

Province of Cagayan
Province of Cagayan
TUGUEGARAO CITY
Office of the City Mayor

APPLICATION FOR LOCATIONAL CLEARANCE/CERTIFICATE OF ZONING COMPLIANCE

1. Name of Applicant	2. Name of Corporation
3. Address of Applicant/Telephone No.	4. Address of Corporation
5. Name of Authorized Representative	6. Address of Authorized Representative
7. Project Type	8. Project Nature
	<input type="checkbox"/> New Development
	<input type="checkbox"/> Improvement <input type="checkbox"/> others
9. Project location	10. Project Area (sq.m)
	Lot _____
	Building (s) Improvement
11. Right Over Land	12. Project Nature
<input type="checkbox"/> Owner	<input type="checkbox"/> Permanent
<input type="checkbox"/> Others (specify)	<input type="checkbox"/> Temporary
13. Existing Land Use of Project Site	
<input type="checkbox"/> Residential	<input type="checkbox"/> Industrial
<input type="checkbox"/> Others (specify)	<input type="checkbox"/> Agricultural (specify crops)
	<input type="checkbox"/> Tenanted
	<input type="checkbox"/> Non-Tenanted
14. Project Cost/Capitalization (In pesos, written words and Figure)	
15. Is the project applied for subject of written notice(s) from this Office and/or Zoning Administrator to the effect requiring for presentation of locational clearance/ or to apply for locational clearance	
<input type="checkbox"/> yes <input type="checkbox"/> no	
15. a Name of OFFICIAL OR Zoning Administrator who issued the notice (s)	
15. b Date (s) of notice (s)	
Others/requests indicated in the notice(s)	
16. Is the project applied for the subject of similar application(s) was/were filed:	
16.a. Other Office (s) where similar application(s) was/were filed:	
16.b. Date(s) Filed	
17. Preferred mode of release of decision:	
<input type="checkbox"/> Pick-up	<input type="checkbox"/> By mail address to
18. Signature of Applicant	19. Signature of Authorized Representative

Republic of the Philippines)
Province of _____)
_____)

Subscribed and sworn to me this _____ day of _____ 200__ in the city
of _____, Province of _____ affiant exhubited to me
his CTC No. _____ Issued at _____
on _____.

NOTARY PUBLIC

DOC. No. _____
Page No. _____
Book No. _____
Series of _____

DOCUMENTARY REQUIREMENTS FOR LOCATIONAL CLEARANCE

TWO (2) SETS OF THE FOLLOWING:

1. Any of the following requirements relative to RIGHT OVER LAND

a. Certified True Copy of Certificate of Title (at least one month before the application). In case registered in the name of the applicants

b.1 certified true copy of latest tax declaration; and

b.2 affidavit to the effect that:

- * The applicant is the owner of the property subject of the application;
- * The reasons why the property is not yet titled;
- * That the property is situated within alienable and disposable lands and outside land reserved for the public domain;
- * That the property is free from liens and encumbrances, or stating the liens and encumbrances of the property;
- * That the property is not tenanted (in case the property is planted to rice & corn)

c. In case the property is not registered in the name of the applicant, submit duly notarized Deed of Sale or Deed of donation, or Contract of Lease or Authorization to Use land, whichever is applicable of title or in the absence of title, the tax declaration and pro-forma affidavit as described in item (b) hereof.

2. SKETCH PLAN/VICINITY MAP duly signed by a licensed Geodetic Engineer showing the existing land uses within the prescribed radius from the lot boundary of the project site.

3. Complete set of Building Plans with Site Development plan showing the project site lot area boundaries and dimensions of proposed improvement within the project site; the plan shall be drawn to scale.

4. BILL OF MATERIALS/PROJECT COST ESTIMATES

5. FILING AND LEGAL RESEARCH FEES