHP 400.00	Mandible	PHP 450.00
Chest Lateral Decubitus	PHP 300.00	STL	PHP 400.00
Babygram	PHP 400.00	Shoulder Girdle	
Bony Thorax		Paranasal Sinuses	PHP 600.00
Thoracic Cage	Nasal Bone	PHP 500.00	
Rib Cage AP	PHP 400.00	Plain Abdomen	PHP 450.00
Rib Cage AP/ Oblique	PHP 500.00	Plain Abdomen Upright Supine	PHP 500.00

CITIZEN'S CHARTER

ULTRASOUND						
Whole Abdomen	PHP 1, 300.00	Ultrasound Special Exam				
Upper Abdomen	PHP 950.00	Thyroid	PHP 700.00			
HBT	PHP 450.00	Neck	PHP 900.00			
Liver	PHP 450.00	Chest	PHP 900.00			
Gall Bladder	PHP 350.00	Breast	PHP 700.00			
Spleen	PHP 450.00	Scrotal	PHP 800.00			
Pancreas	PHP 450.00	Inguino/ Scrotal	PHP 1, 500.00			
KUB	PHP 450.00	Leg/ Thigh	PHP 800.00			
KUB/ Prostate	PHP 650.00	Soft Tissues/ Mass	PHP 900.00			
Transvaginal	PHP 600.00	Transrectal	PHP 600.00			
BPS	PHP 600.00	BPS (Bio-Physical Scoring)	PHP 600.00			
Pelvic	PHP 400.00					
Lower Abdomen	PHP 900.00					
Single Organ	PHP 350.00					
2 – Organ	PHP 450.00					
3 – Organ	PHP 550.00					
4 – Organ	PHP 650.00					





35. MEAL PREPARATION AND DISTRIBUTION

Dietary Department ensures that nutritious, attractive and palatable meals are served to patients while maintaining high standard of sanitation. It also provides nutritional care and counseling to patients to analyze various health needs in regard to diet and exercise.

OFFICE OR DIVISION	Dspital ng Imus – Dietary Department					
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C – Government to Citizens					
WHO MAY AVAIL THE SERVICE	Ospital ng Imus - Inpatients					
CHECKLIST	OF REQUIREMENTS		WHERE TO SECUR	RE		
Attending Physician's Diet Order		Hospital Information S	ystem (HIS)			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Receive information regarding patient's diet.	1.1 Receiving of Diet Order from the Attending Physician.1.2 Prepare and cook the patient's meal.	None	5 minutes 1 hour	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Dietary Department Justine Mae T. Reyes		
2. Receives the meal distributed	2. Distribute or deliver the patient's meal.	None	10 minutes	Consessionaire/Cook Dean Allen B. Rodriguez Dietary Department Dean Allen B. Rodriguez		
by the Dietary Department.		NONE	To minutes	Dietary Department		
3. Return meal trays.	3. Collect meal trays from patient's room.	None	10 minutes	Dean Allen B. Rodriguez Dietary Department		
	TOTAL	None	1 hour, 25 minutes			





36. NUTRITION COUNSELLING o PAGPAPAYONG NUTRISYON SA MGA INPATIENT

Ang Dietary Department ay sinisigurado na ang mga pasyente na nangangailangan at mayroong referral para sa pagpapayong nutrisyon at naka-marka ng May-Go-Home ay matuturuan at mabibigyan ng payo na naaayon sa kanilang pangangailangang nutrisyon para sa kanilang pag-uwi.

	gyan ng payon	ia naaayon sa kanilang panga		bara sa kariliang pag uw		
OPISINA o DIBISYON Ospital ng Imus – Dietary De			epartment			
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON G2C – Government to Citize			ns			
SINO ANG NANGANGAILANGAN NG	SERBISYO	Ospital ng Imus - Inpatient				
TSEKLIST NG KAIL	ANGANG DOP	(UMENTO		SAAN MAKUKUH	Α	
Attending Physician's referral para sa I	Diet Counselling	g/Instructions	Hospital Information Sy Patient's Chart	/stem (HIS)		
HAKBANG NG KLIYENTE	AKS	YON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Pagtanggap ng referral para sa pagtuturo ng diyeta sa pasyente.	1.1 Pagtanggap ng referral para sa diyeta ng pasyente mula sa doktor o Attending Physician.		Wala	5 minuto	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Dietary Department	
1.2 Paghahanda at pagpaplano n Prescription ng pasyente, kasama sample menu, listahan ng dam pagkain, at paghahanda ng pagka bahay.			Wala	*2 Oras	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Justine Mae T. Reyes Dietary Department	
2. Pagtanggap ng pambahay na tagubilin o reseta ng pagkain.	 Pagtawag sa kamag-anak ng pasyente pagpunta ng Nutritionist-Dietitian sa ward o kwarto ng pasyente. *Ang kamag-anak ng pasyente ay maaaring dumiresto sa Dietary Department o ang mga Nutritionist- Dietitian ay pumunta sa mga kwarto upang umpisahan ang pagtuturo ng diyeta sa bahay ng mga pasyenteng mayroong May-Go-Home na instruksyon. 		Wala	*1 oras at 30 minuto	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Dietary Department	
		Sagutan ang Client Satis				
		KABUUAN	Wala	3 oras at 35 minuto		



37. NUTRITION COUNSELLING o PAGPAPAYONG NUTRISYON SA MGA OUTPATIENT

Ang Dietary Department ay sinisigurado na ang mga pasyente na nangangailangan at mayroong referral para sa pagpapayong nutrisyon ay matuturuan at mabibigyan ng payo na naaayon sa kanilang pangangailangang nutrisyon mula sa pagsusuri ng kanilang doktor sa Outpatient Department (OPD).

		alangang naaloyon mala sa	. parge ae angaag	a a a a a a a a a a a a a a a a a a a		
OPISINA o DIBISYON	OPISINA o DIBISYON Ospital ng Imus – Dietary Department					
KLASIPIKASYON		Simple				
URI NG TRANSAKSYON		G2C – Government to Citizens				
SINO ANG NANGANGAILANGAN NG	SERBISYO	Ospital ng Imus - Inpatien	ts			
TSEKLIST NG KAILAN	NGANG DOK	UMENTO		SAAN MAKUKU	HA	
Out Patient Department's Doctors' referr	al for Diet Cou	unselling/Instructions	Diet Prescription			
HAKBANG NG KLIYENTE	AKSY	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	
1. Pagtanggap ng referral para sa pagtuturo ng diyeta sa pasyente.	 Pagtanggap ng referral para sa tuturo ng diyeta sa pasyente. 1.1 Pagtanggap ng referral para sa diyeta ng pasyente mula sa kanilang doktor sa OPD. 1.2 Paghahanda at pagpaplano ng Diet Prescription ng pasyente, kasama ang sample menu, listahan ng dami ng pagkain, at paghahanda ng pagkain sa bahay. 		Wala	5 minuto	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Dietary Department	
			Wala	*45 minuto	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Justine Mae T. Reyes Dietary Department	
2. Pagtanggap ng pambahay na tagubilin o reseta ng pagkain.	 Ang pasyente at/o kanilang kamaganak ay maaaring dumiretso sa Dietary Department para sa pagbibigay ng payo at tagubilin patungkol sa diyeta ng pasyente sa kanilang bahay. 		Wala	*1 oras at 30 minuto	Ma. Ana Katrina S. Lardizabal Jezlin Hannah C. Ricafort Dietary Department	
	ay maaaring	nte at/o kamag-anak nila g dumiretso sa opisina ng artment o sa cafeteria.				
		KABUUAN	Wala	2 oras at 20 minuto		





38. PAGSASAGAWA NG OPERASYON

Ito ay isang proseso o metodo sa pag-oopera sa katawan ng pasyente.

