

**(FIRE STATION LETTER HEAD)**

APPLICATION NO. \_\_\_\_\_

\_\_\_\_\_ Date

(To be filled up by applicant/owner)

Name of Applicant/Owner \_\_\_\_\_  
Type of Building/Occupancy \_\_\_\_\_  
Total Number of Floors \_\_\_\_\_  
Total Floor Area \_\_\_\_\_  
Location/Address of Building/Establishment/Construction \_\_\_\_\_

**Requirements Submitted:** (To be checked/filled up by the Customer Relations Officer)

<input type="checkbox"/> <b>FIRE SAFETY EVALUATION CLEARANCE (FSEC)</b>	<input type="checkbox"/> <b>FIRE SAFETY INSPECTION CERTIFICATE (FSIC) FOR OCCUPANCY PERMIT OR BUSINESS PERMIT</b>
<input type="checkbox"/> Endorsement from the Building Official (BO)  <input type="checkbox"/> Three (3) Sets of Building Plans and Specifications  <input type="checkbox"/> One (1) Set of Bills of Materials and Cost Estimate  <input type="checkbox"/> Three (3) Sets of Detailed Fire Safety Plans and Specification or Fire And Life Safety Assessment Report-1 (FALAR-1) for Occupancy of at least 50 persons	<input type="checkbox"/> Endorsement from Building Official (BO)/Business Permit Licensing Office (BPLO)  <input type="checkbox"/> Photocopy of Building Permit and Assessment of Occupancy Permit Fee/ Assessment of Business Permit Fee/BPLO Assessment/Tax Bill for Business Permit as the case maybe  <input type="checkbox"/> Copy of Fire Insurance Policy (If Any)  <input type="checkbox"/> Copy of Latest Fire Safety Inspection Certificate Immediately Preceding this Application (If Any)  <input type="checkbox"/> Three (3) sets of Fire and Life Safety Assessment Report-2 (FALAR-2) for Occupancy permit or FALAR 3 for Business Permit (For Occupancy of at least 50 Persons)

\_\_\_\_\_  
SIGNATURE OF APPLICANT/OWNER

Time and Date Received: \_\_\_\_\_  
Due for Release (FSEC with FS Checklist): \_\_\_\_\_  
(FSIC/NTC): \_\_\_\_\_

Certified By:

\_\_\_\_\_  
Customer Relations Officer

*Note: Only application with complete requirements shall be processed.*

**CLAIM STUB**

APPLICATION NO. \_\_\_\_\_

\_\_\_\_\_ Date

NAME OF APPLICANT/OWNER: \_\_\_\_\_  
Time and Date Received: \_\_\_\_\_  
Due for Release (FSEC with FS Checklist): \_\_\_\_\_  
(FSIC/NTC): \_\_\_\_\_

Certified By:

\_\_\_\_\_  
Customer Relations Officer

**“FIRE SAFETY IS OUR MAIN CONCERN”**