

## **CITY GOVERNMENT OF LEGAZPI**

CITIZEN'S CHARTER HANDBOOK 2024 (1<sup>st</sup> EDITION)





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## **2024 STRATEGY MAP**



#### VISION:

LEGAZPI CITY: A PREMIER CONVENTION DESTINATION IN THE PHILIPPINES.

#### **MISSION:**

The City Government of Legazpi promotes inclusive economic growth and sustainable development through effective and efficient services strengthened by the active participation of all stakeholders, within a safe environment.





## INTEGRITY

Our actions and decisions are guided by the highest ethical standard.

**COMMON GOOD** 

02

04

## We selflessly uphold the general welfare of all.

## COMMITMENT

03

We fulfill our mandate with perseverance, compassion and flexibility.

COMPETENCE

We continuously upgrade our knowledge and skills in order to provide excellent service.

# CREDO

#### WE BELIEVE THAT ...

GOD, IN HIS INFINITE WISDOM AND GENEROSITY, GUIDES EVERY MAN TOWARDS THE PATH OF HAPPINESS AND THE GOOD LIFE, OUR COUNTRY IS ENDOWED WITH BOUNTIFUL RESOURCES AND ITS PEOPLE GIFTED WITH STERLING QUALITIES OF PATIENCE, INTELLIGENCE AND STRENGTH TO MEET WHATEVER CHALLENGE MAY COME THEIR WAY, TRUE DEVELOPMENT IS BEST GUIDED BY THE DEMOCRATIC IDEALS OF SOCIAL JUSTICE, FREEDOM AND PEOPLE EMPOWERMENT, WITH ITS RICH RESOURCES AND FAVORABLE GEOGRAPHIC LOCATION, LEGAZPI CITY IS ENDOWED WITH THE POSSIBILITY OF SERVING AS CENTER OF TRADE AND INDUSTRY IN SOUTHERN LUZON. IN SUPPORT OF THE NATIONAL DEVELOPMENT VISION. THE CITY GOVERNMENT OF LEGAZPI PROPELLED AS IT IS BY THE COMMITTED AND VISIONARY LEADERSHIP OF ITS OFFICIALS WILL BE ABLE TO BRING THE COMMUNITY TO HIGHER LEVELS OF ACHIEVEMENT FOR THE GOOD OF ALL. THE WORKERS IN THE CITY GOVERNMENT OF LEGAZPI ARE ALL COMMITTED TO SERVE THE PEOPLE TO THE BEST OF THEIR ABILITY IN AN ATMOSPHERE OF MUTUAL RESPECT AND DIGNITY, PERSONAL DISCIPLINE, INDUSTRY AND PERSEVERANCE OF EVERY LEGAZPEÑO SHALL ENABLE US TO HELP ACHIEVE THE BEAUTIFUL AND INTRINSIC VISION OF THE CITY'S FUTURE.



CITY GOVERNMENT OF LEGAZPI



## **OFFICE MANDATE**

#### **CITY MAYOR'S OFFICE (CMO)**

- 1. Exercise of general supervision and control overall programs, project, services and activities of LGU;
- 2. Enforce all laws and ordinances relative to the governance of the LGU in the exercise of corporate powers; and
- 3. Ensure the delivery of basic services and provision of adequate facilities

#### CMO – CITY COOPERATIVE DEVELOPMENT OFFICE

(1) Formulate measures for consideration of the Sanggunian and provide technical assistance and support to the Mayor, as the case may be, in carrying out measure to ensure the delivery of basic services and provision of facilities through the development of cooperatives, and in providing access to such services and facilities.

(2) Develop plans and strategies on cooperative programs and projects and implemented them upon approval thereof by the Mayor, as the case may be.

(3)Assist in the promotion, organization, supervision and development of cooperatives.

(4) Assist cooperatives in establishing linkages with NGAs and NGOs involved in the promotion and integration of the concept of cooperatives in the livelihood project of the people and other community services.

(5) Front liner in cooperatives organization, rehabilitation or viability enhancement particularly during and in aftermath of man-made and natural calamities, to aid in their survival and if necessary, subsequent rehabilitation.

(6) Recommend to the Sanggunian, and advice the Mayor, as the case may be, on all other matters relative to cooperatives development and viability-enhancement which will provide the livelihood and quality of life of the people.

(7) Exercise such other powers and perform such other duties and functions as may be prescribed by law or ordinance.



#### **CMO- URBAN POOR AFFAIRS**

The Urban Poor Affairs is mandated to implement RA 7279 Urban Development and Housing Act (UDHA Act of 1992) particularly focusing on socialized housing and resettlement programs for the city's underprivileged and homeless citizens and informal settlers.

#### **CMO- CITY TOURISM SERVICES DIVISION**

The City Tourism Services Division is mandated to encourage, promote and help develop tourism as one major socio-economic activity to generate local employment and increase the economic status with a collaborative approach to sustainable and inclusive Tourism Development. The City Tourism Services Division assures the safe, convenient, enjoyable stay and travel of foreign and local tourists in the city.

#### **CMO- ECONOMIC ENTERPRISE MANAGEMENT DIVISION**

To regulate the operation and maintenance of public market, and enforce strict compliance of ordinance relative to the operation and management of the Public Market.

#### **CITY ADMINISTRATOR'S OFFICE**

- Provide support to the Local Chief Executive in the exercise of general supervision and control over all programs, projects services and activities of the LGU; enforcing all laws and ordinances relative to the governance of the LGU in the exercise of corporate powers; and ensuring the delivery of basic services and the provision of adequate facilities.
- 2. Assist and coordinate with the local officials in matters relative to the management and the city government administration.

#### **CITY TREASURER'S OFFICE**

The City Treasurer's Office takes custody and exercise proper management of the funds of the Local Government Unit. Take charge of the disbursement of all Local Government funds entrusted to him by law. Inspect private commercial and industrial establishment in relation to the implementation of tax ordinances and maintain and update the tax information system of the Local Government Unit.



#### CITY ACCOUNTANT'S OFFICE

To take charge of both the Accounting and Pre-audit Services and act as custodian of the books of accounts of the Local Government Unit; Review supporting documents before preparation of vouchers to determine completeness of requirements; and Prepare and submit financial statements to the Local Chief Executive and the Sanggunian.

#### CITY BUDGET OFFICE

The City Budget Office provides for periodic review and disclosure of the budgetary status of the local government and carries out all City Government activities under a comprehensive development and fiscal planning prepared, authorized and executed in accordance with prevailing status, administrative regulations and the principles of sound fiscal policy; Review and consolidate budget proposals of different departments and offices of the LGU; Assist the LCE in the Preparation of the annual and supplemental budgets; and study and evaluate budgetary implications of the proposed legislation and submits comments and recommendation thereon.

#### CITY PLANNING AND DEVELOMENT OFFICE

- 1. Formulate integrated economic, social, physical, and other development plans and policies for consideration of the local government development council.
- 2. Conduct continuing studies, researches and training programs necessary to evolve plans and programs for implementation.
- 3. Integrate and coordinate all sectoral plans and studies undertaken by the different functional groups or agencies and promote people participation in development planning.
- 4. Monitor and evaluate the implementation of the different development programs, projects and activities in the Local Government Unit concerned.
- 5. Prepare comprehensive plans and other development planning documents for the consideration of the local development council.
- 6. Analyze the income and expenditure patterns and formulate and recommend fiscal plans and policies for consideration of the finance committee.

#### CITY LEGAL OFFICE

(1) Formulate measures for the consideration of the Sanggunian and provide legal assistance and support to the mayor in carrying out the delivery of basic services and provisions of adequate facilities as provided for under Section 17 of the Local Government Code;



(2) Develop plans and strategies upon approval thereof by the mayor to implement the same, particularly those which have to do with programs and projects related to legal services which the mayor is empowered to implement and which the sanggunian is empowered to provide for under the Local Government Code;

In addition to the foregoing duties and functions, the legal officer shall:

(i) Represent the local government unit in all civil actions and special proceedings wherein the local government unit or any official thereof, in his official capacity, is a party: Provided, That, in actions or proceedings where a component city or municipality is a party adverse to the provincial government or to another component city or municipality, a special legal officer may be employed to represent the adverse party;

(ii) When required by the mayor or sanggunian, draft ordinances, contracts, bonds, leases and other instruments, involving any interest of the local government unit and provide comments and recommendations on any instrument already drawn;

(iii) Render his opinion in writing on any question of law when requested to do so by the mayor or sanggunian;

(iv) Investigate or cause to be investigated any local official or employee for administrative neglect or misconduct in office, and recommend appropriate action to the mayor or sanggunian, as the case may be;

(v) Investigate or cause to be investigated any person, firm or corporation holding any franchise or exercising any public privilege for failure to comply with any term or condition in the grant of such franchise or privilege, and recommending appropriate action to the mayor or sanggunian, as the case may be;

(vi) When directed by the mayor, or sanggunian, initiate and prosecute in the interest of the local government unit concerned any civil action on any bond, lease or other contract upon any breach or violation thereof; and

(vii) Review and submit recommendations on ordinances approved and execute orders issued by component units;

(3) Recommend measures to the sanggunian and advise the mayor on all other matters related to upholding the rule of law;

(4) Be in the frontline of protecting human rights and prosecuting any violations thereof, particularly those which occur during and in the aftermath of man-made or natural disasters or calamities; and

(5) Exercise such other powers and perform such other duties and functions as may be prescribed by law or ordinance.



#### **GENERAL SERVICES OFFICE**

To encourage the practice of courtesy plus honesty along ethical standards; to promote respect for work and the use of new acceptable idea or technology to attain efficiency and economy; to enhance inter-office and clientele relations thru coordination and cooperation; and to optimize personnel career advancement thru trainings or studies.

#### **CITY HUMAN RESOURCE MANAGEMENT OFFICE**

The City Human Resource Management Office shall have the duty to ensure that all personnel actions, issues and concerns related to human resource and development in the City Government of Legazpi shall be in accordance with the Civil Service law, rules and regulations, and other pertinent issuances.

#### **CITY ASSESSOR'S OFFICE**

Ensure all laws and policies governing the appraisal and assessment of real properties for taxation purposes are property executed. Exercise the functions of appraisal and assessment primarily for taxation purposes of all real properties in the LGU, and issues, upon request of any interested party, certified copies of assessment records of real property and all other records relative to its assessment

#### **CITY VETERINARY OFFICE**

The Legazpi City Veterinary Office is mandated to promote and safeguard the health and well- being of animals within the city. This includes implementing programs related to animal health, ensuring food safety in the livestock industry, controlling and preventing the spread of animal diseases, preventing and controlling rabies, and providing support and services to livestock poultry raisers and the community. Additionally, the office may be involved in various projects aimed at sustainable agriculture, livelihood development, public health and to mitigate food insecurity.

#### **CITY HEALTH OFFICE**

"City Health deals with promotive, preventive and rehabilitative aspects of public health community."



#### OFFICE OF THE CITY CIVIL REGISTRAR

Develop plans and strategies for the efficient and effective implementation of the civil registration programs and projects in the City.

#### CITY DISASTER RISK REDUCTION MANAGEMENT OFFICE

The City Disaster Risk Reduction and Management Office is mandated to ensure disaster risk reduction through prevention, mitigation and preparedness; disaster response through timely and effective response and early recovery; and building back better through disaster rehabilitation and recovery

#### **CITY ENGINEER'S OFFICE**

Provide technical advice to the Mayor on policies, objectives, techniques and procedures in engineering services and project management and take charge of all infrastructure development, public works and other engineering matters.

#### CITY SOCIAL WELFARE AND DEVELOPMENT OFFICE

The State is committed to the care, protection and rehabilitation of that segment of the country's population (individual, family and community) which has the least in life in terms of physical, mental and social well being and needs social welfare assistance and social work intervention to restore their normal functioning and participation in community affairs. The functions as per R.A. 7160 (Local Government Code of 1991):

 Identify the basic needs of the needy, the disadvantaged and the impoverished, develop and implement appropriate measures to alleviate their problems and improve their living conditions;

 Provide relief and appropriate crisis intervention for victims of abuse and exploitation and recommend appropriate measures to deter further abuse and exploitation;

– Facilitate the implementation of welfare programs for disabled, elderly and rehabilitation of prisoners and parolees, the prevention of drug addiction, the prevention of juvenile delinquency and such other activities.



#### INTERNAL AUDIT SERVICE OFFICE

The Internal Audit Service of the City Government of Legazpi shall have the duty to safeguard resources against loss, misuse and damage; check accuracy and reliability of accounting data; promote adherence to managerial policies and compliance with laws and regulations to ensure a sound and orderly conduct of public affairs and management of public resources.

#### **LEGAZPI CITY HOSPITAL**

The Legazpi City Hospital, a department of the City Government of Legazpi, is mandated to lead the health sector towards providing quality health care in protecting the health of all Legazpeños.

#### **CITY AGRICULTURE OFFICE**

To promote sustainable agri-fishery productivity and profitability by empowering the farming and fishing communities through modernized technology and community-based agriculture; Formulate measures and ensure the delivery of basic agricultural services and provision of adequate facilities relative to agricultural services; and Ensure maximum assistance and access to resources in the production, processing and marketing of agricultural, aqua-cultural and marine products are extended to farmers, fishermen and local entrepreneurs.

#### **OFFICE OF THE CITY ENVIRONMENT AND NATURAL RESOURCES**

Committed to provide services that would promote ecological balance in order to maintain a wholesome and hygienic environment along the framework of sustainable development.

#### **PUBLIC EMPLOYMENT SERVICE OFFICE**

The Public Employment Service Office or PESO is a non-fee charging multiemployment service facility or entity established or accredited pursuant to Republic Act No. 8759 otherwise known as the PESO Act of 1999. To carry out full employment and equality of employment opportunities for all, and for this purpose, to strengthen and expand the existing employment facilitation service machinery of the government particularly at the local levels there shall be established in all capital towns of provinces, key cities, and other strategic areas a Public Employment Service Office, Hereinafter referred to as PESO, which shall be community-based and maintained largely by local



government units (LGUs) and a number of non-governmental organizations (NGOs) or community-based organizations (CBOs) and state universities and colleges (SUCs). The PESOs shall be linked to the regional offices of the Department of Labor and Employment (DOLE) for coordination and technical supervision, and to the DOLE central office, to constitute the national employment service network.

#### **BUSINESS PERMITS & LICENSING OFFICE**

The Business Permit & Licensing Office handles the issuance of business permit & licenses, tricycle operators permit and other non-revenue miscellaneous permit as well as formulate and implement policies and proactive measures to increase local employment, draw local and foreign investments and increase local revenues.

#### SANGGUNIANG PANLUNGSOD (LEGISLATIVE)

Approved Ordinances and passes Resolutions necessary for an effective and efficient government; generates and maximizes use of resources and revenues for priority development plans; regulates activities related to the use of land, buildings and other structures; enacts Ordinances, approves Resolutions, appropriate funds that would enhance the economic, social and political development of the City and general welfare of the inhabitants.

#### SANGGUNIANG PANLUNGSOD (SECRETARIAT)

Take charge of the Office of the Secretary to the Sanggunian, attend meetings of the Sanggunian and keep journals of its proceedings, keep books of records of all enacted Ordinances and Resolutions adopted.