Ito ay isang proseso o metodo sa pag-oo	pera sa katawan ng pasyente.					
OPISINA o DIBISYON	OPISINA o DIBISYON Ospital ng Imus – Operating					
KLASIPIKASYON	Simple					
URI NG TRANSAKSYON	G2C – Government to Citiz	ens				
SINO ANG NANGANGAILANGAN NG SERBIS	SYO In – patient					
TSEKLIST NG KAILANG	ANG DOKUMENTO		SAAN MAKUKU	HA		
Intraoperative Counting Record		OR-DR Complex				
Surgical Safety Checklist		Nursing Ward				
Surgical Pathology Request		Nursing Ward				
Partograph		OR-DR Complex				
Anesthesia Chart		OR-DR Complex				
Record of Operation		OR-DR Complex				
Pre-operative Checklist		Nursing Ward				
Informed Consent for Surgery, Anesthesia or O	ther Procedures	Nursing Ward				
OR-DR Complex Notification Slip		OR-DR Complex	OR-DR Complex			
Doctor's Order Sheet kung saan nakasaad ang	Doctor's Order Sheet kung saan nakasaad ang takdang petsa ng operasyon			Nursing Ward		
Patient's Medical Chart		Nursing Ward	Nursing Ward			
HAKBANG NG KLIYENTE	AKSYON NG AHENSYA	HALAGA NG	TAGAL NG	TAONG NAKATALAG		
		BABAYARAN	AKTIBIDAD			
1. Pumirma sa Informed Consent for Surgery,	1.1 Pagbibigay ng impormasyon		3 minuto	Nurse I		
Anesthesia or Other Procedures at ihanda ang	oras at planong operasyon para			(Nursing Ward o		
sarili bago ang operasyon ayon sa abiso ng	pasyente. Para sa kaso ng emerger	ісу,		Emergency Room)		
mga Nurse.	kailangan ito gawin agad.					
	10 Martines of DD Ores		E animata			
	1.2 Magbigay ng OR-DR Comp		5 minuto			
	Notification Slip kalakip dito	•				
	impormasyon ng pasyente at paraan	ing				
2. Bago pumasok sa Operating Room, iwanan	operasyon. 2.1 Pagtanggap ng pasyente kasa	ma Wala	*15 minuto	Nurse I		
z. Dago pullasok sa Operating Roolli, Iwalian	2.1 1 ayianyyap ny pasyenie kase		13 11111010			
ang mahahalagang hagay o gamit sa kasama	and medical chart daling	sa				
	ang medical chart galing	sa		(OR-DR Complex)		
ang mahahalagang bagay o gamit sa kasama o bantay.	ang medical chart galing pinagmulang yunit. Siguraduh napapirmahan ang Informed Cons	ling		(OR-DR Complex)		



Procedures at nagawa ang lahat nang nakasulat sa Pre-operative Checklist.			
2.2 Dalhin ang pasyente sa Operating Room.	Wala	3 minuto	
2.3 Kuhanan ang pasyente ng vital signs at ikabit sa monitor. Ipagbigay alam sa doktor kung kinakailangan.	Wala	5 minuto	
2.4 Maghanda at magbigay ng Anesthesia na nararapat sa operasyon ng pasyente.	Wala	*30 minuto	Medical Specialist I o Medical Specialist II
2.5 Pagsasagawa ng time-out bago ang operasyon gamit ang Surgical Safety Checklist.	Wala	15 minuto	Nurse I (OR-DR Complex)
2.6 Pagsasagawa ng operasyon. Siguraduhing naitala ang oras ng simula	Wala	*30 minuto (minor	Medical Specialist I o Medical Specialist II (Surgery/OB/ Anesthesiology) Nurse I
at katapusan ng operasyon.	vvala	na operasyon)	(OR-DR Complex)
		*1 oras (major na operasyon)	Medical Officer III
2.7 Liniaan at hikinan na hara ana			Medical Specialist I o Medical Specialist II (Surgery/OB/ Anesthesiology)
2.7 Linisan at bihisan ng bago ang pasyente at dalhin sa Recovery Room.	Wala	15 minuto	Nurse I (OR-DR Complex); Midwife

CITIZEN'S CHARTER



	2.8 Ilipat ang pasyente sa Recovery Room at kuhanan ng vital sign tuwing ika-labinlimang (15) minuto hanggang nasa Recovery Room. Ipagbigay alam sa doktor kung kinakailangan.	Wala	*2 oras	Nurse I (OR-DR Complex)
	2.9 Pagsagawa ng order ng doktor at pagbigay ng gamot pagkatapos ng operasyon.	Wala	*30 minuto	Nurse I (OR-DR Complex)
	 2.10 Siguraduhing nasulatan ng doktor ang mga sumusunod: Record of Operation Anesthesia Chart Surgical Pathology Request (kung may specimen na papahistopath) Partograph (para sa Caesarean Section) Doctor's Order Sheet Final Diagnosis 	Wala	*30 minuto	Medical Specialist / Medical Officer III (Surgery/OB Department)
3. Dalhin ng kamag-anak ang specimen na ipapaeksamin sa Laboratory Department. Ang specimen na hindi ipapaeksamin ay tatanggapin lamang at kailangang lumagda sa Receiving Logbook ng OR-DR.	0	1,500 pataas depende sa laki ng specimen na ipapaeksamin. Wala (kung hindi na kailangang ipaeksamin)	*15 minuto	Nurse I (OR-DR Complex)
	3.2 Ipagbigay alam sa yunit na pinanggalingan ng pasyente ang napipintong paglabas ng pasyente sa Recovery Room.	Wala	3 minuto	Nurse I (OR-DR Complex)

CITIZEN'S CHARTER



3.3 Ilipat ang pasyente mula Recovery Room papuntang kwarto sa Nursing Ward.	Wala	20 minuto	Nurse I (OR-DR Complex) Transporter Utility
3.4 Pagtanggap ng pasyente at pag- endorso ng tsart sa Nurse na nakatalaga sa Nursing Ward.	Wala	*20 minuto	Nurse I (OR-DR Complex) Nurse I (Nursing Ward)
KABUUAN	*Depende kung mayroong ipapaeksamin na specimen	*6 oras at 29 minuto	

*Ang kabuuang oras ay maaaring magbago depende sa klase at uri ng operasyong isasagawa, at kalagayan ng pasyente.





