

FORM C-3

*Pls fill-up all blanks legibly and completely.
Please type N/A if not applicable.*

Account Number to be changed:	_____
Account Name to be changed:	_____
Classification:	_____
Pipe Size:	_____
Meter Name and Number:	_____
Reason for Changing the Account Name:	<input type="checkbox"/> A Death of Account Holder <input type="checkbox"/> B Waive Account
Date Changed to New Account Name:	_____
OR. No. for Change Name:	_____

BAYAWAN WATER DISTRICT

CCC-221

APPLICATION FORM FOR CHANGE OF WATER SERVICE CONNECTION ACCOUNT NAME

(To be filled-up by Applicant)

Date of Application:	_____		
Name of New Applicant:	_____		
	(Last Name/Apellido)	Given Name/Ngalan	Middle Name
Date of Birth:	<input type="text"/> / <input type="text"/> / <input type="text"/> <small>MONTH DAY YEAR</small>	Age: <input type="text"/> Edad	Civil Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow <input type="checkbox"/>
Present Address:	_____		
	No. Blk. Lot Street	Phase/Zone	Barangay
Installation Address:	_____		
	No. Blk. Lot Street	Phase/Zone	Barangay
Please Check:			
House made principally of:	<input type="checkbox"/> Wood	<input type="checkbox"/> Concrete	Years of Stay: _____ <input type="checkbox"/> Owned
Type of Connection:	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Rented

PERSONAL INFORMATION:	
Mobile Number: _____	Name of Spouse: _____
Telephone Number: _____	Occupation: _____
Occupation: _____	Total Number of Dependents: _____
Name of Employer: _____	Number of Household Members: _____
Employer Address: _____	
_____	<i>With my Consent:</i>
Signature over Printed Name of Applicant	Signature over Printed Name of Spouse

A - (To be filled-up by BAWAD) - Change of Account Name due to death of Account Holder

REQUIREMENTS SUBMITTED:
<input type="checkbox"/> Death Certificate of the deceased spouse
<input type="checkbox"/> Marriage Contract (To change account name to spouse)
<input type="checkbox"/> Birth Certificate (To change account name to next to kin residing with the account holder)
<input type="checkbox"/> Change Name Fee of Php 50.00 -- OR. No. _____
<input type="checkbox"/> Any valid ID -- ID Presented: _____ ID. No. _____

B - (To be filled-up by BAWAD) - Waiving of Water Service Connection to another owner

REQUIREMENTS SUBMITTED (Waive Account) :
<input type="checkbox"/> Tax Declaration/House Declaration -- House Declaration No. _____
<input type="checkbox"/> Certification (GK Village applicants) -- Date issued: _____
<input type="checkbox"/> Lot Owner's Consent / Authorization -- date Issued: _____
<input type="checkbox"/> Contract of Lease (if renting)
<input type="checkbox"/> Barangay Clearance -- Date Issued: _____
<input type="checkbox"/> Community Tax Certificate -- Res. Cert No. of Applicant _____ Issued on: _____ at: _____
<input type="checkbox"/> Deed of Sale
<input type="checkbox"/> Business Permit / Building Permit
<input type="checkbox"/> Any valid ID -- ID Presented: _____ ID. No. _____
<input type="checkbox"/> Orientation Seminar -- Date Attended: _____ Conducted by: _____

To be signed by the new Applicant for waiving of Water Service Connection to another owner.

Received & Processed by:	Recommending Approval:	APPROVED BY:
_____	GINALYN P. PIOSCA	ALMA L. ABRASALDO
<i>Signature Over Printed Name</i>	Division Manager C	BAWAD, General Manager C

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