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### OFFICE OF THE CITY MAYOR External Services



#### **1. Assistance to Client and Delivery of Basic Services**

Assistance to all External and Internal clients on matter relating to the City Government

Office or Division:	OFFICE OF THE C	ITY MAYOR		
Classification:	Simple Transaction			
Type of Transaction:	Government to Client			
Who may avail:	Internal and External Clients			
CHECKLIST OF REQUIREMEN	NTS WHERE TO SECURE			
Medical Prescription		Hospital/ Priv	vate Clinic	
Certificate of Death			Civil Registrar	
Certificate of Indigency		Barangay	onnintegiotiai	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
Assistance to clients seeking queries, advises complaint, medical/ financial/ burial/ educational assistance	<ul><li>1.1 Receive</li><li>1.2 Review</li><li>1.3 Endorse</li></ul>	None	10 mins *Processing time for one client being serve at one time	Admin Aide IV Admin Aide I Admin Officer V Chief of Staff Executive Assistant IV
Receiving of Incoming communication for Local Chief Executive	<ul> <li>1.1 Receive</li> <li>1.2 Record</li> <li>1.3 Forward to LCE</li> <li>1.4 Endorse</li> </ul>	None	15 mins *May vary depending on the availability of documents approved by the LCE	Admin Aide I Chief of Staff Admin Aide IV Executive Assistant IV
Releasing of Outgoing communication	1.1 Receive 1.2 Record 1.3 Release	None	10 mins *Releasing of signed documents	Admin Aide I Community Affairs Assistant II



			may vary depending on the approval of LCE	Admin Assistant I
Appointment of meeting, wedding, courtesy call, and speaking engagement to LCE	1.1 Receive 1.2 Schedule	None	10 mins *May vary depending on the flow of discussion per meeting	Chief of Staff Community Affairs Assistant II Admin Aide IV
Receiving and releasing of financial document	<ul> <li>1.1 Receive</li> <li>1.2 Review</li> <li>1.3 Record</li> <li>1.4 Forward to LCE/ EA</li> <li>1.5 Release</li> </ul>	None	20 mins *Releasing of signed documents may vary depending on the approval of LCE	Admin Aide IV Admin Aide I Admin Officer V Executive Assistant IV
Accommodation for the use of Legazpi City Centers ( Legazpi City Convention Center, Ibalong Centrum for Recreation, Ibalong Conference Room, Gregorian Basketball Court)	<ul> <li>1.1 Receive request letter</li> <li>1.2 Check availability</li> <li>1.3 For LCE approval</li> <li>1.4 Reserve</li> </ul>	None	10 mins	Admin Officer V Executive Assistant IV
	Total		1 hr., & 15 mins.	

FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the Public Assistance Complaint Desk located at the City Hall lobby		



How feedbacks are processed	The person in charge opens the drop box and evaluate each feedback, those feedback requiring answer are forwarded to concern offices.
How to file a complaint	Complaints may be filled in writing or in person to Mayor Carmen Geraldine B. Rosal
How complaints are processed	Upon evaluation and investigation, the LCE call the attention of both concern parties for consultation and appropriate action
Contact Information of CCB, PCC, ARTA	

Office	Address	Contact Information
Office of the City Mayor	2 <sup>nd</sup> Floor City Hall Compound Legazpi City	carmengeraldinerosal@yahoo.com 0953 306 7106



## CITY MAYOR'S OFFICE CITY COOPERATIVE DEVELOPMENT OFFICE



#### Assistance to Clients

Office or Division:	City Cooperative Development Office			
Classification:	Government			
Type of Transaction:	Advice or Inquir	у		
Who may avail:	PO's, NGO's, G	A's, Community	y / Residents of Le	egazpi
CHECKLIST OF REC	UIREMENTS		WHERE TO SECU	JRE
CLIENT STEPS	AGENCY ACTIONS			
1. Clients request and queries initially determined within 5 minutes upon approval.	Client is referred to the City Cooperative Development Officer within 5 minutes upon arrival.	Free	5 minutes	Administraive Aide I
2. Clients request for Orientation, Pre- Registration Seminar referred to City Cooperative Development Office.	Briefing / Advice rendered within the day of inquiry.	Free	5 – 30 minutes	Community Affairs Assistant II
		Total	35 mins	

#### **Pre-Registration Seminar**

Office or Division:	City Cooperative Development Office		
Classification:	Government		
Type of Transaction:	Orientation		
Who may avail:	PO's, NGO's, GA's, Community / Residents of Legazpi		
CHECKLIST OF REC	QUIREMENTS WHERE TO SECURE		



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Conduct of Pre- Membership Seminar (PRS) / Orientation on Coop Development Organization.	Orientation seminar prepared / conducted to would-be coop members for within 10 days upon receipt of request.	N/A	4 hours orientation	Community Affairs Assistant II
		Total	4 hours	

#### Preparation / Registration of Documents

Office or Division:	City Cooperative	e Development	Office		
Classification:	Government	Government			
Type of Transaction:	Documentary Se	Documentary Services			
Who may avail:	Would-be Coop	eratives			
CHECKLIST OF REQ	UIREMENTS		WHERE TO SECU	JRE	
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE			
1. Constitutions and By- laws prepared and filled- up economic survey, surety bond and members' information sheet attached to all documents, received and referred to the City Cooperative Development Office upon receipt of registration documents with no omission.	Registration of documents, checked / reviewed and referred to City Cooperative Development Officer for endorsement to Cooperative Development Agency for approval and registration within 3 days upon receipt of documents.	Free	5 days	Community Affairs Assistant II	
		Total	5 days		



#### **Regulatory Reports**

Office or Division:	City Cooperative Development Office				
Classification:	Government	Government			
Type of Transaction:	Technical Servic Assistance in the		f Regulatory Repo	orts	
Who may avail:	Registered Coo	peratives			
CHECKLIST OF REC	UIREMENTS		WHERE TO SECU	JRE	
CLIENT STEPS	AGENCY ACTIONS				
1. Submit all regulatory reports / documents needed to the City Cooperative Development Office for checking and review.	Checked, Validate and reviewed required reports upon received / completion forwarded and referred to CDA before due date.	Checked, Validate and reviewed required reports upon received / Free 1 day / Coop Community completion forwarded and referred to CDA before due			
		Total	1 day		

#### Trainings / Workshops

Office or Division:	City Cooperative Development Office			
Classification:	Government			
Type of Transaction:	Conduct of Trainings			
Who may avail:	Registered Cooperatives			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submitted approved Registration	Conducts / facilitate			



documents to City Cooperative Development Office for inclusion in the lists of registered cooperatives and availment of trainings.	trainings / seminars for enhancements and development of cooperatives. Checked / reviewed transmitted lists of registered cooperatives for inclusion in the trainings to be conducted within the year.	Cooperative Fund	16 hours required by CDA	Administrative Aide I Community Affairs Assistant II
		Total	16 hours	

#### Cooperative Tax Exemptions

Office or Division:	City Cooperative Development Office			
Classification:	Government			
Type of Transaction:	Tax Incentives Services			
Who may avail:	Registered Cooperatives			
CHECKLIST OF REQ	UIREMENTS	IREMENTS WHERE TO SECURE		JRE
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Application for Tax Exemption	Checked/revie wed and validated application for tax exemption to be forwarded at BIR.	P 500.00 (BIR)	10 mins.	Administrative Aide I



2. Filing of Business Permit	List of Registered Cooperatives forwarded to Business Center by City Cooperative Dev't Office for filing of Business Permit for reference.	None		10 mins.	Administrative Aide I
		Tota	al	20 mins.	
FE	EDBACK AND	COMP	LAIN	TS MECHANIS	SM
How to send feedba	ack		drop the P	er the client feed it at the designat ublic Assistance a of the Office.	ed drop box at
How feedbacks are processed			Every Friday, the Administrative Officer opens the drop box and compiles and records all feedback submitted.		
			forwa	back requiring rded to City lopment Office.	
			relaye	answer of the ed to the citizen r text message.	
			may numb	nquiries and follo contact the follo er: 742-6136	wing telephone
How to file a complaint			Answer the client complaint form and drop it at the designated drop box at the Public Assistance and Complaints Desk of the Office.		
			. Mak	plaints can also be the sure to provid nation: Name of p complained Incident	



	- evidence
	For inquiries and follow-ups, clients may contact the following telephone number: 742-6136
How complaints are processed	The Administrative Officer opens the complaints drop box on a daily basis and evaluates each complaint. E-mailed complaints are printed for submission to and appropriate action by the Office. The Administrative Officer forward the
	complaint to the City Cooperative Development Office for investigation.
	The Administrative Officer will make the necessary action and give feedback to the client.
Contact Information of City Cooperative Development Office	A. CMO Special Services – City Cooperative Development Office 3 <sup>rd</sup> Floor, Main Building
	<b>Gina Marie A. Belchez</b> 09103339650



## **CITY MAYOR'S OFFICE**

## **City Economic and Investment Promotions Division**

**External Services** 



### ASSISTANCE TO LOCAL & FOREIGN INVESTORS AVAILING INCENTIVES

Office or Divisions	City Francesia & Investment Dramations Division
Office or Division:	City Economic & Investment Promotions Division
Classification:	Simple Transaction
Type of Transaction:	Government to Client
Who may avail:	Local & Foreign Investors
Checklist of	Where to Secure:
Requirement:	CEIPD
1. Application for Registration under	
the Legazpi City	
Investment	
Incentive Code of	
2019	
2. Documentary Requirements:	
If Single Prop:	
a) Copy of Business	- DTI
Name Registration b) Clearance	- DOLE/NLRC
c) Environmental	- DENR
Compliance	
Certificate (ECC),	
if applicable d) Copy of Audited	
Financial	
Statements, if the	
business is	
already existing	
lf	
Partnership/Corporati	- Securities & Exchange Commission (SEC)
on a) Certified True	
Copy of	
Certificate of	
Registration	
issued by SEC b) Articles of	- DOLE/NLRC
Incorporation and	
by-laws	- Securities & Exchange Commission (SEC)
c) Environmental Compliance	- CEIPD
Certificate (ECC),	
if applicable	
d) Certificate of Good Standing	
e) Resolution	
authorizing the	
filing of	
Application by the Applicants Board	
of Directors	
f) Copy of Audited	
Financial Statements (if	
existing)	
For Enterprises registered under an	
existing incentives	
law	- DTI/BOI
a) Certified True	
Copy of the BOI Certificate of	
Registration	
b) Copy of	
documents	
submitted to the appropriate	
registration	



Agency pertaining to their registration				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPON SIBLE
1. Submit accomplished form and requirements	1.1 Receive and initial review of the completeness of the duly accomplished forms with requirements	-	10 mins.	Admin. Assistant
	1.2 Evaluate & validate submitted requirements for acceptance	-	1 hour	LEIPO
	1.3 If disapproved, inform the client of the reason thereof & recommend assessment	-	10 mins.	
	1.4 If acceptable, issuance of Letter of Acceptance	-	10 mins.	
	1.5 Endorse application to the Board for review/evaluation	-	3 days	LEIPO/Le gazpi Investme nt & Incentive Board (LIIB)
	1.6 If disapproved, notify applicant thru SMS	-	5 minutes	LEIPO
	<ol> <li>1.7 If approved, notify applicant thru SMS of payment of Registration Fee</li> </ol>	-		
2. Pay Registration Fee	2.1 Proceed to CTO for payment	1,000.00	10 minutes *Under normal circumstances per transaction	Cashier
	3.1 Validate OR	-	5 mins	
3. Claim Certificate	3.2 Issue Notice of Approval	-	10 minutes	LEIPO
	3.3 Brief Applicant on Compliance	-	15 minutes	
	TOTAL	1,000.00	3 days, 2 hours and 15 mins.	



### FEEDBACKS/COMPLAINTS MAY BE FILED THRU:

Office	Address	Contact Information
City Economic & Investment Promotions Division (CEIPD)	2/F, City Hall Bldg., Rizal St., Legazpi City	MA. THERESA D. NUÑEZ Local Economic Development & Investment Promotions Officer (LEDIPO) Tel. No. 742-3990 Mobile: 09989903898 Email: matheresanunez1969@gmail.com



## CITY MAYOR'S OFFICE CITY TOURISM SERVICES DIVISION



# **1.** Assistance to Tourists, Researchers, Organizations and Other Agencies

Of	fice or Division:	City Tourism Service	es Division	1	
Cla	assification:	Simple			
Ту	pe of Transaction:	G2C, G2B, G2G			
	ho may avail:	Clients, tourists, rese	earchers, e	entities and other	agencies
	CHECKLIST OF RI	EQUIREMENTS		WHERE TO S	SECURE
•	None		None	-	
	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.	Approach the Officer-of-the-Day (OD) at the Public Assistance & Compliance Desk (PACD) and register in the guestbook	<ul> <li>1.1. Entertain queries of the client, Endorses client to the City Tourism Officer / Officer-In- Charge</li> <li>1.2. Entertain queries on tour guiding, events and other tourism related activities</li> </ul>	None	10 mins. 40 mins.	Officer-of-the-Day Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I City Tourism Officer Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I;
			None	EQ mino	
		TOTAL:	None	50 mins.	

### 2. Events Coordination

Office or Division:	City Tourism Services Division			
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	Clients, tourists, researchers, entities and other agencies			
CHECKLIST OF R	EQUIREMENTS WHERE TO SECURE			
Letter request addre	ressed to the City None			
Mayor				



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Approach the Officer-of-the-Day (OD) at the Public Assistance &amp; Compliance Desk (PACD), register in the guestbook and submit letter request</li> </ol>	1.1. Endorses client to the City Tourism Officer	None	10 mins.	Assigned Officer-of- the-Day Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I
	1.2. Entertain queries of the client, checks calendar of activities and schedules the event	None	40 mins.	City Tourism Officer
	TOTAL:	None	50 mins.	

## 3. Securing of Mayor's Permit for Legazpi City Tour Guides

Office or Division:	City Tourism Services Division			
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	Legazpi City Tour Guides			
CHECKLIST OF RE	EQUIREMENTS WHERE TO SECURE			
Official Receipt of Ma	ayor's Permit Fee		City Treasure	r's Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



1. Approach the Officer-of-the-Day (OD) at the Public Assistance & Compliance Desk (PACD), register in the guestbook	1.1 Guide the client to the City Treasurer's Office (CTO) to pay for the Mayor's Permit Fee	P100.00 — Mayor's Permit P25.00 — PTR Surcharge (at the CTO)	2 mins.	Assigned Officer-of- the-Day Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I
	2.1 Prepare Mayor's Permit	None	5 mins.	Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I
2. Return to City Tourism Office and present the Official Receipt	2.2 Forward to City Mayor's Office (CMO) for Signature of the City Mayor	None	45 mins	City Mayor's Office
	2.3 Release of Mayor's Permit	None	2 mins.	Assigned Officer-of- the-Day
	TOTAL:	None	54 mins.	

### 4. Tour Assistance to Organizations, Guests, etc.

Office or Division:	City Tourism Services Division			
Classification:	Simple	Simple		
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	Clients, tourists, researchers, entities and other agencies			
CHECKLIST OF RI	REQUIREMENTS WHERE TO SECURE			
Letter request addressed to the City Mayor		None		



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Approach the Officer-of-the-Day (OD) at the Public Assistance &amp; Compliance Desk</li> </ol>	1.1. Entertain queries of the client, Endorses client to the City Tourism Officer	None	10 mins.	Assigned Officer- of-the-Day Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I
(PACD), register in the guestbook and submit letter request	1.2. Entertain queries of the client, checks calendar of activities and schedules the necessary tour requested	None	40 mins.	City Tourism Officer
	TOTAL:	None	50 mins.	

## 5. Assistance to Tourism-Related Enterprises re: Statistics Report and/or DOT-Accreditation

Office or Division:	City Tourism Services Division			
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	Clients from Tourism-Related Enterprises (TREs)			
CHECKLIST OF RE	EQUIREMENTS	UIREMENTS WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E



<ol> <li>Approach the Officer-of-the-Day (OD) at the Public Assistance &amp; Compliance Desk (PACD), register in the guestbook</li> </ol>	1.1. Entertain queries of the clients, orient/ coach TREs in the preparation of statistics report and/or guides them the processes in applying for DOT Accreditation	None	30 mins.	Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I City Tourism Officer
	TOTAL:	None	30 mins.	