39. RECRUITMENT, SELECTION AND PLACEMENT OF EMPLOYEES

Recruitment, selection and placement is the process of assessing applicants in order to select and place qualified applicants in a specific position. Vacant positions in Ospital Ng Imus are posted in any of the following areas:

- Mayor's Office Bulletin Board
- Vice Mayor's Office/ Sangguniang Panglungsod Bulletin Board
- Public Employment Service Office (PESO) Bulletin Board
- Imus Public Market Bulletin Board
- Imus Extension Office Bulletin Board
- Imus Human Resource (HR) Bulletin Board (located at the Lobby)
- Civil Service Commission (CSC) Imus Field Office Bulletin Board
- Human Resource Ospital ng Imus (HR-ONI) Bulletin Board

Vacant positions are also posted in the City of Imus and Ospital Ng Imus pages. Application is open to all who meet the qualifications of the position to be filled. A Personnel Selection Board (PSB) screens and evaluates all qualified applicants and submits the list of candidates recommended for appointment to the appointment to Appointing Authority.

appointment to Appointing Authority.				
OFFICE OR DIVISION	Ospital ng Imus - Human Resources Departm	nent		
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2C – Government to Citizens; G2G - Government to Government			
WHO MAY AVAIL THE SERVICE	E All			
CHECKLIST (HECKLIST OF REQUIREMENTS WHERE TO SECURE			
Letter of Intent to apply for the desired	d position	Applicants		
One (1) Copy of Duly accomplished P	ersonal Data Sheet (PDS) with passport size	Civil Service Commissi	on (CSC) Website	
picture with handwritten name and sig	vith handwritten name and signature)			
One (1) Photocopy of Eligibility (if app	licable)	Civil Service Commission/ Professional Regulation Commission (PRC)		
One (1) Photocopy of Transcript of Re	ecords (TOR)	Universities/ Sate Colleges		
One (1) Photocopy of Valid Governme	ent ID	Government Agencies		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Refer to the list of vacant positions posted by the Human Resources Department (HRD) in designated areas and websites.	designated areas and websites.	None	15 days	Human Resource Management Officer III



2. Submission of Pre-employment Application requirements.	2.1 Receive the submitted pre- employment application requirements.	None	1 minute	Human Resource Management Officer III Human Resource Management Officer I
	2.2 Conduct pre-screening of the documents submitted by the applicant to determine if he/she met the minimum qualifications for the position.	None	1 day	Human Resource Management Officer I
	2.3 Administer written examination of qualified applicant.	None	1 day	Human Resource Management Officer I
	2.4 Review pre-screening results of qualified applicant. Conduct interview, deliberate and evaluate the qualifications and competence of the applicant for the position.	None	1 day	Human Resource Management Officer I
	2.5 Process results of the Personnel Selection Board (PSB) Screening, conduct background investigation, and prepare the Comprehensive Evaluation Report. Submit the Comprehensive Evaluation Report to the Appointing Authority.	None	5 days	Human Resource Management Officer I
	2.6 Assess the merits of the recommendation made by the PSB through the Comprehensive Evaluation Report.	None	3 days	Local Chief Executive
	2.7 Inform the candidate selected by the Appointing Authority by telephone or email and request for pre-employment requirements.	None	2 days	Human Resource Management Officer I



3. Submit all the requested pre- employment requirements.	3. After selected applicant has submitted all the requirements for appointment, process the appointment process.	None	5 days	Administrative Officer II Human Resources Department
	TOTAL	None	33 days, 1 minute	





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OSPITAL NG IMUS INTERNAL SERVICES





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1. PAGTANGGAP NG MGA DOKUMENTO

Ang Chief of Medical Professional Staff ay isa sa mga support unit ng institusyon. Lahat ng dokumento, komunikasyon, hospital issuance at proseso patungkol sa Medical Service Department at mga kaakibat na Ancillary Services ay dumadaan sa opisinang ito para sa pagsusuri at rekomendasyon bago ipasa sa opisina ng Chief of Hospital II.

		1			
OPISINA o DIBISYON				f	
KLASIPIKASYON		Simple			
URI NG TRANSAKSYON		G2G-Government to Governn	nent		
SINO ANG NANGANGAILANGA		Lahat			
	KAILANGANG DO	KUMENTO		SAAN MAKUKU	IHA
Wala	1		Wala	1	
HAKBANG NG KLIYENTE	AKSYO	ON NG AHENSYA	HALAGA NG BABAYARAN	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA
1. Magsumite ng mga dokumento sa tauhan ng CMPS.	1. Tanggapin ang	g dokumento.	Wala	2 minuto	Dr. Mary Del V. Agarin- Bathan and Victor Hugo Chief of Medical Professional Staff
	2. Pagtatala ng d	okumentong natanggap.	Wala	5 minuto	Dr. Mary Del V. Agarin- Bathan and Victor Hugo Chief of Medical Professional Staff
	3. Pagpasa ng do	okumento sa CMPS.	Wala	3 minuto	Dr. Mary Del V. Agarin- Bathan and Victor Hugo Chief of Medical Professional Staff
		agsasagawa ng nararapat na CMPS sa dokumentong	Wala	1 araw	Dr. Mary Del V. Agarin- Bathan and Victor Hugo Chief of Medical Professional Staff
	5. Magrekomend Chief of Hospit		Wala	5 minuto	Dr. Mary Del V. Agarin- Bathan and Victor Hugo Chief of Medical Professional Staff
		KABUUAN	Wala	1 araw 15 minuto	
		Fill-out Client Satisfac			
		KABUUAN	Wala	2 araw	



2. LEAVE ADMINISTRATION

Leave administration is performed to be able to accommodate employees authorized leave of absence at work. Employees must accomplish Leave Application Form in order to file their leave of absence.

Application Form in order to me their leave				
OFFICE OR DIVISION	Ospital ng Imus - Human Resources Department			
CLASSIFICATION	Complex			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Employees of Ospital ng Imus			
CHECKLIST OF	F REQUIREMENTS		WHERE TO SECUR	RE
Three (3) Copies of Leave Application F	ation Form Ospital ng Imus – Human Resources Department; Departments of Ospi		nt; Departments of Ospital ng	
		Imus		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the three (3) copies of Leave Application Form to Human Resources Department.	1.1 Check all the necessary information needed in the Leave Application Form, if it is properly and completely accomplished.	None	3 minutes	Human Resource Management Officer I Ospital ng Imus - Human Resources Department
	1.2 Check the leave cards and leave credit balance of the employees. Accomplished necessary details for Leave Application Form.	None	10 minutes	Human Resource Management Officer I
	1.3 Submit complete leave application form for signature of the Authorized HRMO personnel.	None	10 minutes	Human Resource Management Officer I Human Resource Management Officer III
	1.4 Submit signed leave application form for signature of the Department Head of the Ospital ng Imus.	None	10 minutes	Messenger Chief of Hospital II
	1.5 Submit to City Administrator the fully accomplished Leave Application Form for signatory.	None	1 day	Messenger
2. Follow-up their filed leave application form.	2.1 Claim the signed Leave Application Form of employees.	None	2 days	Messenger





2.2 Sort the Human Resources Department copy and Employees' copy. Distribute employees' copy.	None	10 minutes	Human Resource Management Officer I Messenger
Fill-out Client Satisfact	tion Rating Form		
TOTAL	None	3 days, 43 minutes	





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3. TIMEKEEPING

CITIZEN'S CHARTER

Timekeeping refers to the monitoring of the employees' attendance. Employees who failed to time in and out during their breaks due to reasonable cause (e.g. assisting patients, etc.) may file for exemption for their attendance. Employees who are tasked to transact on the areas outside the hospital vicinity must file the respective forms in order to be considered as official businesses.