6. Manning at the Tourist Information and Assistance Desk located at Bicol International Airport (BIA)

Office or Division:	City Tourism Services Division			
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	Clients from Tourism-Related Enterprises (TREs)			
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE		
None			None	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E



1.Approach the Officer-of-the-Day (OD) at the Public Assistance & Compliance Desk (PACD), register in the guestbook	1.2. Entertain queries of the clients	None	30 mins.	Senior Tourism Operations Officer; Tourism Operations Officer II; Community Affairs Officer I; Watchman I; Administrative Aide I
	TOTAL:	None	30 mins.	

FEEDBACK AND COMPLAINTS MECHANISM					
How to send feedback	Standard Feedback Form				
How feedbacks are processed	When the feedback form is being filled up by the client the feedback will be sent to the to the Chief of Office				
How to file a complaint	Write a Complaint Letter				



How complaints are processed	Complain letter can be personally handed, mailed thru post office or electronic mail (e- mail) to the Chief of Office
Contact Information of CCB, PCC, ARTA	May dial CSC hotline 8888, email: info@arta.gov.ph

Office	Address	Contact Information
City Tourism Services Division	Brgy. 13, Ilawod, Rizal Street, Old Albay District, Legazpi City	legazpitourismservices@gmail.com legazpitourismservicesdivision@gmail.com legazpitourismstatistics@gmail.com



## CITY MAYOR'S OFFICE ECONOMIC ENTERPRISE MANAGEMENT DIVISION

Albay Public Market



### 1. MARKET CLEARANCE

It is a document issued to attest that the monthly stall rental is fully paid. The same is presented/submitted as a requisite document for the renewal of the annual business permit.

Office or Division:		CMO-EEMD Albay Public Market				
Classification:		Highly Technical				
Type of Transaction:		Government to Client				
Who may avail:		Albay Market Stallh	nolders			
CHECKLIST OF	REQ	JIREMENTS		WHERE TO	SECURE	
1. Latest Communi		· · · ·		urer's Office / Bar	angay	
2. Current Mayor's	Perm	iit (1 photocopy)	Business P	Permit Office		
CLIENT STEPS	AC	BENCY ACTIONS			PERSON RESPONSIBLE	
1. Approach the Officer of the day		Acknowledge the client	none	3 minutes	Administrative Aide IV	
<ol> <li>Submit the business permit to receiving</li> </ol>		Receive and check the documents	none	5 minutes	Administrative Aide I	
		Preparation of Lease Contract	none	15 minutes	Administrative Aide I	
3. Sign the Lease Contract		Bigning of Lease	none	10 minutes	Market Supervisor IV	
<ol> <li>Wait for the release of the lease contract</li> </ol>	Lea City	orwards the se Contract to the Mayor's Office for nature	none	1-3 days	Administrative Aide I	
		TOTAL	none	3 days and 33 minutes		



### 2. Preparation of Lease Contract

Contract signing between the stall holder/s and City Government of Legazpi

Office or Division:	CMO-EEMD Albay Pub	lic Market				
Classification:	Simple Transaction					
Type of Transaction:	Government to Client					
Who may avail:	Albay Market Stallhold	ers				
CHECKLIST OF	REQUIREMENTS		WHERE TO	SECURE		
1. Verification of Payr	ment of Market Rental	Market Offi	ice			
2. Original copy of Off Market Clearance F			urer's Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
<ol> <li>Approach the Officer of the day/receiving personnel</li> </ol>	1.1 Acknowledge the client	none	3 minutes	Officer of the day		
2. Submit the O.R. of Market Clearance fee to receiving personnel or Officer In-Charge	2.1 Receive and check the requirements	none	5 minutes	Administrative Aide I		
<ol> <li>Wait for the verification of rental payment</li> </ol>		none	5 minutes	Administrative Aide I		
	3.1 Preparation of Market Clearance	none	10 minutes	Administrative Aide I		
	3.2 Signing of Market Clearance	none	5 minutes	Market Supervisor IV		
4. Wait the release of Market Clearance	4.1 Releasing of Market Clearance	none	1 minute			



TOTAL	none	34 minutes	
4.2 Recording and Filing of Duplicate copy Market Clearance	none	5 minutes	Administrative Aide I

FEEDBACK AND COMPLAINTS MECHANISMS					
How to send feedback	Answer the client feedback form and drop it at the designated drop box of the Albay Public Market Office.				
How feedbacks are addressed	Discuss the issues and come up with solutions				
How to file a complaint	Written complaint or verbal complaint is filed at the Market office				
How complaints are processed	Appearance of the complainant and respondent during the preliminary conference.				
Contact Information	Ralph Vincent L. Lasin Market Supervisor IV				



## **CITY MAYOR'S OFFICE**

## ECONOMIC ENTERPRISE MANAGEMENT DIVISION

## (Legazpi Public Market)



## **APPLICATION FOR LEASE MARKET STALL**

This service is for business investor or applicant who wants to be a market stall holder in Legazpi City Public Market

City Public Market		[			
Office or Division		EEMD Legazpi City Public M	izpi City Public Market		
Classification		Simple Transaction			
Type of Transactions	S	G2C - Government to Citize	ns		
Who may Avail		Any individuals			
Checklist of Requ	irements	Where To Secure			
		EEMD Legazpi City Public M	arket Office		
Valid Id		Applicant			
Barangay Clearance		Barangay Official			
Client Steps	Agency Action	Fees to be PaidProcessing TimePerson Responsib			
1. Inquire at Legazpi City Market Office if there vacant and Surrendered Stalls	Orient and Provide Checklist of Requirements	None	3 minutes	Market OIC/Supervisor	
2. Submit Requirements	<ol> <li>Receive and check the application form</li> <li>Inform the Client of the Schedule of the awarding of the vacant stall.</li> </ol>	None	5 minutes	LCPM Office Personnel	



	Discuss all the policies of the Public Market and mode of schedule of payment		10 minutes	Legazpi City Market Officer In charge
3. Pay Goodwill (amount may vary upon the collection of the Stall)	Receive Payment. Release Official Receipt	Goodwill/Occupancy Cereals - P 25,000 Carenderia - P25,000 Dried Fish- P25,000 Vegetables - P25,000 Fish - P25,000 Meat - 40,000 Personal Effects - P40,000		City Treasure's Office

# PROCESSING OF STALL AWARD FOR TRANSFER AND SUCCESSION

Office or Division	EEMD Legazpi City Public Market		
Classification	Simple Transaction/ Complex Transactions		
Type of Transactions	G2B - Government to Business		
Who may Avail	Legitimate adjudicated market stallholders in the city public market who want to transfer their lease awards to their successors due to reasons of death or incapacity of an adjudicated stall holders.		
Checklist of Requirements	Where To Secure		
1. Transferor/Succession (due to death and incapacity)	Applicant/ Client		
	Applicant/ Client Applicant/ Client		



1. c Original/Certified True copy of Stall award		Applicant- Client / Record Section		
1.d Proof of payment and fees and Business		Applicant- Client/ City Treasurer's Office		
1. e Proof of Payment (last 3 months)	s of rental fees	Applicant-Client /Record Se	ection	
1.f Waiver of rights of legitimate son/s or dat		Applicant-Client		
2. Transferee/Succes	ssor	Applicant-Client /Record Se	ection	
2.a Notarized Applicat	ion Forms	Market Administrator/Supe	ervisor, City Public N	1arket
2.b Proof of Residen following -Barangay Ce Residency, Voter's ID, 2 Licence	ertificate of	Barangay Hall/ Appropriate	Government Agenc	сy
2.c Copy of Birth Ce	rtificate	City Civil Registrar/Philippine Statistics Office		
2.d 2 x2 ID picture		Applicant/Client		
2. e Personal Appea Interview	rance for	Applicant/Client		
Client Steps	Agency Action	Fees to be Paid	Processing Time	Person Responsible
1. Get and Accomplish application forms to least market stall	Receive, Review endorses	None	5 min	Clerk, Public Market Office
2. Submit Accomplish application form	Signed application form and endorse	None	2 min	Clerk, Public Market Office



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NONE	Evaluates documents and record of payment and violations. Submit to Market Committee for approval	None	10 min	Market Administrator, Market Committee
3. Wait for approval of the application ( you will be notified by the market Administrator or his duly authorized representative	Screenings of applicants	None		Market Administrator, Market Committee
Receives approved Stall Award and pay corresponding fees of market stall and contract of Lease.	Releases Stall Award. Issue order of payment and Official Receipt	GoodWiil/Occupancy 1 Cereals - P 25,000 2. Carenderia - P25,000 3. Dried Fish- P25,000 4. Vegetables - P25,000 5. Fish - P25,000 6. Meat - 40,000 7. Personal Effects - P40,000	5 minutes	Clerk , Public Market Office

### APPLICATION TO MARKET STALL RENEWAL OF LEASE

This service is fol Stallholders who request for the renewal of Lease for their cease operation.

Office or Division EEMD Legazpi City Public Market		
Classification	Simple Transaction	
Type of Transactions	G2C - Government to Citizens	
Who may Avail	Stall Holders	
Checklist of Requirements	Where To Secure	



		EEMD Legazpi City Public Market Office			
Valid Id		Stall Holders			
Barangay Clearance		Barangay Official		Barangay Official	
Client Steps	Agency Action	Fees to be Collected	Processing Time	Person Responsible	
Provide & submit duly notarized application form with 2x2 pictures	Check and verify the mrket stall record and compute the outstanding balance if there is any	None	3 minutes	Legazpi City Public Market Personnel	
Secure market clearance	Verification of market record and Business Permit	None	5 minutes	Legazpi City Public Market Personnel	
	Instruct the Client to pay at the City Treasurer's Office for the certification and the outstanding balance if thereis any		3 minutes	Legazpi City Public Maarket OIC /Supervisor	
payment of market Clearance	Issue official receipt	P50,00	3 minutes	СТО	
Present Official Receipt and receive certification	Contract of Lease Approval & Signature of the Chief of office	None		Legazpi City Public Market Personnel	



	Submit contract of Lease to City Treasurer's Office and City Mayor for Signature	None		City Treasurer's Office/Mayor's Office
Receive Approve and Singned Lease of Contract.	Release Lease of Contract	None	3 minute	Legazpi City Public Market Personnel

**COMPLAINTS MAY FILED IN WRITING ADDRESS TO**: Hon. Carmen Geraldine B Rosal City Mayor/Mr. Ronald H. Pasano , LOIII/OIC Legazpi City Public Market , LCPM Office Legazpi City

Clients with pending documents are advised to follow-up the next working day, pending ocuments due tounsual circumstances beyond the control of this office.

**SERVICE PLEDGE**: We are committed to serve with efficiency , accountability, sencerity, honesty and transparency at all times

For inquiries, feedbacks, suggestions, Recommendations as well as Complaints, you may send to: Mr. RONALD H. PASANO, OIC Legazpi City Public Market, LCPM Office Legazpi City/CP no: 09192729466



## **CITY MAYOR'S OFFICE** MUSEO DE LEGAZPI

**External Services** 



### • External Services

### 1. Receiving Tourists and Other Visitors

Office or Division:	Museo de Legazpi				
Classification:	Simple				
Type of Transaction:	G2C, G2B				
Who may avail:	Clients, Students, To	ourists and	d Other Visitors		
CHECKLIST OF REQU	JIREMENTS		WHERE TO SE	CURE	
None					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Approach Officer of the Day and register in the Logbook</li> </ol>	1.1. Receives the client and gives a short overview on the rules to follow inside the museum	None	30 minutes.	All Museo Staff	
	TOTAL: None 30 minutes				

### 2. Technical Assistance to Researchers

Assistance is provided to assist researchers in the completion of academic requirements.

Office or Division:	Museo de Legazpi				
Classification:	Simple	Simple			
Type of Transaction:	G2C, G2B, G2G				
Who may avail:	Clients, Students, To	ourists and	d Other Visitors		
CHECKLIST OF REQU	IREMENTS		WHERE TO SE	CURE	
None					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Request for interview/ data	Grants request/ schedules interview and provides data needed.	None	Two (2) hours	Museum Curator	
	TOTAL:	None	2 hours		



FEEDBACK AN	ID COMPLAINTS MECHANISM			
How to send feedback?	Answer the client feedback form available at the receiving desk and drop it at the designated drop box in the same area. or			
How feedback is processed?	Every Friday, the Administrative Section opens the drop box and compiles and records all feedback submitted.			
	Feedback requiring answers are forwarded to the relevant officers or personnel and are required to answer within three (3) working days from the receipt of the feedback.			
	The answer of the office is then relayed to the citizen or institution.			
	For inquiries and follow-ups, clients may contact the following email address:			
	museodelegazpi@yahoo.com			
How to file complaint?	To file a complaint against the Museo de Legazpi, provide the following details through writing on the Complaint Form (CSC Form #3), or via e-mail:			
	<ul> <li>Full name, address and contact information of the Complainant</li> <li>Narrative of the Complaint</li> <li>Evidences</li> <li>Name of the Person being Complained</li> </ul>			



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	Send all complaints against the Museo de Legazpi, through writing on the COMPLAINT FORM (CSC Form #3) or to museodelegazpi@yahoo.com
	For follow-ups or inquiries, the contact information are as follows:
	museodelegazpi@yahoo.com
Llow complete is pressed	The Administrative Costion energy the complete
How complaint is processed?	The Administrative Section opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the administrative officer shall relay the information to the department head. The department head starts the investigation and calls the attention of the personnel concerned.
Contact Information of Museo De	DARLITO A. PEREZ, JR.
Legazpi	CGDH I/CHRM Officer/ Museum Curator Designate
	Email Address: museodelegazpi@yahoo.com



## CITY MAYOR'S OFFICE URBAN POOR AFFAIRS OFFICE

Internal and External Services



## 1. Provision of Relocation Sites to informal settlers or displaced constituents due to development or those living in danger areas

Office or Division:	URBAN POOR AFFAIRS OFFICE				
Classification:	Complex				
Type of Transaction:	Government to Client/ Government to Government				
Who may avail:	Underprivileged and homeless citizens and informal settlers.				
CHECKLIST OF R			WHERE TO S		
Letter received by the Cit	ty Mayor's Office with	City Mayor's	Office		
attached referral slip of th	ne City Mayor				
(2 copies)					
Attendance Records			Affairs Office		
Monthly inventory list			Affairs Office		
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON	
4 Drevision of	ACTIONS	BE PAID	TIME	RESPONSIBLE	
1. Provision of Relocation Sites to	1.1 Assist the applicants to	None	15 to 20 minutes	SOO IV/ UPAO Coordinator	
informal settlers or	write a letter to		minutes	Coordinator	
displaced	the City Mayor			Registration Officer IV	
constituents due to	requesting for				
development or	slot in the				
those living in	relocation/re-				
danger areas	settlement sites.				
	1.2 Interview and	None	15 minutes	Registration Officer IV	
	assign batch number and				
	require the			Administrative Officer I	
	applicants to				
	make daily				
	follow-up by				
	personally				
	reporting to our				
	office and affix				
	their signature in				
	the attendance				
	sheet.				
				SOO IV/ UPAO	
	1.3 Determine the		3 days	Coordinator	
	qualified				
	applicants to be	None		Registration Officer IV	
	awarded a slot in				
	the relocation/				



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resettlement sites upon completion of the required number of follow-ups and orientation of the terms and conditions of occupancy.			SOO IV/ UPAO
1.4 Conduct monthly monitoring/ site inspection of the actual occupants in the relocation and resettlement sites.	None	3 days	Coordinator
1.5 Confiscate the slot from the beneficiaries who were found out to have violated the terms and conditions of occupancy.	None	3 days	SOO IV/ UPAO Coordinator
	Total	9 days & 35 mins.	