Ine respective forms in order to be conside				
OFFICE OR DIVISION	Ospital ng Imus - Human Resources Department			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Employees of Ospital ng Imus			
CHECKLIST OF I			WHERE TO SEC	
One (1) Copy of Accomplished No Log S		Ospital ng Imus – Hum		
One (1) Copy of Accomplished Change S		Ospital ng Imus – Hum		
Two (2) Copies of Accomplished Individu		Ospital ng Imus – Hum		
Two (2) Copies of Accomplished Group F		Ospital ng Imus – Hum		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. File and submit:	1.1 Check, record and approve	None	2 minutes	Administrative Aide VI
No Log Slip Form – for missed biometric	submitted forms:			Human Resource
data	No Log Slip Form			Management Assistant I
Change Schedule/ Shift For - for				Human Resource
changes in the employees' schedule	Individual Pass Slip			Management Officer I
Individual Pass Slip – for employees who	Group Pass Slip			Human Resource
are on official business within the vicinity.				Management Officer III Human Resources Departme
Group Pass Slip for group of employees				
who are on official business within the	1.2 Submit forms to the Authorized	None	1 day	Messenger
vicinity.	Personnel for signature.	None	rudy	Human Resource
vienny.				Management Officer III
				Chief of Hospital II
				Human Resource
				Management Officer V
	1.3 Submit summary of reports to City	None	1 day	Human Resource
	Government of Imus - Information		-	Management Officer I
	Technology Department for reference.			Human Resource
				Management Assistant I
				Messenger
	TOTAL	None	2 days, 2 minutes	
				73

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4. OTHER EMPLOYEES' REQUESTS

Employees may request their records on the Human Resources Department (HRD) as a requirement for whatever legal purpose it may serve them.

OFFICE OR DIVISION	Ospital ng Imus - Human Resources Department		nerer materer legal pa		
CLASSIFICATION		Simple			
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	Employees of Ospital ng Imus				
CHECKLIST OF REQUIREMENTS			WHERE TO SEC	URE	
One (1) Copy of HRD Request Form		Ospital ng Imus – Hu	man Resources Departi	ment	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Accomplish HRD Request Form.	1. Issue HRD Request Form.	None	1 minute	Human Resource Management Officer III Human Resource Management Officer I Human Resource Manaement Assistant I Messenger	
2. Submit to Human Resources Department the accomplished HRD Request Form.	2.1 Create the requests of employees: Certificate of Employment Pay slip Service Record Certificate of Leave Credit Balance	None	1 day	Human Resource Management Officer III Human Resource Management Officer I Human Resource Management Assistant I Messenger Bookbinder IV - HRMO	
	2.2 Submit the created requests to the authorized signatory:a. Certificate of Employmentb. Service Recordc. Certificate of Leave Credit Balance	None	1 day	Human Resource Management Officer V - HRMO Human Resource Management Officer IV - HRMO Messenger	
	2.3 Release to employees the requested documents.	None	5 minutes	Messenger Ospital ng Imus - Human Resources Department	

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Fill-out Client Satisfaction Rating Form				
TOTAL	None	2 day, 6 minutes		

5. DISBURSEMENTS (CLAIMS)

Settlement of government payables/ obligations by cash or by check.

OFFICE OR DIVISION	Ospital ng Imus – Accounting Department			
CLASSIFICATION	Highly Technical			
TYPE OF TRANSACTION	G2G - Government to Government; G2B - Go	vernment to Business; C	G2C - Government to	Citizens
WHO MAY AVAIL THE SERVICE	All Authorized Representative			
CHECKLIST O	F REQUIREMENTS		WHERE TO SEC	URE
Supporting Documents		Issuing Agency		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit required documents.	1.1 Receives submitted documents by clients.	None	5 minutes	Avelina R. Satorre, Ericka Joy L. Mallillin and Mark D. Estrella Accounting Department
	1.2 Check the completeness of documents and the correctness of the mathematical computation.	None	30 minutes	Avelina R. Satorre, Ericka Joy L. Mallillin and Mark D. Estrella Accounting Department
2. Proceed to City Treasurer's Office and receive the claims and sign the receiving documents.		None	20 days	Mark D. Estrella Accounting Department
	TOTAL	None	20 days, 35 minutes	





6. OBLIGATION REQUEST (OBR)

The procedure aims to establish uniform and standard budget plan and monitoring for the budget request transactions.

		andard budget plan and monito	0 0 1		
OFFICE OR DEPARTMENT		Ospital ng Imus – Budget De	partment		
CLASSIFICATION		Highly Technical			
KIND OF TRANSACTION		G2G Government to Government			
WHO MAY AVAIL THE SERVICE		Accounting and Human Reso	urce Management Depa		
	LIST OF DOCUME			WHERE TO SEC	
Disbursement Voucher & Support			Human Resource Man	<u> </u>	
Purchase Order & Supporting Doc	· · · · · · · · · · · · · · · · · · ·	1	Accounting Departmen		
CLIENT STEPS	AGI	ENCY ACTION	FEES TO BE PAID	PROCESSING TIME	RESPONSIBLE PERSON
1. Submit all the required	1.1. Receives subr	nitted documents by clients.	None	5 minutes	Jose Emmanuel E. Donggon
documents.		mpeleteness of the required	None	10 minutes	Budget Department
		e amounts and computations.			
		request is aligned with the	None	10 minutes	
		nt management plan and if			
		e in accordance with the			
	approved budget.	in a support former (s. t.s. the	Nama		
		ion request form/s to the	None	10 minutes	
	Chief of Hospital.	nature and approval by the		TO minutes	
2. Submit the approved and		mitted signed and approved	None	5 minutes	Jose Emmanuel E. Donggon
signed obligation request by the	obligation reque		None	5 minutes	Budget Department
Chief of Hospital and all its	documents.				Budget Bopartment
supporting documents	doodinionion				
3	2.2 Submit the	Obligation Request and all			
		ents to the City Budget Officer	None	3 days	
	for final approval a	nd signature.			
3. Receives the fully approved		and signed, secure a copy of	None	5 minutes	Jose Emmanuel E. Donggon
and signed Obligation Request		for recording & monitoring,			Budget Department
and all its supporting documents.		he obligation request and all			
	supporting docume				
		Fill-out Client Satisfact	U U		I
		TOTAL	None	3 Days, 45	
				minutes	





7. BUILDING MAINTENANCE

The Engineering and Maintenance Department is responsible in the overall monitoring, maintenance and repair of hospital infrastructure such as construction, plumbing, electrical, etc. The department ensures that the hospital infrastructure is safe for all patients, visitors and its personnel.

	Ospital ng Imus – Engineering and Maintenand	•	<u> </u>	
CLASSIFICATION	Highly Technical	•		
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	All Sections and Departments in Ospital ng Imu	IS		
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE
Job Order Request Form		Engineering and Mainte	enance Department	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Make a call to Engineering and Maintenance Department to report the problem.		None	10 minutes	Engineer II Engineer I Engineering and Maintenance Department
2. End user must fill-up the Job Order Request Form completely.	2. Once the request has been received, check and proceed to the concerned area or department, verify the details in the Job Order Request Form and inform the staff if the concern can be repaired.	None	20 minutes	Engineer II Engineer I Engineering and Maintenance Department
3. End user must wait for the details or results of the assessment performed by the Engineering and Maintenance Personnel.	request to Property and Supplies	None	60 days	Engineer II Engineer I Engineering and Maintenance Department Administrative Officer III Bookkeeper III Property and Supply Department
4. Receive the Job Order Request Form from the Engineering and Maintenance Department for validation.	the following concern in the Facility Monitoring Logbook.	None	15 minutes	Engineer II Engineer I Engineering and Maintenance Department
NOTE: Building Maintonanco - qualifi	TOTAL	None	60 days, 45 minutes	

NOTE: Building Maintenance - qualified for multi-stage processing





8. EQUIPMENT MAINTENANCE

The Engineering and Maintenance Department is responsible in the overall monitoring, maintenance and repair of machinery and equipment. The department ensures that the equipment runs smoothly to reduce the incidence of costly breakdowns through development of action plans.