### 2 Acquisition, Appraisal and Disposition of the City owned/ acquired properties (land)

Office or Division:	URBAN POOR AFFAIRS OFFICE				
Classification:	Technical				
Type of Transaction:	Government to Client	Government to Client/ Government to Government			
Who may avail:	Underprivileged and	d homeless c	itizens and infor	mal settlers.	
CHECKLIST OF R	EQUIREMENTS WHERE TO SECURE				
Appraisal Documents		City Appraisa	al Committee		
Print-out of the payment	schedule	Urban Poor	Affairs Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Acquisition, Appraisal and Disposition of the</li> </ol>	2.1 Process documentary requirements of	None	45 days	SOO IV/ UPAO Coordinator	



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City owned/ acquired properties (land)	applicants on the City owned/ acquired properties.			
	2.2 Prepare the schedule of payments of the appraised value made by the Appraisal Committee for lots offered for sale through socialized housing on installment scheme and the corresponding penalties for past due.	None	7 days	SOO IV/ UPAO Coordinator Administrative Aide I
		Total	52 days	

### 3 Extending Technical Assistance

Of	fice or Division:	URBAN POOR AFF	AIRS OFFIC	Э.Е.		
Cla	assification:	Technical	Technical			
Ту	pe of Transaction:	Government to Client/ Government to Government				
W	ho may avail:	Underprivileged and	Underprivileged and homeless citizens and informal settlers.			
	CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE	
Sk	ketch Plan		Urban Poor	Affairs Office		
Ce	ertification			Affairs Office		
	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
3.	Extending Technical Assistance	3.1 Prepare subdivision plans and schemes upon the receipt of complete documents.	None	20 days	SOO IV/ UPAO Coordinator	
		3.2 Assist in the formation of Homeowners Association.	None	20 days	SOO IV/ UPAO Coordinator	
		3.3 Initiate dialogue/ negotiation with	None	3 days	SOO IV/ UPAO Coordinator	



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<ul> <li>the landowners and informal settlers regarding the implementation of land banking.</li> <li>3.4 Validate the application for ALECO &amp; LCWD service connection and check if the applicant is included in the list of beneficiaries of particular site.</li> </ul>	None	10-15 minutes	SOO IV/ UPAO Coordinator Administrative Aide I
3.5 Prepare, issue and sign the requested certification of the qualified applicants for ALECO and LCWD service connection.	None	10 minutes	SOO IV/ UPAO Coordinator SOO IV/ UPAO
3.6 Prepare, issue and countersign the certification of full payment for the City owned/ acquired properties (land) to be signed by the City Treasurer and City Mayor.	None	7 days	Coordinator
3.7 Prepare, issue and sign other certifications for whatever purpose it may serve.	None	10 minutes	SOO IV/ UPAO Coordinator



3.8 Initiate the implementation of RA 7279 (UDHA)	None	45 days	SOO IV/ UPAO Coordinator
	Total	95 days & 35 mins	

#### 4 Assistance to Clients

Office or Division:	URBAN POOR AFF	AIRS OFFIC	E	
Classification:	Complex			
Type of Transaction:	Government to Client			
Who may avail:	Underprivileged and	d homeless c	itizens and infor	mal settlers.
CHECKLIST OF RE	EQUIREMENTS		WHERE TO S	ECURE
Identification Cards		Urban Poor	Affairs Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
4. Assistance to Clients	Attend/ answer queries of clients/ applicants.	None	5 – 20 minutes	SOO IV/ UPAO Coordinator Registration Officer IV Administrative Aide I
		Total	20 mins.	

### 5 Receiving of Incoming Communications

Offic	e or Division:	URBAN POOR AFF	URBAN POOR AFFAIRS OFFICE			
Class	sification:	Simple				
Туре	e of Transaction:	Government to Client	/ Government	to Business/ Gov	ernment to Government	
Who	may avail:	Underprivileged and	d homeless c	itizens and infor	mal settlers.	
	CHECKLIST OF RE	EQUIREMENTS		WHERE TO S	ECURE	
Lette	er/ Communications		Urban Poor	Affairs Office		
C	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
In	Receiving of Incoming Communications	<ul> <li>5.1 Attend/ answer queries of clients/ applicants.</li> <li>5.2 Endorse letter communications to concerned personnel and file upon thereof</li> </ul>	None	5 minutes	Administrative Aide I	



	Total	5 mins.	

#### 6 Releasing of Outgoing Communications

Office	e or Division:	URBAN POOR AFF	URBAN POOR AFFAIRS OFFICE			
Class	sification:	Simple				
Туре	of Transaction:	Government to Client	/ Government	to Business/ Gov	ernment to Government	
Who	may avail:	Underprivileged and	d homeless c	itizens and infor	mal settlers.	
	CHECKLIST OF RI	EQUIREMENTS		WHERE TO S	ECURE	
Letter	r/ Communications		Urban Poor	Affairs Office		
С	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
O	eleasing of utgoing ommunications	6.1 Record, release and file duly acted upon letter/ communications, requests and queries after approval of the UPAO Coordinator and other concerned signatories.	None	5 minutes	Administrative Aide I	
			Total	5 mins.		

### 7 Meetings/ Coordination with National Agencies (NGA's)

Office or Division:	URBAN POOR AFFAIRS OFFICE			
Classification:	Complex			
Type of Transaction:	Government to Client/ Government to Business/ Government to Government			
Who may avail:	Underprivileged and homeless citizens and informal settlers.			
CHECKLIST OF RE	EQUIREMENTS		WHERE TO S	ECURE
Notice of Meetings/ Mem	orandum, Others	Urban Poor	Affairs Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



-					
	leetings/	7.1 Initiate meeting/	None	7 days	
C	Coordination with	coordination with			SOO IV/ UPAO
N	lational Agencies	NHA for lands			Coordinator
	NGA's)	required for			
('		socialized			
		housing.			
		7.2 Prepare/		3 days	
		distribute notice			Registration Officer IV
		of meetings.			C
		5			Administrative Aide I
		7.3 Submit minutes/		7 days	SOO IV/ UPAO
		resolutions of the			Coordinator
		meeting			
		undertaken.			Registration Officer IV
			Total	17 days	
			TOLAI	17 days	

### 8 Support on Financial Assistance

Office or Division:	URBAN POOR AFF	AIRS OFFIC	F.		
Classification:	Complex				
Type of Transaction:	Government to Gover	ment/ Gover	ment to client		
Who may avail:				mal cottlorg	
-	Underprivileged and				
CHECKLIST OF RE			WHERE TO S	ECURE	
Payrolls/ Vouchers			Affairs Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
8. Support on Financial Assistance	8.1 Assist in the preparation of documentary requirements for relocation or financial assistance to evictees/displac ed by development.	None	2-3 days	SOO IV/ UPAO Coordinator Administrative Aide I	
	8.2 Prepare, sign and submit	None	2-3 days	SOO IV/ UPAO Coordinator	



financial documents such as payroll, vouchers, and obligation requests with complete attachments.			Administrative Aide I
	Total	6 days	

FEEDBACK AND COMPLAINTS MECHANISM					
How to send feedback	Through available feedback forms				
How feedbacks are processed	Referred to Engr. Augusto B. Ante, SOO IV/UPAO Coordinator				
How to file a complaint	Formal Letter indicating therein the subject of complaint				
How complaints are processed	Referred to Engr. Augusto B. Ante, SOO IV/UPAO Coordinator				
Contact Information of UPAO					

Office	Address	Contact Information
Urban Poor Affairs	City Hall Compound,	
Office	Legazpi City	



### CITY MAYOR' OFFICE INFORMATION TECHNOLOGY DIVISION

**External Services** 



#### • External Services

#### 1. Technical Assistance to Researchers

Researchers from academe, government agencies and private entities shall have official request as to their needed data.

Office or Division:	Information Technology Division			
Classification:	Simple			
Type of Transaction:	Government to Client (G Government to Governm			s Entity (G2B),
Who may avail:	Academes, Private Entiti employees	es, Goveri	nment Agencies, C	City offices and
CHECKLIST OF F			WHERE TO SEC	CURE
Letter request				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Researchers with official request goes to the Information Technology Office to ask for technical assistance	<ol> <li>Information Systems Analyst III verifies/checks the request as to availability of data</li> </ol>	None	2 minutes	Information Systems Analyst III
	2. Information Technology Officer II coordinate with concerned office and ask permission as to release of data being requested	None	5 minutes	Information Technology Officer II
	3. Information Systems Analyst III extract from database the requested data and release to the researcher.	None	5 minutes	Information Systems Analyst III
3. Researcher/s received the data and concur that the same are correct.	4. Information Systems Analyst III ask the researcher to receive the data officially	None	3 minutes	Information Systems Analyst III
	TOTAL:	None	15 minutes	



## City Mayor's Office Information Technology Division

**Internal Services** 



# 1. Request for Computer, Printer, Internet and Network Repair or Troubleshooting

Legazpi City hall employees shall request technical assistance for their respective offices.

Office or Division:	Information Technology Division				
Classification:	Simple	Simple			
Type of Transaction:	Government to Gov	/ernment (	G2G)		
Who may avail:	City Offices and err	nployees			
CHECKLIST OF REQU	IREMENTS		WHERE TO SEC	CURE	
None	1		n Technology Divisio	on Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.City hall employee goes to the Information Technology Office to ask for technical assistance	1. Information Systems Analyst III / Senior Administrative Assistant II verifies/checks the area that needs assistance and their concern	None	20 minutes	Information Systems Analyst III/ Senior Administrative Assistant II	
2. City hall employee demonstrates the Issue or technical Problem	2. Visits the area with concern and physically inspect the problem	None	20 minutes	Information Systems Analyst III/ Senior Administrative Assistant II	
3. City hall Employee concurs that the technical Issue is resolved	3. Troubleshoots the technical issue and ensures that the problem is solved	None	8 hours	Information Systems Analyst III/ Senior Administrative Assistant II	
	TOTAL:	None	8 Hours & 40 minutes		



#### 2. Request for CCTV (Close-Circuit Television) Repair or Troubleshooting

Legazpi 911 Command Center employee shall request technical assistance.

Office or Division:	Information Technology Division			
Classification:	Simple			
Type of Transaction:	Government to Gov	/ernment (	G2G)	
Who may avail:	City Offices and err	nployees		
CHECKLIST OF REQU	IREMENTS		WHERE TO SEC	CURE
None			n Technology Divisio	on Office
CLIENT STEPS	AGENCY FEES PROCESSING PERSON			PERSON RESPONSIBLE
1.Command Center staff reports to the Information Technology Office for any faulty CCTV Cameras	1. Information Technology Officer II verifies/checks the CCTV camera that needs assistance and their concern	None	25 minutes	Information Technology Officer II
2. Command Center staff for further instructions	2. Visits the area with concern and physically inspect the problem	None	3 hours	Senior Administrative Assistant II
3. Command Center staff concurs that the technical issue is resolved	3. Troubleshoots the technical issue and ensures that the problem is solved	None	8 hours	Senior Administrative Assistant II
	TOTAL:	None	1 day, 3 hours & 25 minutes.	



# **BUSINESS PERMIT & LICENSING OFFICE**



#### 1. Application for New Business Permit

Office or Division:		Business P	ermit & Licensir	ng Office
Classification:		Simple		
Type of Transaction:		Government to Client		
Who may avail:			or New Busines	s Permit
CHECKLIST OF REQUIR	EMENTS:			
Applicants for new comply with the requirem application form (UAF) of The UAF shall be accor accountability. 1. 1 original duly filled-of 2. 1 original copy of Ske Location 3. 1 original and 1 phot Occupancy of the ne business is located. be returned to the ap 4. 1 original and 1 phot	business permits shall ents listed in the unified of the City Government. nplished and signed for out Application Form etch of Business ocopy of Certificate of w space/building where The original copy shall oplicant after verification. ocopy of DTI/SEC/CDA hal shall be returned to erification. tarized Lease Contract Authorization or	<ul> <li>WHERE TO SECURE:</li> <li>hall fied ent. for</li> <li>City's website: https//:legazpi.gov.ph/services or Business Center</li> <li>Owner of the business entity</li> <li>Owner of the business entity/Office of the Building Official/City Engineer's Office</li> <li>DTI/SEC/CDA</li> </ul>		
<ul> <li>Consent from the owner.</li> <li>Other possible requirements for new application: <ul> <li>1 original and 1 photocopy of Market Clearance for Market Stall Holders. The original copy shall be returned to the applicant after verification.</li> </ul> </li> </ul>		• Albay/Le	gazpi Market Adr	ninistration
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON/S RESPONSIBLE
Step 1: Filing, Verification, Evaluation and Assessment Location: Business Center (New Applications)	If application is deemed eligible, the Action Officer encodes the pertinent data.	None		Ma. Mae A. Codorniz Communication Affairs Assistant I



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<ol> <li>Submit accomplished and signed application form and requirements to the receiving officer.</li> </ol>	<ul> <li>Electronically submits to the BPLO for approval.</li> <li>CTO Assessor will electronically assess the taxes and fees.</li> <li>BPLO Staff prints the final version of the application form and order of payment, and release these to the applicant together with feedback form.</li> <li>If application is deemed ineligible, an applicant shall be given a notice of deficiency for compliance.</li> </ul>			Jose Kallos Jr. Admin. Aide III
Step 2: Payment of Taxes & Regulatory Charges Location: Business Center (Payment) 2.1 Pay computed taxes and fees with reference to the issued order of payment provided in hard copy, text, or email.	<ul> <li>2.1 Receives payment, prepares, and issues an Official Receipt</li> <li>2.2 Instructs the client to proceed to Business Center Lane 8 to claim the business permit.</li> </ul>	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007		CTO Collector/s
Step 3: Claim the Business Permit and other Clearances. Location: Business Center (Lane 8: Releasing Area) 3.1 Proceed to BPLO Releasing Area.	3.1 Checks the Official Receipt and	None	Applicant shall receive the following: 1. Locational clearance for the business 2. Mayor's Permit to	Ma. Jean Benito



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	Accomplished Feedback Form.	operate the business.	Administrative Officer I
3.2 Present the Official Receipt (OR) or Proof of Payment and the duly Accomplished Feedback Form	3.2 Releases the Business Permit together with the business plate and/or sticker upon presentation of Official Receipt and Feedback Form.		
	Total	3 days (maximum)	

#### 2. Application for Renewal of Business Permit

Office or Division:	Business Permit & Licensing Office
Classification:	Simple
Type of Transaction:	Government to Client
Who may avail:	Applicant for Renewal of Business Permit
CHECKLIST OF REQUIREMENTS:	WHERE TO SECURE:
<ol> <li>1 original and 1 photocopy of Proof of Income income statement from the Bureau of Internal (BIR) or Audited Financial Statement) (The or shall be returned to the applicant after verifical</li> </ol>	Revenue riginal
<ol> <li>1 original copy of Market Clearance for market holders. The market clearance shall be return applicant upon release of the business permit</li> </ol>	ed to the
<ol> <li>1 original and 1 photocopy of Cert. of Authorit Provisional Cert. of Authority for Head Office Pawnshop and Money Service Business (JM0)</li> </ol>	of BSP



	ne original shall be retur	ned to the		CLETAL SY
<ul> <li>applicant upon verification.</li> <li>4. 1 original and 1 photocopy of BSP Letter on the Issuance of Code for Pawnshops Offices and Money Service Business other than Head Office. The original shall be returned to the applicant upon verification.</li> </ul>			• BSP	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	Maximum PROCESSING TIME	PERSON/S RESPONSIBLE
Step 1- Filing, Verification & Assessment Location: Business Center (Receiving Area) 1.1 Applicant submits the complete requirements for verification and assessment to the receiving officer.	<ul> <li>1.1 If an application is deemed eligible, the Action Officer encodes the pertinent data.</li> <li><i>Electronically</i> submits the application to the BPLO for approval.</li> <li>CTO Assessor will electronically assess the taxes and fees.</li> <li>Action Officer prints the application form and tax order of payment and release the same with the feedback form for submission when claiming the permit.</li> <li>If an application is deemed ineligible, proper documentation of findings will be given to him/her.</li> </ul>	None		<ul> <li>PRIORITY LANE Jose J. Kallos Jr. Admin. Aide III</li> <li>EXPRESS LANE Joanelli E. Alejo Licensing Inspector II</li> <li>EXPRESS LANE Carlos A. Banton Admin. Aide VI</li> <li>BULK LANE Josefina B. Moratin Administrative Assistant VI</li> <li>BULK LANE Amelia A. Arevalo Administrative Assistant I</li> </ul>
Regulatory Charges				CTO Collector/s

				OFLEG
Location: Business Center Payment Location: Business Center (Payment) 2.1 Applicant pays the computed taxes and fees with reference to the issued order of payment provided in hard copy, text, or email.	<ul> <li>2.1 CTO personnel receives payment, prepares, and issues Official Receipt.</li> <li>2.2 Instructs the client to proceed to Business Center Lane 8 to claim the business permit.</li> </ul>	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13-2007		
Step 3: Claim the Business Permit Location: Business Permits & Licensing Office Lane 8 3.1 Applicant proceeds to the releasing area and present the duly accomplished feedback form.	<ul> <li>3.1 BPLO releasing officer requests the submission of Accomplished Feedback Form</li> <li>3.2 Releases the Business Permit together with the business plate and/or sticker.</li> </ul>	None		Ma. Jean Benito Administrative Officer I
	-	Total	2 hours (maximum)	



#### 3. Online Application for New Business Permit

Office or Division:		Business Permit & Licensing Office		
Classification:		Simple		
Type of Transaction:		Governmer	nt to Client	
Who may avail:		Online App	licant for New B	usiness Permit
CHECKLIST OF REQUIREME Note: The requirements application for new busin same as those for online	for face-to-face less permit are the	WHERE TO	) SECURE:	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ul> <li>Step 1- Application, Processing, Verification and Assessment</li> <li>Location: Business Permits &amp; Licensing Office.</li> <li>1.1 Applicant logs in to legazpi.gov.ph to download the electronic copy of the Application Form, fill it up and send the same to legpermit@gmail.com</li> <li>1.2 If the requirements are complete, client waits for the confirmation message from Action Officer and wait for further instructions.</li> </ul>	<ul> <li>1.1 Action Officer requests the client for the e- copy of the following documentary requirements:</li> <li>a. Filled-out and signed Application Form signed by Business Owner.</li> <li>1.2 If deemed eligible, Action Officer advises client to send required documents before</li> </ul>			Online New Rolando B. Abion Jr. Licensing Inspector I Online New Mark L. Ranola Licensing Inspector I





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<ul> <li>STEP 2: Payment of Taxes and Fees</li> <li>Location: City Treasurer's Office</li> <li>2.1 If the client opts to pay online, he or she should type in the Application Number icon in the required space, which can be found in the Tax Order of Payment (Assessment Record) sent to him/her.</li> </ul>	2.1 Land Bank & DBP Staffs, GCash and PayMaya processes the payment of the client.	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007	Land Bank or DBP Staffs, GCash or Paymaya.
<ul> <li>2.2 Client selects payment options by filling-in the needed information then proceed to click the Pay Now icon to select the type of payment he or she chooses.</li> <li>2.3 If the client opts to pay in City Treasurer's Office, he/she brings his/her Tax Order of</li> </ul>			
Order of Payment/Assessment Record and pay the taxes and fees. 2.4 Client sends the Official Receipt to <u>legpermit@gmail.com</u> . and waits for further instructions from Action Officer.	<ul> <li>2.3 City Treasurer's Office Revenue Collection Officer processes the payment &amp; issue the Official Receipt.</li> <li>2.4 If the client paid online, Action Officer advises client to</li> </ul>	None	Revenue Collection Officers - City Treasurer's Office (CTO)



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	send the Official Receipt Number or copy of the Official Receipt to legpermit@gmai I.com	Rolando B. Abion Jr. Licensing Inspector I
	2.5 Once validated with CTO, the Action Officer sends advance copy of the Permit to client & advises him/her to proceed to BPLO Lane 8 to claim the Permit.	Mark L. Ranola Licensing Inspector I
<ul> <li>STEP 3: Releasing of Mayor's Permit</li> <li>Electronic Copy of the Permit shall be emailed to the applicant, or the applicant shall claim the permit at Lane 8 BPLO Releasing Staff.</li> <li>3.1 If a representative will claim the Business Permit, Action Officer advises the client to let his representative bring with him/her an Authorization Letter.</li> </ul>	<ul> <li>3.1 Action Officer in Lane 8 asks for copies of the following documents:</li> <li>a. Accomplished Customer's Feedback Form.</li> <li>b. Authorization Letter (If a representative will claim the Mayor's Permit)</li> </ul>	Ma. Jean Benito Admin. Officer I

Total	3 days (maximum)	

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#### 4. Online Application for Renewal of Business Permit

Office or Division:		Business I	Permit & Licensi	ng Office		
Classification:		Simple				
Type of Transaction:			nt to Client			
Who may avail:			olicant for Renew	val of Business		
		Permit				
CHECKLIST OF REQUIREME	NTS:	WHERE TO	) SECURE:			
<ol> <li>1 copy of Updated Appli updated number of emp non-food (delivery vehic</li> </ol>	loyees – food & le if applicable)	City's well     https//:leg     Center		ices// or Business		
Tax Return from Quarterly Income Tax R	nt from BIR / Income the previous year. eturn	• BIR				
2.2. Audited financial	Annual Income Tax Return 2.2. Audited financial statement. 3. 1 copy of Market Clearance for market stall			Market Office		
4. 1 copy of Cert. of Author Provisional Cert of Author of Pawnshop and Money (JMC No.1 Series of 202	ority for Head Office y Service Business	• BSP				
5. 1 copy of BSP Letter on Code for Pawnshops Of Service Business other	the Issuance of fices and Money	y l				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Go to legazpi.gov.ph.						
2. Click on the Business Permit Application tab.						



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3.	Provide the information requested in the fillable forms.					
4.	Download the latest application form.					
5.	Fill out application form.					
6.	Attach requirements and send to legpermit@gmail.com	•	Action Officer			Rolando B. Abion Jr. Licensing
7.	Request for the Business Tax Order		provides the Business Tax			Inspector I
			Order of Payment			Mark L. Ranola Licensing Inspector I
8.	Proceed to the Cash Receipts Division, City Treasurer's Office			Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007		Revenue Collection Officer – City Treasurer's Office (CTO)
		•	Approval of the Business Permit Application			City Mayor's Office
		•	Issuance of the Business Permit at the			Ma. Jean Benito



Business Permits & Licensing Office		Admin. Officer I
Total	1 hour and 30 minutes	

#### 5. Tricycle Operators' Permit

Classification:	Simple		
	o inpio		
Type of Transaction:	Government t	o Client	
Who may avail:	Applicant for	Tricycle Operato	
CHECKLIST OF REQUIREMENTS:		WHERE TO SEC	URE
<ol> <li>1 duly filled out Application form.</li> <li>1 original copy of Cedula.</li> <li>1 original copy of Dropping and substitution if change motor.</li> <li>1 original copy of Special Power of Attorney (SPA) (if available)</li> <li>1 original copy of Franchise Certificate (if renewed, change name, or transferred)</li> <li>1 original copy of marriage contract or birth certificate if application is filed by the immediate family.</li> <li>1 original copy of death certificate if franchise holder is dead. The original copy shall be returned to the applicant after verification.</li> </ol>			
CLIENT STEPS AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ul> <li>1.1 Client presents the requirements for verification.</li> <li>1.1 Action Officer verifies the requirements and gives client the vehicle inspection report form and advises to proceed to the defined inspection area.</li> </ul>	None		Georgina F. Dela Cruz Job Order Clerk



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1.2 Client returns with the accomplished vehicle inspection report.	1.2 PSO/designated tricycle inspectors inspect the unit for its road worthiness.		Mel Rose Ariola Job Order Clerk
1.3 Client goes back to BPLO.	1.3 Action officer verifies the inspection report and gives client the assessment/order of payment.		
1.4 Client proceeds to the City Treasurer's Office to pay the fees.		Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007	Rev. Collection Officers - City Treasurer's Office
1.4 Client returns to BPLO and submits the Official Receipt from City Treasurer's Office	1.4 Action Officer checks the Official receipt. Mayor's Permit is then encoded and printed in 2 copies.		Georgina F. Dela Cruz Job Order Clerk
	<ul><li>1.5 Action Officer forwards the documents to the authorized persons for signature:</li><li>a. BPLO</li><li>b. LCE</li></ul>		Mel Rose Ariola Job Order Clerk



1.6 Client returns to BPLO to claim the Mayor's Permit together with the sticker and other documents.	1.6 Action Officer releases the Mayor's Permit and client affixes his signature in the logbook.	
	Total	1 hour (maximum)

#### 6. Mayor's Clearance

Office or Division:	Office or Division: Business Permit & Licensing Office			Office
Classification:		Simple		
Type of Transaction:		Government t	o Client	
Who may avail:			Mayor's Clearan	
CHECKLIST OF REQUIRE	MENTS:	WH	ERE TO SECURE	E: BPLO
	following documents:			
1. Police Clearance			PNP	
2. Barangay Cleara			Barangay	
3. City Court Cleara			City Court	
4. City Prosecutor's			City Prosecuto	or
	nt shall be returned to			
• • •	ther with the mayor's			
clearance issued.				
CLIENT STEPS	AGENCY ACTIONS	FEES TO	PROCESSING	
		BE PAID	TIME	RESPONSIBLE
Location: Business				
Permits &				
Licensing				
Office		None		Jose Ramil T.
1.1 Client asks for the list	1.1 Action Officer gives	INDITE		Mape
of requirements in	client the			Officer of the
securing the Mayor's	checklist to be			Day - BPLO
Clearance	accomplished and			
	refer the client to City Treasurer's for the			
	assessment/payment of fees.			
	UTIEES.			
				Rev. Collection
				Officers - City

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1.2 Client proceeds to CTO to pay the clearance fee.			Treasurer's Office
<ul> <li>1.3 Client secures all the requirements.</li> <li>1.4 Client goes back to Business Permit &amp; Licensing Office and submits the documents mentioned above including the Official Receipt from City Treasurer's Office.</li> </ul>	1.4 Action Officer checks the completeness of the submitted documents. If complete, clearance is printed in 2 copies and BPLO affix initial in the document.		Marites L. Raquion Admin Aide I
1.4 Client goes to the City Mayor's Office for the local chief executive's signature.	1.4 Action Officer instructs the client to go to the Mayor's Office for the City Mayor's signature		City Mayor's Office
	Total	20 minutes (maximum)	

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#### 7. Non-Revenue Miscellaneous Permit

Office or Division:	Business Permit & Licensing Office
Classification:	Simple
Type of Transaction:	Government to Client



Who may avail: CHECKLIST OF REQUIREMENTS: 1. 1 original Letter Request and Endorsement from City Engineering Office (CEO)		Applicant for Non-Revenue Miscellaneous Permit WHERE TO SECURE: Business Permit and Licensing Office			
1.1 Client presents the Endorsement from City Engineering to Officer of the Day	1.1 Officer of the Day receives. the endorsement and direct the client to concerned Action Officer.			Jose Ramil T. Mape Officer of the day - BPLO	
	Action Officer checks the endorsement and prepares the document in 2 copies & instructs the client to pay the corresponding fees at the City Treasurer's Office.	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007		Marilou Maravilla Admin Assistant I	
1.2 Client pays the corresponding fees.	1.2 Action Officer/s in City Treasurer prepares the Official Receipt.			Revenue Collection Officer – City Treasurer's Office (CTO)	
1.3 Client receives the original copy from the Action Officer.	1.3 Action Officer requests the client to sign				

the document before the Head of Office signs the final copy. 1.4 Action Officer gives the original copy to client. 1.5 Action Officer files duplicate		Asuncion C. Viñas CGDH-1 BPLO
copy. Total	30 minutes (maximum)	

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#### 8. Application for Certified True Copy of Business Permit

Office or Division:		<b>Business Per</b>	mit & Licensing	Office
Classification:		Simple		
Type of Transaction:		Government	to Client	
Who may avail:			<b>Certified True C</b>	opy of Business
		Permit		
CHECKLIST OF REQUIREME	NTS:	WHERE TO	) SECURE:	
1 original and 1 photocop	y of the document			
to be authenticated.				
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTIONS	BE PAID	TIME	RESPONSIBLE
1. Client fills out the				
request form provided.				Jose Ramil T.
by the BPLO Officer of				Mape
the day.				Information
2. Client proceeds to pay				
the required fees to		Amount of		
the City Treasurer's		fees and		Revenue
Office.		taxes to be		Collection
		paid in the		Officer – City
		Tax Order		Treasurer's
		of Payment		Office (CTO)
		issued by		

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		the CTO with reference to City Ordinance No. 13- 2007		
<ol> <li>Client returns to claim the requested document.</li> </ol>	The Officer validates the document before releasing			Jose Ramil T. Mape Information
	Total		10 minutes (maximum)	

#### 9. Application for Additional Line of Business (same location/area)

Office or Division:	Business Permit & Licensing Office
Classification:	Simple
Type of Transaction:	Government to Client
Who may avail:	Applicant for Additional Line of Business
CHECKLIST OF REQUIREMENTS:	WHERE TO SECURE:
Applicants of new business permits shall	
comply with the requirements listed in the unified	
application form (UAF) of the City Government.	
The UAF shall be accomplished and signed for	
accountability.	
5.1. 1 copy of Duly filled-out Application	City's website: https//:legazpi.gov.ph/services//
Form	or Business Center
5.2. 1 copy of Sketch of Business	<ul> <li>Owner of the business entity</li> </ul>
Location.	
5.3. 1 Photocopy of DTI/SEC/CDA	DTI/SEC/CDA
Certificate	
Other possible requirements for new application:	
	Albay/Legazpi Market Administration
7	4



<ul> <li>1 original copy of Market Clearance and Contract of Lease for Market Stall Holders.</li> <li>1 original copy of Valid Lease Contract/Authority/Certification/Notice of Award from the property owner; if business location is not owned, (<i>The building/space</i> <i>owner should have a valid business permit as</i> <i>lessor or real estate rental</i>) The original copy shall be returned to the applicant upon release of the business permit.</li> </ul>		Owner of	the business ent	ity
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON/S RESPONSIBLE
Step 1: Filing, Verification, Evaluation and Assessment Location: Business Center (New Applications) 1.0 Submit accomplished and signed application form and requirements to the receiving officer.	If application is deemed eligible, the Action Officer encodes the pertinent data. <i>Electronically submits</i> to the BPLO for approval. <i>CTO Assessor will</i> electronically assess the taxes and fees. <i>BPLO Staff prints the</i> final version of the application form and order of payment, and release these to the applicant together with feedback form. If application is deemed ineligible, an applicant shall be given a notice of deficiency for compliance.	None		Rolando B. Abion Jr. Licensing Inspector I Mark L. Ranola Licensing Inspector I
Step 2: Payment of Taxes & Regulatory Charges	2.1 Receives payment, prepares, and issues an Official Receipt.	Amount of fees and taxes to be paid in the		CTO Collector/s



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Location: Business Center (Payment) 2.1 Pay computed taxes and fees with reference to the issued order of payment provided in hard copy, text, or email.	2.2 Instructs the client to proceed to Business Center Lane 8 to claim the business permit.	Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007		
Step 3: Claim the Business Permit and other Clearances.Location: Business Center (Lane 8: Releasing Area)3.1 Proceed to BPLO Releasing Area3.2 Present the Official Receipt (OR) or Proof of Payment and the duly Accomplished Feedback Form	<ul> <li>3.1 Checks the Official Receipt and Accomplished Feedback Form.</li> <li>3.2 Releases the Business Permit together with the business plate and/or sticker upon presentation of Official Receipt and Feedback Form.</li> </ul>	None	1. Mayor's Permit to operate the business	Ma. Jean Benito Administrative Officer I
	Total		3 days (maximum)	