OFFICE OR DIVISION	Ospital ng Imus – Engineering and Maintenance Department				
CLASSIFICATION	Highly Technical				
	G2G - Government to Government				
	All Sections and Department in Ospital ng Imu	us			
	OF REQUIREMENTS		WHERE TO SEC	URE	
Job Order Request Form		Engineering and Mainte			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Maintenance Department to report the problem.	proceed to the concerned department.	None	10 minutes	Engineer I Engineering and Maintenance Department	
2. End user must fill-up the Job Order Request Form completely.	2. Once the request has been received, check and proceed to the concerned area or department, verify the request form and inform the staff if equipment can be repaired within the area or will be pulled out.	None	20 minutes	Engineer I Engineering and Maintenance Department	
3. End user must wait for the details or results of the assessment performed by the Engineering and Maintenance Personnel.	3. Notify the area if the equipment is repairable. If repairable, verify with the Property and Supply Department if the equipment is under warranty. If yes, the Property and Supply Department Personnel will inform the supplier for repair. If not under warranty, proceed with the repair and replace the parts as needed. Request to the Property and Supply Department for equipment purchase. If the equipment is cannot be repaired, inform the Hospital Administrator for possible outsourcing of repair.	Outsourcing Price	60 days	Engineer II Engineer I Engineering and Maintenance Department Administrative Officer III Bookkeeper III Property and Supply Department	
4. Receive the Job Order Request Form (L3-ENG-001-1/0) from the	4. If the problem is already resolved, accomplish Job Order Request Form.	None	15 minutes	Engineer I Engineering and Maintenance Department	

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Engineering and Maintenance Department for validation.	Note the following concern in the Facility Monitoring Logbook.			
	TOTAL	Outsourcing Price	60 days, 45 minutes	

NOTE: Equipment Maintenance - qualified for multi-stage processing

9. BASIC HOSPITAL INFORMATION SYSTEM SUPPORT

Basic Hospital Information System (HIS) Support covers question & queries regarding the system, ask for assistance, basic tutorials and other minor problems that the end user may encounter.

OFFICE OR DIVISION	Ospital ng Imus – Information Technology Department			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department			
	F REQUIREMENTS		WHERE TO SEC	URE
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call to report a basic system concern or ask for assistance.	1. Take the call and evaluate the concern.	None	2 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
2. Follow some instructions that will be given by the Information Technology Department (ITD) Personnel.	or remote desktop assistance if possible.	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
3. Check and validate if the concern were properly attended.	3. Note the following concern in the Troubleshooting and Monitoring Logbook.	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
	Fill-out Client Satfisfac	tion Rating Form		
	TOTAL	None	12 minutes	



10. MODERATE HOSPITAL INFORMATION SYSTEM SUPPORT

Moderate Hospital Information System (HIS) Support covers network error or runtime of the system, actual assistance, advance tutorials and other difficult problems that the end user may encounter.

problems that the end user may encoun				
	Spital ng Imus – Information Technology De	partment		
	imple			
TYPE OF TRANSACTION	2G – Government to Government			
	Spital ng Imus: Sections and Department			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE			CURE	
Service Request Form		Information Technology	•	
Service Report Form		Information Technology		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call to report the problem regarding Hospital Information System.	•	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
2. Fill out Service Request Form and give to the Information Technology Department (ITD) Personnel.	2.1 Receive the Service Request Form then assess and analyze the problem encountered.	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology
	2.2 Assist the client and fix the existing problem encountered.	None	10 minutes	Department
3. Check if the concern is fixed and properly attended.	3. Accomplish Service Report Form.	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
4. Validate the Service Report Form.	4. Note the concerns in the Troubleshooting and Monitoring Logbook.	None	5 minutes	Rogelio A. Castronuevo III, Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
	Fill-out Client Satfisfac	<u> </u>		
	TOTAL	None	30 minutes	





11. ADVANCE HOSPITAL INFORMATION SYSTEM SUPPORT

Advanced Hospital Information System (HIS) Support covers logical system error, bug, downtime and also updates and upgrades.

	Dspital ng Imus – Information Technology Department				
	Complex				
TYPE OF TRANSACTION	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department				
CHECKLIST O	F REQUIREMENTS		WHERE TO SEC	URE	
Service Request Form		Information Technology	/ Department		
Service Report Form		Information Technology			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Call to report the problem regarding Hospital Information System (HIS).	1. Receive the call and proceed to the concerned department.	None	5 minutes	Rogelio A. Castronuevo III, Information Technology Department	
2. Fill out Service Request Form and give to the Information Technology Department (ITD) Personnel.	2.1 Receive the Service Request Form then assess and analyze the problem encountered.	None	5 minutes	Rogelio A. Castronuevo III, Information Technology Department	
	2.2 Assist the client and fix the existing problem encountered.	None	10 minutes		
 Wait for feedback regarding concern. 	3.1 If the problem cannot be resolved, submit a Bizbox Helpdesk Ticket to ask for technical support.	None	5 minutes	Rogelio A. Castronuevo III, Information Technology Department	
	3.2 Work with the Helpdesk Team and fix the problem encountered by the client.	None	7 days		
	3.3 If the problem is already resolved, accomplish Service Report Form.	None	5 minutes		
 Validate the Service Report Form. 	4. Note the concerns in the Troubleshooting and Monitoring Logbook.	None	5 minutes	Rogelio A. Castronuevo III, Information Technology Department	
	Fill-out Client Satfisfac	tion Rating Form			
	TOTAL	None	7 days and 35 minutes		





12. ADDING ITEM TO HOSPITAL INFORMATION SYSTEM (HIS)

The process of adding additional items to Hospital Information System (HIS) such as medicines, diagnostic examinations, medical supplies and inventory. This may include addition of employee details needed for documentation purposes.

	Ospital ng Imus – Information Technology De	nartment			
	Simple				
	G2G – Government to Government				
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department				
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE	
Item Addition and Modification Form		Information Technology		-	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Accomplish the Requisitioner Par on Hospital Information System – Iten Addition and Modification Form Submit the form for approval to Accounting Department and Office of the Chief of Hospital. Attach related	n f	None	10 minutes	Avelina R. Satorre Accounting Department	
document, if necessary.	1.2 Evaluate the request and modify pricing, if necessary, and endorse the request for approval.	None	15 minutes	Avelina R. Satorre Accounting Department	
	1.3 Approve the request, if found in order. Otherwise, disapprove or make the necessary comment and return to the requisitioner/ accountant.	None	5 minutes	Dr. Gabriel G. Gabriel Office of the Chief of Hospital Avelina R. Satorre Accounting Department	
	1.4 Accomplish the necessary modification as specified on the approved request. Write on the request form the details of the work completed and advise the requisitioner to verify the accomplished task.	None	15 minutes	Rogelio A. Castronuevo III and Lewis Anthony V. Igtiben Information Technology Department	
2. Verify on the Hospital Information System (HIS) if the requested modifications have already taken	 2. Log the necessary data from HIS – Item Addition and Modification Form to the HIS 	None	5 minutes	Rogelio A. Castronuevo III, Information Technology Department	

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signing on the HIS – Item Addition and	 Item Addition and Modification Logbook and file the request form. 			
Modification Logbook.				
Fill-out Client Satfisfaction Rating Form				
TOTAL None 50 minutes				

13. BASIC EQUIPMENT REPAIRS

The process of identifying, troubleshooting and resolving simple problems and issues in a faulty computer and other Information technology (IT) related equipment.

OFFICE OR DIVISION	Ospital ng Imus – Information Technology Department			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department			
CHECKLIST	OF REQUIREMENTS		WHERE TO SEC	URE
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call to report the problem/concerr regarding faulty device/equipment.	n 1. Receive the call and evaluate the concern.	None	2 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
2. Follow instructions given by the IT Personnel.	2. Assist the client via phone instructions or remote desktop assistance if possible.	None	5 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
3. Check and validate the concern in properly attended.	f 3. Note the following concern in the Troubleshooting and Monitoring Logbook.	None	5 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
	Fill-out Client Satfisfac	tion Rating Form		
	TOTAL	None	12 minutes	





14. MEDIUM EQUIPMENT REPAIRS

Usually, hardware fault that requires the physical review of a computer and testing for abnormalities. Suspected components may be individually checked or troubleshooted if an error is detected.

OFFICE OR DIVISION	Ospital ng Imus – Information Technology Department			
CLASSIFICATION S	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Spital ng Imus: Sections and Department			
CHECKLIST OI	FREQUIREMENTS		WHERE TO SEC	URE
Service Request Form		Information Technology	/ Department	
Service Report Form		Information Technology	/ Department	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call to report the problem/concern regarding faulty device/equipment.	1. Receive the call and proceed to the concerned department.	None	5 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
2. Fill out the Service Request Form and submit to the IT Personnel.	2. Receive the Service Request Form, assess and analyze the problem encountered by the client.	None	15 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
3. Wait for the feedback regarding concern.	3. Assist the client and fix the existing problem encountered.	None	1 day	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
4. Receive the Service Report Form from Information Technology Department (ITD) Personnel for validation.	accomplish a Service Report Form. Note the concerns in the Troubleshooting and Monitoring Logbook.	None	10 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
	Fill-out Client Satfisfac	None	1 day and 30	
	TOTAL	INDIG	minutes	





15. ADVANCE EQUIPMENT REPAIRS

Usually, hardware fault that requires the physical review of a computer and testing for abnormalities. Suspected components may be individually checked, troubleshooted or replaced if an error is detected.

troubleshooted of replaced if an error is	uelecleu.			
	Ospital ng Imus – Information Technology Department			
CLASSIFICATION	Complex			
	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department			
CHECKLIST C	F REQUIREMENTS		WHERE TO SEC	URE
Service Request Form		Information Technolo		
Service Report Form		Information Technolo		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call to report the problem/concern	•	None	5 minutes	Kris Anthony S. Brillantes and
regarding faulty device/equipment.	concerned department.			Lewis Anthony V. Igtiben
				Information Technology
				Department
2. Fill out the Service Request Form	• • • • • • • • • • • • • • • • • • •	None	5 minutes	Kris Anthony S. Brillantes and
and submit to the information	, , , , , , , , , , , , , , , , , , ,			Lewis Anthony V. Igtiben
Technology Department (ITD)				Information Technology
Personnel.	2.2 Assist the client and fix the existing	Nama		Department
	problem encountered.	None	10 minutes	
3. Wait for the feedback regarding		None	5 minutes	Kris Anthony S. Brillantes and
concern.	the Property and Supply Department and the end-user. Fill out the Job Order			Lewis Anthony V. Igtiben
	Request.			Information Technology Department
4. Submit the Job Order Request to	4. Replace the equipment if there is a	None	2 weeks	Kris Anthony S. Brillantes and
the Property and Supply Department.	spare part/unit available, otherwise, client	NONE	Z WEEKS	Lewis Anthony V. Igtiben
the Property and Supply Department.	will have to wait for the replacement. If the			Information Technology
	problem has been resolved, accomplish a			Department
	Service Report Form.			Dopartinont
5. Receive the Service Report Form	5. Note the concerns in the	None	5 minutes	Kris Anthony S. Brillantes and
from ITD Personnel for validation.	Troubleshooting and Monitoring			Lewis Anthony V. Igtiben
	Logbook.			
	Fill-out Client Satfisfac	tion Rating Form		•
	TOTAL	None	2 weeks and 30	
			minutes	





16. CCTV – VIDEO RECORDING USE AND DISCLOSURE

The installation, configuration, testing, maintenance and repair of Close Circuit Television (CCTV) systems, including its server, uninterruptible power supply and data storages including cameras installed within the hospital premise and peripherals. It includes but not limited to the retrieval and/or copying of video record footages for purposes of legal and administrative cases, or for any other reasons upon the approval of the Chief of Hospital.

OFFICE OR DIVISION	Ospital ng Imus – Information Technology Department			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	Ospital ng Imus: Sections and Department			
	REQUIREMENTS		WHERE TO SEC	CURE
CCTV Playback Request Form		Information technology	Department	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the Information Department Personnel (External) or Information Technology Department (ITD) Personnel (Internal) to signify request for disclosure of video	1.1 Refer to the IT Personnel if the requisitioner is an external client.	None	5 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
recording.	1.2 Ask the reason for the disclosure of recording and evaluate if valid. If valid, advise client to make a written request and state the reason for making such request. If not valid, explain to the client that the request is not granted.	None	5 minutes	Joseph M. Padlan Information Technology Department
	1.3 Evaluate the written request and ask for additional documents, if necessary.	None	5 minutes	Joseph M. Padlan Information Technology Department
	1.4 If the request is found valid, submit the request and supporting documents to the Office of the Chief of Hospital for approval. If request is not valid, return it to the requisitioner and explain the reason for non-disclosure of video recording.	None	30 minutes	Joseph M. Padlan Information Technology Department

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	TOTAL	None	5 hours	
2. View or secure a file copy of the video recording and sign a corresponding document that he/she viewed or received a file copy of the video recording.	to the client. File the written request and	None	30 minutes	Kris Anthony S. Brillantes and Lewis Anthony V. Igtiben Information Technology Department
	the specific video recording specifically indicated on the request. If the request is not approved, inform or explain to the client the reason/s for such order.			Lewis Anthony V. Igtiben Information Technology Department
	 approved or not. ** If the request is not approved, return it with comments or for further completion of supporting documents. 1.6 If the request is approved, search for the request is approved. 	None	2 hours	Office of the Chief of Hospital Kris Anthony S. Brillantes and
	1.5 Evaluate if the request can be	None	2 hours	Dr. Gabriel G. Gabriel





17. RECEIPT OF DELIVERIES OF EQUIPMENT, SUPPLIES AND MEDICINES

The Property and Supply Department ensures the completeness of delivered medications and supplies, as well as specifications required of the equipment are met based on Purchased Order issued by the General Service Office.