# 10. Online Application for Additional Line of Business (same location/area)

Office or Division:		Business Permit & Licensing Office		
Classification:		Simple	Simple	
Type of Transaction:		Government	to Client	
Who may avail:		Applicant fo	r Additional Line	e of Business
<ul> <li>CHECKLIST OF REQUIREME Note: The requirements in application for additional the same as those for on CLIENT STEPS</li> <li>Step 1- Application, Processing, Verification and Assessment</li> <li>Location: Business Permits &amp; Licensing Division</li> <li>1.1 Client logs in to legazpi.gov.ph to download the electronic copy of the Application Form, fill it up and send the same to legpermit@gmail.com</li> <li>1.2 If the requirements are complete, client waits for the confirmation message from</li> </ul>	for face-to-face line of business are	FEES TO BE PAID		PERSON RESPONSIBLE Rolando B. Abion Jr. Licensing Inspector I Mark L. Ranola Licensing Inspector I



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Action Officer and wait for further instructions.	proceeding to the next step. 1.3 Action Officer upon receiving the complete requirements, processes the sent documents and sends the Tax Order of Payment (TOP)/Assess ment Record) sent by the Action Officer in City Treasurer's Office to the client. 1.4 Action Officer advises client to pay online thru Land Bank of the Philippines (LBP) or DBP; GCASH or PAYMAYA by following the instructions as provided on their websites or pay at the Treasurer's Office Payment area.	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007	
client type in the		fees and	
Application Number icon		taxes to be	



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<ul> <li>in the required space</li> <li>which can be found in the</li> <li>Tax Order of Payment</li> <li>(Assessment Record)</li> <li>sent to him/her.</li> </ul> 1.5 Client selects payment <ul> <li>options by filling-in the</li> </ul>	2.1 Land Bank & DBP Staffs , GCash and PayMaya processes the payment of the client	paid in the Tax Order of Payment issued by the CTO with reference to City	Land Bank or DBP Staffs, GCash,
needed information then proceed to click the Pay Now icon to select the type of payment he chooses.		Ordinance No. 13- 2007	Paymaya
1.6 If the client opts to pay in City Treasurer's Office, he/she brings his/her Tax Order of Payment/Assessment Record and pay the taxes and fees.	2.3City Treasurer's Office Revenue Collection Officer processes the payment & issue the Official Receipt	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference	Revenue Collection Officers - City Treasurer's Office (CTO)
2.4 Client sends the Official Receipt to <u>legpermit@gmail.com</u> . and waits for further instructions from Action Officer.	2.4 If the client paid online, Action Officer advises client to send the Official Receipt Number or copy of the	to City Ordinance No. 13- 2007	Rolando B. Abion Jr. Licensing Inspector I
	Official Receipt to <u>legpermit@gmai</u> <u>l.com</u> . 2.5 Once validated with CTO, the Action Officer sends advance copy of the	None	Mark L. Ranola Licensing Inspector I

			OFFICE SET
<ul> <li>STEP 3: Releasing of Mayor's Permit</li> <li>Electronic Copy of the Permit shall be emailed to the applicant, or the applicant shall claim the permit at Lane 8 BPLO Releasing Staff.</li> <li>3.1 If a representative will claim the Business Permit, Action Officer advises the client to let his/her representative bring with him/her an Authorization Letter.</li> </ul>	Permit to client & advises her to proceed to BPLO Lane 8 to claim the Permit.	3 days	Ma. Jean Benito Admin. Officer I
		(maximum)	

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#### 11. Request for Certification of Business Record

Office or Division:	Business Permit & Licensing Office
Classification:	Simple
Type of Transaction:	Government to Client
Who may avail:	Applicant for Certification of Business
	Record



CHECKLIST OF REQUIREME Request form	INTS:		SECURE: rmit and Licensing	
		DUSITIESS FE		g Onice
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Client fills out the request form then submit the form once done.</li> </ol>	Officer checks the form and advises client to proceed to the Treasurer's Office for payment.			Margie Martinez Job Order Clerk
2. Client proceeds to pay the required fees at the City Treasurer's Office		Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007		Revenue Collection Officer – City Treasurer's Office (CTO)
<ol> <li>Client returns to present the official receipt to claim the requested copy of record/document.</li> </ol>	Officer releases the record requested by the Client as soon as the payment is done.			Ma. Jean Benito Admin. Officer I
	Total		30 Minutes (maximum)	

#### 12. Application for Transfer of Location/Business Address

Office or Division:	Business Permit & Licensing Office
Classification:	Simple
Type of Transaction:	Government to Client
Who may avail:	Applicant for Transfer of Location/Business Address
CHECKLIST OF REQUIREMENTS: Applicants of new business permits shall comply with the requirements listed in the unified	WHERE TO SECURE:



<i>insurance policy, if available)</i> The original copy shall be returned to the applicant	
The original copy shall be returned to the applicant	
upon release of the business permit.	
Other possible requirements for new application	
<ul> <li>1 original copy of Market Clearance and contract of Lease for Market Stall Holders</li> </ul>	Albay/Legazpi Market Administration
<ul> <li>1 original copy of Valid Lease</li> </ul>	• Owner of the business entity
Contract/Authority/Certification/Notice of	Owner of the business entity
Award from the property owner if business location is not owned. (The building/space	
owner should have a valid business permit as	
lessor or real estate rental) The original copy shall be returned to the	
applicant upon release of the business permit.	
<ul> <li>Requirements that may be determined upon evaluation of the application, such</li> </ul>	
as:	
a. 1 original copy of Affidavit of No	
Improvement/Electrical Plan (for change of use)	
b. 1 original copy of Affidavit of non-	
objection/Manifestation on business	
operation (non-conforming use per Zoning Ordinance);	
c. 1 original copy of Environmental	
Compliance Certificate/ Certificate of	
Non-coverage (hazardous/ project of national significance)	
CLIENT STEPS AGENCY ACTIONS	FEES TOPROCESSINGPERSON/SBE PAIDTIMERESPONSIBLE



<b>F</b>			 FICIAL SV
Step 1: Filing, Verification, Evaluation and Assessment Location: Business Center (New Applications) 1.2 Submit accomplished and signed application form and requirements to the receiving officer.	If application is deemed eligible, the Action Officer encodes the pertinent data. <i>Electronically submits</i> <i>to the BPLO for</i> <i>approval.</i> <i>CTO Assessor will</i> <i>electronically assess</i> <i>the taxes and fees.</i> <i>BPLO Staff prints the</i> <i>final version of the</i> <i>application form and</i> <i>order of payment, and</i> <i>release these to the</i> <i>applicant together with</i> <i>feedback form.</i> If application is deemed ineligible, an applicant shall be given a notice of deficiency for compliance.	None	Rolando B. Abion Jr. Licensing Inspector I Mark L. Ranola Licensing Inspector I
Step 2: Payment of Taxes & Regulatory Charges Location: Business Center (Payment) 2.1 Pay computed taxes and fees with reference to the issued order of payment provided in hard copy, text, or email.	<ul> <li>2.1 Receives payment, prepares, and issues an Official Receipt</li> <li>2.2 Instructs the client to proceed to Business Center Lane 8 to claim the business permit.</li> </ul>	Amount of fees and taxes to be paid in the Tax Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007	CTO Collector/s

Step 3: Claim the Business Permit and other Clearances Location: Business Center (Lane 8: Releasing Area) 3.1 Proceed to BPLO Releasing Area.	3.1 Checks the Official Receipt and Accomplished Feedback Form	None	Applicant shall receive the following: 1. Locational clearance for the business 2. Mayor's Permit to operate the business	Ma. Jean Benito Administrative Officer I
3.2 Present the Official Receipt (OR) or Proof of Payment and the duly Accomplished Feedback Form.	3.2 Releases the Business Permit together with the business plate and/or sticker upon presentation of Official Receipt and Feedback Form.			
	Total		3 days (maximum)	

#### Procedure for Filing Complaint

FEEDBACK AND COMPLAINTS MECHANISM				
How to send feedback	Call or Text at: 0915-872-7722 Email at: legpermit@gmailcom Accomplish Feedback form			
How feedbacks are processed	<ol> <li>Clients are given the Feedback Form based on the number of services they availed whether online or face to face transaction. If they availed one or two services, they are given 1 form for each of the service/s they availed.</li> <li>The service provider collect these forms at the end of the transaction day and submitted to the Admin. Officer for recording.</li> </ol>			



<ul> <li>3. These are then collated per quarter a averaged as to the rating each client gaper service availed.</li> <li>3. The collated rating per quarter are the presented under the Client Satisfaction Measurement (CSM) Report to get the office' rating.</li> <li>4. This report is then submitted to the C Human Resource Management Office (CHRMO) for the collation of the agency rating to be presented under the Harmonized CSM Report which will be</li> </ul>	ve en ty
per service availed. 3. The collated rating per quarter are the presented under the Client Satisfaction Measurement (CSM) Report to get the office' rating. 4. This report is then submitted to the C Human Resource Management Office (CHRMO) for the collation of the agency rating to be presented under the	en ty
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(CHRMO) for the collation of the agency rating to be presented under the	''S
rating to be presented under the	
submitted to the ARTA Authority.	
Complaints may be filed in writing or in	
person. You may send a letter of complaints	aint
addressed to Ms. Asuncion C. Viñas	
How to file a complaint CGDH-1 BPLO or email it at	
legbplo@gmail.com	
You may also call or text your complaint	at <sup>.</sup>
0915-872-7722.	ш.
The following steps are followed in the	
processing of complaints:	
1. In the Client Satisfaction	
Measurement (CSM) Survey For	n.
the client (online/walk-in) can air	,
their complaints/suggestions thro	uah
online or face to face. These	- 3-
complaint/s are assessed as to w	hat
action/s shall be taken.	
2. The Head of Office calls the	
attention of the concerned servic	ڊ ڊ
provider to verify the very site of t	
How complaints are processed provider to verify the veracity of t complaint.	
3. When the complaint is checked a	e to
its veracity, the Head of Office wi	
then act on the complaint. This c	
fall under the light offense or grav	C
offense depending on the	
commission of the act. The City	
Human Resource Management	
Office if called to assist can apply	
their corresponding sanction/s.	
4. If the client asks for an appropria	
action in the form of a letter, he/s	
shall be given appropriate feedba	CK



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	as to the action/s applied to rectify the act which need to be addressed
	Text Contact Center ng Bayan at 0908- 881-6565 or Call at 1-6565* or you may Log-on to <u>www.contactcenterngbayan.gov.ph</u>
Contact Information of Contact Center ng Bayan, PCC, ARTA.	For concerns or complaints call ARTA at (02) 8478-5099 or text 0969-257-7242/0928-690-4080 or you may send your complaints to <u>complaints@arta.gov.ph</u>

Office	Address	Contact Information
BPLO	Business Center, City Hall, Legazpi City	0915-872-7722



## **CITY ACCOUNTANT'S OFFICE**



### # External Services - Barangay Operations

Service Information

Office or Division:	Barangay Operations	Division			
Classification:	Highly Technical				
Type of Transaction:	Frontline Services	Frontline Services			
Who may avail:	Barangay Officials / L	inked Agencie	es		
CHECKLIST OF RE			WHERE TO SI	ECURE	
1. AF51 (Official Receipt	s)	City Treasurer's	s Office		
2. CTC (Community Tax	Certificate)	City Treasurer's	s Office		
3. Journal Entry Voucher	rs (JEV)	Respective Bar	angay Units		
4. Trial Balance			t's Office Barangay Div		
5. Financial Statements	1		t's Office Barangay Div		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Technical Assistance to Barangay Operation.</li> </ol>	1.1 Consultation & Coaching/ Mentoring of Barangay Officials regarding flow of transaction and other Barangay Operations.	None	30 Minutes - 1 Hour	Angeli G. Francisco Admin Officer V Alma A. Ante Admin Officer IV Gloria E. Aringo City Accountant	
2. Monitoring of Barangay Collections and Deposits.	<ul> <li>2.1 Verify AF51/ CTC issued by the Barangay Treasurer.</li> <li>2.2 Prepare and posting of Journal Entry Vouchers of Barangay Transactions.</li> <li>2.3 Prepare JEV of Brgy Share for posting, and Disbursement Voucher for transfer to Brgy's depository Bank.</li> <li>2.4 Distribution of Income (Brgy RPT</li> </ul>	None	30 Minutes – 1 Hour 1 – 3 days 1 – 3 days	Job Order Employee Angeli G. Francisco <i>Admin Officer V</i> Alma A. Ante <i>Admin Officer IV</i> Selina B. Abinion Admin Aide I Alma Ll. Baldon Admin Aide I Gloria E. Aringo City Accountant	



2 laguar f	24 Drevenetter of		20 Minutes	
<ol> <li>Issuance of Barangay Certification</li> </ol>	3.1 Preparation of Certificate of Underestimated Income as per		30 Minutes as per request	Angeli G. Francisco Admin Officer V
	request.	None	30 Minutes as	Alma A. Ante
	3.2 Issuance of Certificate of Income,		per request	Admin Officer IV
4. Preparation of	4.1 Received Disbursement Vouchers		30 minutes	Job Order Employees
Financial Statements and other Financial Reports.	4.2 Prepare Journal Entry Vouchers for disbursements.	None		Angeli G. Francisco Admin Officer V
	4.3 Post transaction details in Journal of Barangay Transactions		30 minutes – 1 hour	Alma A. Ante Admin Officer IV
	4.4 Preparation of Trial Balances and Financial Statements		1 – 20 days	
5. Submission to Commission on Audit, Financial	5.1 Submission to COA Trial Balances. Bank Reconciliation		On or before the 20 <sup>th</sup> of ensuing month	Angeli G. Francisco Admin Officer V
Reports, Records, Documents.	Statements.	None	1 – 20 days	Alma A. Ante Admin Officer IV
boomining.	5.2 Transmittal of Disbursement	None	1 20 00 95	Job Order Employees
	Vouchers and Collections.			Gloria E. Aringo City Accountant



### # Internal Services – Accounting Services/Accountability

#### Service Information

Office or Division:	Accounting Services/	Accountability	Division	
Classification:	Highly Technical	·····		
Type of Transaction:	Frontline Services	Frontline Services		
Who may avail:	Payee/Creditor			
CHECKLIST OF RE	QUIREMENTS		WHERE TO S	ECURE
1. Official Receipts and I	Deposit Slip	City Treasurer	's Office	
2. Report of Daily Collec	tions & Deposits	City Treasurer	r's Office	
3. Journal Entry Vouche	rs	City Accounta	nt's Office	
4. Cash & Check Disburs	ement Journal	City Accounta	nt's Office	
5. Liquidation Report		City Accounta		
6. Accountant's Advice	1	City Accounta		1
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Recording and monitoring of Collections and deposits.</li> </ol>	1.1 Official Receipts and Deposit Slips, & Report of collections and deposits for General Fund, Trust Fund and Special Education Fund verified, check, distributed, recapitulated and encoded.	None	1 – 3 days	Luchi C. Yanzon SAO Vanessa Chariss A. Arena Admin Officer II Fatima N. Ramos Admin Officer V Lenelyn Nuñez Admin Officer IV
2. Encoding of Report of Daily Collection and Deposits	<ul> <li>2.1 Report of Daily</li> <li>Collections &amp; Deposits</li> <li>of Special Education</li> <li>Fund and General</li> <li>Fund encoded to Cash</li> <li>Receipt Journal.</li> <li>2.2 Journal Entry</li> <li>Voucher for</li> <li>Distributed Income of</li> <li>General Fund, with</li> <li>Report of Collection &amp;</li> <li>Deposits prepared &amp;</li> </ul>	None	1 – 3 days	Luchi C. Yanzon SAO Vanessa Chariss A. Arena Admin Officer II Fatima N. Ramos Admin Officer V Lenelyn O. Nuñez Admin Officer iV
	encoded.		1 – 3 days	Nikka B. Nuelan Admin Aide l