OFFICE OR DIVISION	Ospital ng Imus - Property and Supply Dep	partment		
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G - Government to Government, G2B -	- Government to Busir	ness	
WHO MAY AVAIL THE SERVICE	Ospital ng Imus Suppliers			
CHECKLIST OF	REQUIREMENTS		WHERE TO SECU	URE
Two (2) Photocopies of Delivery Receipt		Ospital ng Imus Sup	olier	
Two (2) Photocopies of Sales Invoice		City Government of I	mus - General Service C	Office
Two (2) Photocopies of Purchase Order		City Government of I	mus - General Service C	Office
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present required documents to Property and Supply Department Personnel.	documents.	None	5 minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
2. Deliver items.	2. Check and receive the delivered items if complete and in accordqnce with the Purchase Order (PO) specifications.	None	2 hours	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
3.Receive the signed invoice/delivery receipt.	3. Acknowledge the items delivered and sign the original invoice/Delivery Receipt (DR).	None	10 minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
	TOTAL	None	2 hours, 15 minutes	



18. INSPECTION OF DELIVERED ITEMS/ SUPPLIES

The Property and Supply Department ensures the completeness of delivered medications and supplies through inspection, as well as specifications required of the equipment are met based on Purchased Order issued by the General Service Office.

OFFICE OR DIVISION	Ospital ng Imus - Property and Supply Department			
CLASSIFICATION	Simple			
TYPE OF TRANSACTION	G2G – Government to Government			
WHO MAY AVAIL THE SERVICE	City Government of Imus Personnel (Gener	al Service Office, Com	mission on Audit)	
CHECKLIST OF	F REQUIREMENTS		WHERE TO SECU	JRE
Two (2) Photocopies of Delivery Receip	ot	Ospital ng Imus Sup	olier	
Two (2) Photocopies of Sales Invoice		Ospital ng Imus Sup	olier	
Two (2) Photocopies of Purchase Orde	r	City Government of I	mus – General Service C	Office
Original Copy of Warranty Certificate		Ospital ng Imus Supplier		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Check the completeness of documents.	1. Present the required documents to the General Service Office/Commission on Audit personnel.	None	10 minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel
2. Check, receive and count the	2. Document the delivered items.	None	2 hours	Property and Supply Department Mark Joffrey A. Diato
delivered items if complete and in accordance with the Purchase Order (PO) specifications.				Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
	TOTAL None 2 hours, 10 minutes			





19. REQUISITION AND RELEASING OF SUPPLIES

The department ensures the completeness and accuracy of the requested items are delivered and issued to the requesting department.

	Completeness and accuracy of the requested items are delivered and issued to the requesting department.			
	Ospital ng Imus - Property and Supply Department			
	Simple			
	G2G – Government to Government			
	Ospital ng Imus Personnel			
SERVICE				
	OF REQUIREMENTS	Drenerty and Cymelia	WHERE TO SECU	JRE
Two (2) Copies of Request Slip	aviation Oline Three (2) Coning for	Property and Supplie		
Two (2) Copies of Stock/Expense Re consigned items		Property and Supplie		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request the needed supplies through Hospital Information System (HIS).		None	10 minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
2. Receive the items from Property and Supply Department Personnel.	 2. Prepare and count the items to be dispensed and released to the requesting department. 	None	30 Minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
3. Countercheck if the supplies received are complete.	s 3. Post the actual number of items that have been dispensed.	None	30 Minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
4. Sign the issued Stock/Expense Requisition Slip by the Property and Supply Department Personnel.	d Stock/Expense Requisition Slip.	None	5 Minutes	Mark Joffrey A. Diato Jeffrey A. Campat Gabriel Carl S. San Miguel Property and Supply Department
	Fill-out Client Satisfac	tion Rating Form		
	TOTAL	None	1 hour, 15 minutes	



20. CONTROL OF DOCUMENTED INFORMATION

This procedure aims that all documents are approved prior to use, changes and revisions are determined, updated versions are available, documents are understandable, documents of external origin are identified, controlled and obsolete documents are prevented from intended use.

-				
	Ospital ng Imus – Quality Management Services			
	Highly Technical			
	G2G – Government to Government			
	Ospital ng Imus: Sections and Department			
	OF REQUIREMENTS		WHERE TO SEC	URE
Documents for Review and Approval		Ospital ng Imus - Section		
Document Change Request Form		Ospital ng Imus - Quali	, ,	
Document Distribution Matrix		Ospital ng Imus - Quali		
Document Distribution and Retrieval I	Form	Ospital ng Imus - Quali	, ,	
Document Dissemination Form		Ospital ng Imus - Quali		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the documented information for review.	1.1 Receive the documented information for review.	None	3 minutes	Anna Rose B. Frani-Dagdag and Kristel Abbie P. Laroza Quality Management Services
	1.2 Review and revise the documented information.	None	10 days	Anna Rose B. Frani-Dagdag and Kristel Abbie P. Laroza Quality Management Services
2. Review the documented information and notify the Total Quality Management Personnel regarding the necessary changes.	2. Verify with the process owner and departments involved in the process if there are any necessary changes to be made. If the document is for revision, apply the necessary changes.	None	3 days	Anna Rose B. Frani-Dagdag and Kristel Abbie P. Laroza Quality Management Services
3. Sign in the Document Change Request Form.	3.1 Acquire the signature of the process owner or the department head and let them sign in the Document Change Request Form.	None	1 day	Anna Rose B. Frani-Dagdag and Kristel Abbie P. Laroza Quality Management Services
		None	5 minutes	
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	TOTAL	None	15 days, 1 hour and 8 minutes	
5. Sign the Document Distribution and Retrieval Form and complete the Document Dissemination Form.	5. Disseminate the controlled copy to the concerned departments.	None	1 hour	Anna Rose B. Frani-Dagdag, Kristel Abbie P. Laroza and Jahnin L. Aggalot Quality Management Services
4. Identify the departments that will be given a controlled copy.	4. Submit the Document Distribution Matrix and notify the process owner to identify the concerned departments to be given a controlled copy.	None	1 day	Kristel Abbie P. Laroza Quality Management Services
	3.2 Submit the documented information to Chief Administrative Office and Office of the Chief of Hospital for their approval.			





21. STATEMENT OF FACTS REPORT

This consist of the incident reports, complaints and non-compliance with regards to processes and services in the hospital. Concerns submitted will be investigated if valid. Corrective and preventive actions are taken to ensure that the problem will not happen again in the future. Monitoring of the preventive actions taken will be conducted by the Quality Management Services.

taken will be conducted by the Quality				
	Ospital ng Imus – Quality Management Services			
	Highly Technical			
TYPE OF TRANSACTION	G2G- Government to Government; G2C- Government to Citizen			
	All			
	T OF REQUIREMENTS WHERE TO SECURE			
Statement of Facts Report		Ospital ng Imus – Quality Management Services		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Identify the nonconformity and report it to the Quality Management Services		None	3 minutes	Anna Rose B. Frani-Dagdag and Kristel Abbie P. Laroza Quality Management Services
	1.2 Investigate and determine if the issue or concern is valid.	None	*2 days	Anna Rose B. Frani-Dagdag Quality Management Services
2. Receive the nonconformity and respond to the issues and concerns appropriately.	· · · · · · · · · · · · · · · · · · ·	None	5 minutes	Anna Rose B. Frani-Dagdag Quality Management Services
3. Submit the Statement of Facts Report form to Quality Management Services Department.		None	2 minutes	Anna Rose B. Frani-Dagdag Quality Management Services
	3.2 Check if the corrective and preventive actions are valid.	None	10 minutes	
	3.3 Submit a copy of the Statement of Facts Report to the Office of the Chief of Hospital, Chief of Administrative Office and Human Resources Department.		10 minutes	
4. Implement the necessary corrective and preventive actions to be taken to prevent the recurrence of the incident.	preventive actions are implemented after one (1) week, three (3) weeks and six (6) weeks from the date of implementation.	None	6 months	Anna Rose B. Frani-Dagdag Quality Management Services