3. Encoding of Journal Entry Vouchers and Preparation of Cash / Check Disbursement Journal	<ul> <li>3.1 Disbursement</li> <li>Vouchers/Payrolls of</li> <li>Special</li> <li>Education/General</li> <li>Fund/Economic</li> <li>Enterprise received</li> <li>from City Treasurer's</li> <li>Office reviewed,</li> <li>detached and</li> <li>encoded, Journal</li> <li>Entry Vouchers to</li> <li>Journal Check Issued</li> <li>and Cash</li> <li>Disbursement Journal</li> <li>3.2 Check/Cash</li> </ul>	None	1 – 20 days	Luchi C. Yanzon <i>SAO</i> Fatima N. Ramos <i>Admin Officer V</i> Mark-Jason L. Del Rio Admin Officer II
	Disbursement Journal and Cash Disbursements Journal of General Fund/MBTS/Special Education Fund prepared, summarized and recapitulated, and signed by City Accountant.			Vanessa Chariss A. Arena Admin Officer II Gloria E. Aringo <i>City Accountant</i>
	3.3 Disbursement Vouchers/Payrolls, Report of Collection and Deposit/Official Receipts, Deposit Slips, Journal Entry Vouchers and Liquidation Reports binded and submitted to Commission on Audit			JOB ORDER



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Posting of transactions to General Subsidiary Ledgers and other records	4.1 Check/Cash Disbursement Journal and Cash Receipt Journal of Special Education Fund and General Fund posted to General Ledger.	None	1- 20 days	Contractual Employee Luchi C. Yanzon <i>SAO</i>
	4.2 Disbursement Vouchers/Payrolls and Report of Collection and deposits of General Fund/MBTS/Special Education Fund and TRUST FUND posted to Subsidiary/General Ledgers.			Mark-Jason L. Del Rio Admin Officer II Vanessa Chariss A. Arena Admin Officer II
Monitoring Report on Cash Advance/Prepar ation of report.	5.1 Monitoring Report on Cash Advance for Special Education Fund, Trust Fund, General Fund prepared, reviewed, signed and submitted.	None	7 – 10 Days	Luchi C. Yanzon SAO Venessa Chariss A. Arena Admin Officer II Efren A. Oliva Jr Admin Aide III Gloria E. Aringo City Accountant
Unserviceable Property Plant & Equipment Report.	6.1 Preparation of Journal Entry Vouchers for Unserviceable Property Plant & Equipment for General Fund and Special Education Fund.	None	7 – 10 Days	Luchi C. Yanzon <i>SAO</i> Gloria E. Aringo <i>City Accountant</i> <i>JOB ORDER</i>
	transactions to General Subsidiary Ledgers and other records Monitoring Report on Cash Advance/Prepar ation of report. Unserviceable Property Plant & Equipment	transactions to General Subsidiary Ledgers and other recordsDisbursement Journal and Cash Receipt Journal of Special Education Fund and General Fund posted to General Ledger.4.2 Disbursement Vouchers/Payrolls and Report of Collection and deposits of General Education Fund and TRUST FUND posted to Subsidiary/General Ledgers.Monitoring Report on Cash Advance/Prepar ation of report.5.1 Monitoring Report on Cash Advance for Special Education Fund, Trust Fund, General Fund prepared, reviewed, signed and submitted.Unserviceable Property Plant & Equipment Report.6.1 Preparation of Journal Entry Vouchers for Unserviceable Property Plant & Equipment for General Fund and Special Education	transactions to General Subsidiary Ledgers and other recordsDisbursement Journal and Cash Receipt Journal of Special Education Fund and General Fund posted to General Ledger.None4.2 Disbursement Vouchers/Payrolls and Report of Collection and deposits of General Fund/MBTS/Special Education Fund and TRUST FUND posted to Subsidiary/General Ledgers	transactions to General Subsidiary Ledgers and other recordsDisbursement Journal and Cash Receipt Journal of Special Education Fund and General Ledger.None1- 20 days4.2 Disbursement Vouchers/Payrolls and Report of Collection and deposits of General Education Fund and TRUST FUND posted to Subsidiary/General Ledgers



and of S Jou Voi Dej Pro	mputation d Preparation Schedule and urnal Entry ucher for preciation of operty Plant Equipment.	8.1 Monthly Depreciation of Property Plant and Equipment of General Fund and Special Education Fund computed and prepared. 8.2 Journal Entry Voucher for	None	2 days	Luchi C. Yanzon SAO Mark-Jason L. Del Rio Accountant III Gloria E. Aringo
De	preciption of	·			
	•				
	. ,	•	None	2 days	Mark-Jason L. Del Rio
& E	Equipment.	prepared.			Accountant III
		8.2 Journal Entry			
		Voucher for			Gloria E. Aringo
		Depreciation Expense			City Accountant
		of General Fund and			
		Special Education			
		Fund computed and			Job Order Employees
		signed.			



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8 Preparation/ Encoding/ Printing of summary of monthly remittances.	9.1 Encoding of mandatory contributions to GSIS, PHIC and HDMF remittance system and loan re- payments.		1 – 3 days 1 – 3 days	Ma.Ophelia B. de Vera Admin Asst. II
	<ul> <li>9.2 Online submission</li> <li>of mandatory</li> <li>deductions to concern</li> <li>agencies.</li> <li>9.3 Printing of Hard</li> </ul>	None	1 – 3 days	Francis D. Arcilla <i>Admin Aide VI</i> Arnold L. Ajero Admin Asst II
	copy for submission. 9.4 Preparation and review of summary of remittance.			Job Order Employees
	9.5 Disbursement Voucher prepared, signed and processed.			
	9.6 Check issued for payment of remittances of mandatory deductions and loan remittance to concern agencies			
9 Preparation/ Issuance of Accountant's Advice	10.1 Accountant's Advice prepared, reviewed, signed and transmitted to Banks	None	Daily	Roy A. Apuli Admin Aide IV Gregorio B. Arienda Admin Aide III Gloria E. Aringo
				City Accountant Job Order Employee



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11 Postng to Individual Subsidiary		None	1 – 7 days	Ma.Ophelia B. de Vera <i>Admin Asst. ll</i>
Ledgers/ II of Paymer GSIS & PH contributio premiums Ioan re- payments.	ts for individual subsidiary C ledgers of plantilla, ons/ contractual and job and order personnel.			Fernanda D. Biñas Admin Aide I
12. Issuance o HDMF Certificate	f 11.1Certificate of Net Take Home Pay for			Francis D. Arcilla Admin Aide Vl
Loan Remittanc Net Take H Pay.	HDMF MPL & e and Calamity Loan of	None	1 – 3 days	Arnold L. Ajero Admin Asst ll
	<ul> <li>11.2 Prepared Life &amp; Retirement Premium remittance Statement Certificate as per request</li> <li>.</li> <li>11.3 PHIC remittance prepared reviewed and signed</li> </ul>		1 – 7 days 1 – 7 days	Ma.Ophelia B. de Vera <i>Admin Asst. II</i> Fernanda D. Biñas Admin Aide I
13. Issuance o Certificate creditors.		None	30 minutes	Liezl Carullo Admin Aide I Gloria E. Aringo
				City Accountant



#### # Internal Services – Internal Resource Management/Financial Resource Management Division

Service Information

Office or Division:	Internal Resource Ma	nagement/Fin	ancial Resource I	Management Division
Classification:	Highly Technical	general		
Type of Transaction:	Frontline Services			
Who may avail:	Link Agencies	-		
CHECKLIST OF RE	EQUIREMENTS		WHERE TO S	ECURE
1. Financial Statement	(Quarterly & Annually)	City Accounta	nt's Office	
2. Report of Daily Colle	ections	City Accounta	nt's Office	
3. Real Property Tax Co	ollections	City Accounta	nt's Office	
4. Bank Statement		Accredited Ba	nks	
5. Disbursement Voucl Request	hers and Obligation	City Accounta	nt's Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Preparation of Financial Statements and other related records for submission to Commission on Audit.	1.1Trial Balance of Trust Fund, General Fund prepared, reviewed and signed for submission to Commission on Audit. 1.2 Quarterly Financial Statement Reports of General Fund and Special Education Fund, including Trial Balance, Statement of Financial Performance, Statement of Financial Position, Cash Flow Statement, Statement of Changes in Equity and Schedule of Receivables & Payables prepared, reviewed and signed.	None	1 – 20 days Quarterly	Gloria E. Aringo <i>City Accountant</i> Luchi C. Yanzon SAO Mark-Jason L Del Rio Accountant III Vanessa Chariss A. Arena Admin Officer II Contractual Employees



				ICIAL 3
	<ul> <li>1.3 Annual Financial Reports for Special Education fund, Trust Fund and General Fund including Trial Balance, Statement of Financial Performance, Statement of Financial Position, Cash Flow Statement, Statement of Changes in Net Assets/Equity, Notes to Financial Statements and Schedule of Receivables &amp; Payables and Statement of Management Responsibility prepared, reviewed and signed.</li> <li>1.4 Consolidated</li> </ul>		Yearly (on or before March 31 of the ensuing year.)	Luchi C. Yanzon SAO Mark-Jason L. Del Rio Accountant III Vanessa Chariss A. Arena Admin Officer II Gloria E. Aringo <i>City Accountant</i>
	Financial Statements, prepared, reviewed and signed. Submitted.		1 – 20 days	
2. Posting of transactions to Index of Payments and other related transactions	2.1 Report of Daily Collections & Deposits 2.2 Collection of Real Property Tax, checked and verified. 2.3 Bank Reconciliation of all funds prepared, reviewed and signed 2.4 Check and Cash Disbursement Journal of Trust Fund prepared, summarized and recapitulated and signed.	None None	daily 1 – 3 days	Lenelyn O. Nuñez Admin Officer IV Eden A. Valenzuela Admin Asst III Lorna M. Marbella Admin Aide IV Vanessa Chariss A. Arena Admin Officer II Contractual Employee



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	3.1 Disbursement Vouchers/Payrolls of various offices assigned control numbers, obligated, posted to different	None	1 – 3 days	Lorna M. Marbella <i>Admin Aide IV</i> Gloria E. Aringo <i>City Accountant</i>
	accounts and preparation of Journal Entry Vouchers and signed.	None		Eden A. Valenzuela
	<ul><li>3.2 Prepare summary of remittance for loan deductions.</li><li>3.3 Disbursement</li></ul>			Admin Asst II
3. Disbursement Vouchers/ Payroll Preparation and availability of allotment and	Voucher and Journal Entry Voucher for remittance to accredited banks for loan amortizations prepared		1 – 3 days	Myrna P. Vallespin
Completeness of documents certified.	3.4 Disbursement Vouchers and Journal Entry Voucher for various barangay augmentation fund and withdrawal	None	30 minutes	Admin Aide VI
	guaranty deposits (retention) prepared. 3.5 Disbursement vouchers and OBR's for electric and water bills reviewed and prepared			
	3.6 Allotment Release Order recorded and posted quarterly	None		Lorna M. Marbella Admin Aide IV
	3.7 Obligation Request encoded/recorded to individual accounts.	None	1 – 3 days Quarterly	



<ol> <li>Issuance of certificate of disbursement/ Obligations submitted to National Government Agencies.</li> </ol>	4.1 Issuance of certificate of disbursement/ Obligations prepared and submitted to National Office as requested.	None	1 – 3 days	Vanessa Chariss A. Arena Admin Officer II Gloria E. Aringo City Accountant
5. Compliance with the Transparency and Good	5.1Statement of Debit service, Statement of Income & Expenses, Cash Flow, of General Fund, Trust Fund, SEF Utilization, BUB Utilization, Local Reduction Disaster Risk Mgt Fund Utilization posted to three (3) conspicuous places and uploaded to DILG portal & City of Legazpi Website.			Jose A. Asejo Admin Asst I
Governance	5.2Preparation and Submission of annual APP, MTPIP, AIP, PPMP, semi annual Accomplishment Report and other required office reports for online submission.			Genalin D. Lorilla Sr. Admin Asst. ll



#### # Internal Services – Pre-Audit Services Division

Service Information				
Office or Division:	Pre-Audit Services Di	vision		
Classification:	Highly Technical			
Type of Transaction:	Frontline Services			
Who may avail:	Linked Agencies			
CHECKLIST OF RE			WHERE TO S	ECURE
1. Disbursement Vouc	hers and Obligation	City Accounta	nt's Office	
Request/ Payrolls				
2. Certificate of Credita Source BIR 2307	able Tax Withheld at	City Accounta	nt's Office	
3. Certificate of Comp Withheld BIR 2316	ensation Payment/Tax	City Accounta	nt's Office	
4. Alpha Data Entry		BIR		
5. Statement of Remit	ance	City Accounta	nt's Office	
6. Summary of Remitta		City Accounta		
7. Payroll for Wages		Respective Of		
8. Journal Entry Vouch	orc	City Accounta		
o. Journal Entry VOUCH	CI 3	City Accounted		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Reviewing/ checking the correctness and completeness of documents</li> </ol>	1.1 Disbursement vouchers/ Payrolls for General Fund, Trust Fund, Special Education Fund and other transactions of National Agencies granted to LGU's assigned numbers, reviewed, verified and check, pre-audited and acted upon receipt.	None	1 – 3 days	Estrella E. Ala <i>SAO</i> Genalin D. Lorilla <i>Sr. Admin Asst II</i> JO Employees
<ol> <li>Posting of transactions to Index Card of Payments, Subsidiary Ledgers and other records.</li> </ol>	<ul> <li>2.1 Payrolls for salary, wages of Job</li> <li>Order/Contractual</li> <li>employees posted to</li> <li>Individual Index Card</li> <li>of Payments.</li> <li>2.2 Disbursement</li> <li>Vouchers for utility</li> <li>bills posted to</li> <li>Subsidiary Ledgers.</li> </ul>	None None	1– 3 days	Estrella E. Ala <i>SAO</i> Marietta L. Valencia <i>Admin Asst II</i> Efren A. Oliva Jr. <i>Admin Aide III</i> JOB ORDER EMPLOYEES

#### Service Information

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	2.3 Withholding Tax deducted from employees posted to Individual Ledger Card.	None	1-3 days	Genalin D. Lorilla <i>Sr. Admin Asst 11</i> Job Order Employee
	<ul> <li>3.1 Withholding taxes deducted from employees and from creditors encoded to Alpha Date Entry upon receipt.</li> <li>3.2 Summary of Withholding remittance prepared and computed.</li> <li>3.3 Encoded the taxes withheld from employees compensation, and various creditors to BIR remittance system.</li> </ul>	None	1 – 20 days Every 10 <sup>th</sup> day of ensuing month	Genalin D. Lorilla Sr.Admin Asst II
3. Preparation of Statement of Remittance and other Financial documents	3.4 Prepare Disbursement vouchers and Journal Entry Voucher for BIR remittances, signed and process for submission to accredited bank including tax debit memo.	None		Gloria E. Aringo City Accountant
	<ul> <li>3.5 Submission online all the taxes withheld for the month to BIR portal</li> <li>3.6 Submission of Annual Taxes Withheld from employees and various creditors.</li> </ul>	None	Every Jan 31 <sup>st</sup> of the ensuing year (1604-C) Every March 1 of the ensuing year (1604-E)	



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<ol> <li>Withholding Tax Adjustments and Issuance of Cert of Taxes Withheld.</li> </ol>	<ul> <li>4.1 Prepare and computed salary adjustment for step increment, promotion, separation, salary increase and other related salary adjustments.</li> <li>4.2 Prepare and signed Cert of Taxes Withheld 2316 to employees.</li> </ul>		as requested	Genalin D. Lorilla <i>Sr Admin Asst 11</i> Gloria E. Aringo <i>City Accountant</i>
5. Monitoring of Cash Advances	<ul> <li>5.1 Cash Advances granted for travel granted to officials and employees monitored.</li> <li>5.2 Prepare monitoring report on Cash Advances of all funds, prepared, review, signed and submitted to COA.</li> </ul>	None	1-20 days	Efren A. Oliva Jr. <i>Admin Aide III</i> Gloria E. Aringo <i>City Accountant</i>
6. Payroll Preparation	<ul> <li>6.1 General Payroll for salaries of all offices/departments prepared, reviewed, printed and forwarded to concerned offices for signature of Department Head.</li> <li>6.2 Statement of remittances deducted from salary including loan amortization.</li> </ul>	None None	1 – 7 days	Efren A. Perez <i>Admin Aide Vl</i>