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For processes, verification is after one (1) month, three (3) months and six (6) months.			
TOTAL	None	6 months, 2 days and 30 minutes	

NOTE: Statement of Facts Report – Qualified for Multi-Stage Processing





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FEEDBAC	FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback?	Accomplish our Feedback Form and drop it in the suggestion			
	box provided.			
How feedbacks are processed?	Everyday, personnel in the Office of the City Administrator collects all the Client Satisfaction Rating Form in the Suggestion Boxes located in various areas of the city hall. The feedback will be encoded in the Client Satisfaction Database being handled by the Office of the City Administrator. A memorandum will be sent to a department in case of bad feedback to caught their attention.			
How to file a complaint?	Clients may directly file their complaint in the Office of the City Administrator and fill-out the Complaint Form. Complaints received in different action centers are addressed in accordance to the guidelines. You may also email the following: cityofimus.complaints@gmail.com complaints@arta.gov.ph			
How complaints are processed?	Personnel from the Office of the City Administrator are always available in addressing different complaints. A memorandum will be sent to a department in case of bad feedback to caught their attention.			
Contact Information	 Official Website: www.cityofimus.gov.ph E-mail: cityofimus.complaints@gmail.com (Admin Office) 0992-861-8984 (ARTAwag Center) 0965-672-4943 and 0916-266-3138 for Globe and TM users and 0969-257-7242 and 0969-516- 7765 for Smart, TNT, and Sun. (Citizen's Compliant Center) 8888 			





OFFICE CONTACT INFORMATION				
OFFICE	ADDRESS	E-MAIL		
City Treasurer's Office	GF Imus City New Government Center, Malagasang I-	ctoimus@gmail.com		
	G, City of Imus, Cavite			
Business Permits and Licensing Office	GF Imus City New Government Center, Malagasang I-	imusbplo@gmail.com		
	G, City of Imus, Cavite			
City Civil Registrar's Office	GF Imus City New Government Center, Malagasang I-	ccro.imus@gmail.com		
	G, City of Imus, Cavite			
Office of the Senior Citizens Affairs	GF Imus City New Government Center, Malagasang I-	oscaofficeimus@gmail.com		
	G, City of Imus, Cavite			
Persons with Disability Affairs Office	GF Imus City New Government Center, Malagasang I-	cityofimuspdao@gmail.com		
	G, City of Imus, Cavite			
City Social Welfare and Development Office	GF Imus City New Government Center, Malagasang I-	cswdo.imus@gmail.com		
	G, City of Imus, Cavite			
Local Economic and Development Investment	GF Imus City New Government Center, Malagasang I-	imuscity.ledipo@gmail.com		
Promotions Office	G, City of Imus, Cavite			
Office of the City Assessor	GF Imus City New Government Center, Malagasang I-	imus.assessor2020@gmail.com		
	G, City of Imus, Cavite			
City Information Office	2F Imus City New Government Center, Malagasang I-	imuscityinformationoffice@gmail.com		
	G, City of Imus, Cavite			
City Tourism and Development Office	2F Imus City New Government Center, Malagasang I-	imuscitytourismoffice@gmail.com		
	G, City of Imus, Cavite			
City Disaster Risk Reduction Management	2F Imus City New Government Center, Malagasang I-			
	G, City of Imus, Cavite;			
	Anabu Aksyon Agad Center, Anabu I-B; Bucandala			
	Operation Center, NIA Road, Bucandala 3;			
	Malagasang Aksyon Agad Center, Greengate	imuscdrrmo@gmail.com		
	Subdivision, Malagasang II-A; Espeleta Aksyon Agad	-		
	Center, Mariano Espeleta II;Plaridel Logistic Hub,			
	Bayan Luma 7			
City of Imus Cooperative, Livelihood and Entrepreneurial,	2F Imus City New Government Center, Malagasang I-	imuscoopoffice@yahoo.com		
and Enterprise Development Office	G, City of Imus, Cavite			



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City Veterinary Services Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imuscityvet@gmail.com
City of Imus Traffic Management Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	cityofimustrafficmo@gmail.com
Population Development Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	popdevimus01@gmail.com
Tricycle Regulatory Unit	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	truofficeimus@gmail.com
City Agricultural Services Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imus.agriculture@gmail.com
City Parks and Historical Sites Administration Unit	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imushrfocal.parks@gmail.com
City of Imus Sports Development Unit	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	csdu2016@gmail.com
Public Employment Services Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	cityofimusemployment@gmail.com
Office of the Building Official	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imusbuildingoffice@gmail.com
City Planning and Development Office	2F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	cpdoimus@gmail.com
Office of the Congressman – Aksyon Center	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	konsi.adrian.advincula@gmail.com
City Budget Office	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	ncamia@gmail.com
City Environment and Natural Resources Office	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imuscavcenro@gmail.com
Youth Affairs Office	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imuscityyouthaffairsr4a@gmail.com
Human Resource Management Unit	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imus.hrmo2022@gmail.com
Civil Security Unit	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imuscsu2022@gmail.com



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Office of the City Administrator	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imus.admnoffice@gmail.com
Office of the City Mayor	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	officeofthecitymayor.imus@gmail.com
City Accounting Office	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	acctgimuscity@gmail.com
City Legal Office	3F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	syjucoimus2022@gmail.com
City Engineering Office	4F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imusengineeringofc@gmail.com
City Architectural Design and Planning Office	4F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imus.danielseno@gmail.com
General Services Office	4F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imus.gso2022@gmail.com
City Information Technology and Records Management Unit	4F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	ictimus.vmmendoza@gmail.com
Gender and Development Unit	4F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	kenneth.caaya0826@gmail.com
Office of the City Vice Mayor	5F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	vmoffice.imus@gmail.com
Sangguniang Panlungsod Office	5F Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	imushrfocal.sp@gmail.com
Imus City Public Library	LG Imus City New Government Center, Malagasang I- G, City of Imus, Cavite	cityofimuslibrary@gmail.com
City Health Office	City Health Building, Tahimik St., Poblacion IV-B, City of Imus, Cavite	chomainofficial@gmail.com
Economic Enterprise Management Office	Imus Public Market, Tanzang Luma I, City of Imus, Cavite	eemo.imuspublicmarket@gmail.com
City of Imus Polytechnic Institute	Emilio Aguinaldo Highway, Anabu I-B, City of Imus, Cavite	imuspolytechnic@gmail.com
Imus Vocational and Technical School	Cavite Civic Center, Palico IV, City of Imus, Cavite	ivtsimuscity@gmail.com
Satellite Office	2F The District Imus, Anabu II0E, City of Imus, Cavite; 3F Robinson's Place Imus, City of Imus, Cavite	satelliteofc.imus@gmail.com

CITIZEN'S CHARTER



City Extension Office	Bahayang Pag-Asa, City of Imus, Cavite	imuscityextensionoffice@gmail.com
City of Imus Molecular Laboratory	Pedro Reyes St., Malagasang I-A. City of Imus, Cavite	cimlinformation2@gmail.com
Ospital Ng Imus	Pedro Reyes St., Malagasang I-A. City of Imus, Cavite	oniqualitymanagement@gmail.com





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