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	<ul> <li>6.3 General Payroll for PERA/RATA prepared and printed.</li> <li>6.4 Pay slips of employees prepared and printed.</li> </ul>	None		
7 Uploading of Salaries and other benefits.	Prepared summary of salaries of employees and other benefits, reviewed and signed for submission to Phil Veteran's Bank for uploading to individual bank accounts.	None	1-3 days	Efren A. Perez Admin Aide VI <i>Estrella E. Ala</i> <i>SAO</i> Gloria E. Aringo <i>City Accountant</i>



FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback	Through a customer feedback
	form, letter, email or electronic
	messaging.
How feedbacks are processed	Forwarded to concern unit, and
	acted upon within the prescribed
	period.
How to file a complaint	Through a letter, email or
	electronic messaging, addressed to:
	10.
	MS. GLORIA E. ARINGO
	City Accountant
	City Accountant's Office
	City Hall Annex Bldg.
	Rizal St., Legazpi City
How complaints are processed	Check on the details of the
	complaints, ask for the incident
	report by the concerned
	employee, with documentary
	attachment, then a letter-reply to the complainant.
Contact Information of CCB,	CCB:
PCC, ARTA	09088816565
,	Email: @
	contactcenterngbayan.gov.ph
	PCC:
	8888
	pcc@malacanang.gov.ph
	(02) 84785093



Division	Email Address	Contact Information
Accounting Services-	Lgulegazpi2020@gmail.com	Hotline Number
Accountability		742-3700
Internal Resource	Lgulegazpi2020@gmail.com	Hotline Number
Management Division		742-3700
Pre-Audit Services	Lgulegazpi2020@gmail.com	Hotline7 Number
Division		742-3700
Barangay Operation	Lgulegazpi2020@gmail.com	Hotline Number
Division		742-3700
Ms. Gloria E. Aringo	gloria_aringo@yahoo.com.ph	09175035093
City Accountant		
Ms. Genalin D. Lorilla	ginalorilla237@gmail.com	09156216683
Sr. Administrative		
Assistant II		



# **OFFICE OF THE CITY ADMINISTRATOR**

**External Service** 



### 1. External Service

Assistance to Clients with Queries, Complaints and other Concerns

Office or Division:	OFFICE OF THE CITY ADMINISTRATOR /				
Classification:	Simple Transacti	on			
Type of Transaction:	Government to C (G2B), Governme		overnment to Bus nent (G2G)	iness Entity	
Who may avail:	Clients, entities a	ind agencies			
CHECKLIST OF REQ	UIREMENTS		WHERE TO SEC	URE	
None		None			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit a copy of complaint at the City Admin. Office receiving area for record purposes.	1. Record and receive documents	None	5 Minutes	Administrative Assistant IV	
2. Proceed to CA and have a brief interview/discussion of the complaint and wait for referrals/instructions.	I. Consultation       None       30 Minutes – 1       City Administrator         "Under normal circumstances per transaction       "Under normal       "Under normal				
TOTAL:	·		1 hour & 5 mins.		



# **OFFICE OF THE CITY ADMINISTRATOR/**

**Internal Service** 



#### 2. Internal Service

### Approval of BAC and SPMS Documents, Checks and OSM Documents

	OFFICE OF THE CITY ADMINISTRATOR/				
Office or Division:					
Classification:	Simple Transac	tion			
Type of Transaction:	Government to	Government	(G2G)		
Who may avail:	Offices, City Em				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Submission of Documents         <ol> <li>Submit documents</li> <li>Submit documents</li> <li>to the receiving section</li> <li>at the City Admin. Office</li> <li>for review and record</li> <li>purposes.</li> </ol> </li> </ol>	1.1 Review, Record and Receive documents	None	5 Minutes	Administrative Aide IV	
1.2 Wait for signature/approval of CA on the request;	1.2 For review and signature	None	10 Minutes *Under normal circumstances per transaction	City Administrator	
1.3 Proceed to the CMO for the release/sign the logbook for the release.	1.3 Releasing	None	5 Minutes	Administrative Aide III	
2. SPMS Documents 2.1 Submit SPMS documents to the receiving section at the City Administrator's Office for review	2.1 Record and Receive documents	None	5 Minutes	Administrative Aide IV	
2.2 Wait for action/signature/approval of CA of documents submitted; referrals to concerned departments as needed.	2.2 Review	None	1 Day	City Administrator	
	TOTAL:	None	1 day and 25 mins.		



Office	Address	<b>Contact Information</b>
Office of the City Administrator	City Administrator's Office, 2 <sup>nd</sup> floor City Hall Compound, Legazpi City	0919-3648292



# **CITY AGRICULTURE OFFICE**

**External Services** 



#### ASSISTANCE TO CLIENTS AVAILING THE SERVICES

Office or Division:						
Classification:	CITY AGRICULTURE OFFICE Simple Transaction					
		Government to Client				
Type of Transaction:	Farmers, Fisherfolks, Schools, Religious Groups, Students,					
Who may Avail:						
	Entrepreneurs, En	npioyees	, Government Of	rice, CSOs and		
	Walk-in Clients					
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE		
1. Request Form		Citv Aa	riculture Office			
2. RSBSA Registrat	tions	,	riculture Office			
		FEES				
	AGENCY	ТО	PROCESSING	PERSON		
CLIENTS STEPS	ACTIONS	BE	TIME	RESPONSIBLE		
		PAID				
1. Request for	Assist client in filing	NONE		Officer of the		
production	up visitor's logbook		2 minutes	Day		
inputs	Ask for request					
(Vegetables	form of agri-inputs					
Seeds/	for record purposes					
Seedlings,	Palay					
Fertilizers and	<ul> <li>Seeds/</li> </ul>					
Palay Seeds/	Planting					
Planting	Materials		1 minute	Administrative		
Materials/	<ul> <li>Fertilizers</li> </ul>					
Fishery Inputs)				Aide I Farm Worker I		
	<ul> <li>Fingerlings</li> </ul>			Faill WOIKELL		
	(Tilapia/					
	Bangus)					
	Mangrove					
	Seedlings					
	Check availability					
	of seeds and			Administrative		
	planting materials		1 minute	Aide I		
	then issue					
	requisition slip					
	and forward the			City Agriculturist		
	same to CAO for		1 minute			
	approval/ signature					
	Assist client to sign			Administrative		
	forms and fill-up		2 minutes	Aide I		
	logbook for		2 111110100	7 100 1		
	release,					
	Proceed to			Administrative		
	Bodega/ Nursery,		5 minutes	Administrative Aide I		
	wait for release					



	[	1			
	and receive the				
	agri inputs				
	Request For the				
	Provision/Delivery				
	of Farm Inputs				
	check the		2 minutes	Administrative	
	Schedule of the			Aide I	
	availability of				
	Vehicle/ Facility				
	Filling-up Client			Officer of the	
	Satisfactory Forms		2 minutes	Day	
2. Request/Inquiry	Assist client in filing	NONE		Officer of the	
of Agri tools	up logbook	NONE	2 minutes	Day	
Machineries	Refer to the AT/			Day	
			1 minute		
and Equipment	Concerned person				
	Discuss with client		10 minutes		
	and advise things		10 minutes		
	to do;		*Under normal		
	Schedule site visit/		circumstances	Engineer I	
	validation if		per transaction	(Agricultural)	
	necessary				
	Check availability				
	of agri-machineries				
	Guide client(s) to		5 minutes		
	fill up request				
	form/slip				
	forward the same				
	to CAO for		2 minutes	City Agriculturist	
	approval/ signature				
	Proceed to the OD				
	to record and fill up				
	logbook of the				
	approve farm				
	machinery request		2 minutes	Engineer I	
	slip			(Agricultural)	
	Schedule the Agri			( ) ,	
	Machinery				
	requested				
	Filling-up Client			4	
	Satisfactory Forms		2 minutes		
3. Agri-Fishery	Assist client in filing	NONE		Officer of the	
Technical	up logbook		2 minutes	Day	
Assistance and	Refer to the AT/			Day	
queries	Concerned person		2 minutes		
4401100	Discuss with client			Agricultural	
	and advise client		15 minutes	Technologist/	
			*Under normal	0	
	next things to do		circumstances	Aqua culturist I	
	Scheduling of site		per transaction		
	visitation, conduct		-		



	of trainings/ lecture			
	as per request.			_
	Assist client in filling up client		2 minutes	
	satisfaction form		2 minutes	
	Filling-up Client			_
	Satisfactory Forms		2 minutes	
4. Request for	Assist client in filing			
Certification/	up logbook		2 minutes	Officer of the Day
Enrollment in	Refer to the AT/			
RSBSA, PCIC	Concerned person			
insurance and	Schedule			Agricultural
Boat	site visit/			Technologist/
Registration	validation if			Aqua culturist I
	necessary			
	If Validated			
	already			
	proceed to			Administrative
	Admin		5 minutes	Officer III/ Administrative
	Section for			Administrative Aide I
	printing of certificate			Aldel
	Filling-up of forms.			
	Forward to CAO for			
	signature and		2 minutes	City Agriculturist
	approval		2 111110100	City / ignoutanot
	Proceed to Admin			Administrative
	Section for record		2 minutes	Officer III/
	and release		2 minutes	Administrative
				Aide I
	Filling-up Client		2 minutes	Officer of the
5 Processing/	Satisfactory Forms			Day Officer of the
5. Processing/ Assistance to OJT/	Assist client in filling up logbook		2 minutes	Difficer of the Day
referrals / proposal	Refer to the Admin		2 minutes	Day
and other	Review/ Check			-
educational/training/	MOA/ Mandates for			Administrative
research and	Internship between		1 day	Officer V
development	school and the			
	organization if any			
	Forward the same			
	to CAO for action/		3 min	City Agriculturist
	approval			
	Proceed to AO V		10 min	Administrative
	for brief orientation			Officer V
	Total	None	3 Days, 1 hour and 29 minutes	



\*Clients with pending documents are advised to follow-up the next working days or as per advised by the person incharge, due to unusual circumstances beyond the control of this Office.

#### Service Pledge:

To be able to effectively deliver the goods and services of the City Agriculture Office to its client, thus, improving the quality of life.

#### FEEDBACKS/COMPLAINTS MAY BE FILED THRU:

Office	Address	Contact Information
City Agriculture Office	Barangay Gogon, Barriada, Legazpi City	SHEILA R. NAS City Agriculturist Tel. No. 742-1739 Mobile: 09391550681 Email: Iegazpicitycao@gmail.com



### CITY ASSESSOR'S OFFICE Real Property

**External Services** 



#### 1. TRANSFER OF REAL PROPERTY OWNERSHIP

A New Tax Declaration (TD) is issued to the new owner when there is a transfer of ownership of real property. This is done to update the records of the City Government and for taxation purposes. Since original copies of documents are required, online application is not allowed.

Office or Division:	Evaluation/ Appraisal/ Tax Mapping/ Records				
Classification:	Complex		J J		
Type of Transaction:	Government to Client (G2C)				
Who may avail:	Real property owners within the City Government of Legazpi				
CHECKLIST OF REQU	JIREMENTS		WHERE T	O SECURE	
a. Letter request or duly accomplished request form		Information Officers			
b. certified true copy of Transfe Title (TCT) issued by Registry copies)			Registry	/ of Deeds	
c. Original duplicate copy of De (i.e., Deed of Absolute Sale; D Judicial Settlement of Estate; I 2 copies	eed of Extra				
d. Original Owner's Copy or Co of Tax Declaration subject for			City Asse	ssor's Office	
e. Photocopy of Certifica Registration (CAR) issued b	by BIR (2 copies)		Bureau of Internal Revenue		
f. Tax Clearance (present year	)	City Treasurer's Office			
g. Photocopy of Official Receip Processing Fee	ot of Transfer Tax &	City Treasurer's Office			
CLIENT STEPS	AGENCY	FEES	PROCESS	PERSON	
	ACTIONs	TO BE PAID	-ING TIME	RESPONSIBLE	
1. Clients submits duly filled- up Request Form together with the complete documentary requirements	1. Check completeness and forwarded to the City Assessor to seek approval of request	P 100.00 process ing fee	5 minutes per request	Assessment Clerk II Administrative Aide I	
	1.1 Assigns request to Assessment Officers	none	10 Minutes per request	Tax Mapper III Local Assessment	
	1.2 The LAOO Evaluates submitted documentary	none	20 Minutes per request	Operations Officer II	



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2. Client submits other requirements upon evaluation	2. The LAOO to whom it is assigned prepares, signs and submits FAAS for approval	none	1 Hour per request	City Government Assistant Department Head I Supervising Administrative Officer Local Assessment III Tax Mapper II Local Assessment Operations Officer II
	2.1 Approves FAAS	None	15 Minutes/ FAAS	CGDH I/ City Assessor
	2.2 Assigns PIN & records FAAS in the Tax Mapping Roll	None	15 Minutes/ FAAS	Supervising Administrative Officer Local Assessment Operations Officer I Draftsman II Assessment Clerk II Administrative Aide I
	2.3 Encodes FAAS and print- outs	None	15 Minutes/T D	CGADH I Tax Mapper Aide
	2.4 Signs Tax Declaration	None	15 Minutes/T D	CGADH I SAO Tax Mapper III Local Assessment Operations Officer II
	2.5 Cancellation of previous Tax Declaration	None	10 Minutes/T D	Local Assessment Operations Officer I



	Total:	100	3 Days	
				Administrative Aide I
	releases new Tax Declaration			Assessment Clerk II
the new tax declaration	documents and		/TD	Tax Mapping Aide
3. Acknowledges receipt of	3. Segregates	None	10 Minutes	
	Tax Declaration		D	
	Signs the new		Minutes/T	CGDH I/ City Assessor
	2.6 Reviews and	None	5	
				Operations Officer II
				Local Assessment

# 2. ASSESSMENT OF BUILDING, MACHINERY AND OTHER STRUCTURES

Newly constructed buildings and other structures and newly installed machineries have to be declared for taxation purposes by the owner. Consequently, declarations have to be issued.

Office or Division:	Evaluation/ Apprais	Evaluation/ Appraisal/ Tax Mapping/ Records			
Classification:	Complex				
Type of Transaction:	Government to Client (G2C)				
Who may avail:	Real property owne	rs within t		<b>,</b>	
CHECKLIST OF REQU	JIREMENTS	WHERE TO SECURE			
a) Letter request or duly ac request form	ccomplished		Informati	on Officers	
<ul> <li>b) Sworn Statement as to installed machineries</li> </ul>	cost of the newly		Registry	of Deeds	
c) Copy of the approved B /or Certificate of Comple Permit  (for building)			City Engineer's Office		
d) Blueprint copy of the ap	proved plan	City Engineer's Office			
e) Photocopy of Official Re Tax & Processing Fee	eceipt of Transfer	City Treasurer's Office			
CLIENT STEPS	AGENCY ACTIONs	FEESPROCESSIPERSONTO BENG TIMERESPONSIBLEPAIDImage: Second			
1. Client submits request/e- copy of request at the City Assessor's office e-mail address together with documentary requirements	1. Receiving Officer checks as to completeness of requirements and forwarded the same to the City Assessor for	None	5 Minutes per request	Assessment Clerk II Administrative Aide I	



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	approval of request			
	1.1 For online, IT personnel acknowledge receipts of request and attached documents, forwards to the City Assessor for approval	None	5 Minutes per request	Assessment Clerk II Tax Mapping Aide
	1.2 City Assessor assigns request to Assessment Officers	None	5 Minutes per request	CGDH I/ City Assessor
	1.3 Checks/ verifies submitted requirements & calendar date of inspection	None	20 Minutes per request	CGADH I Supervising Administrative Officer Tax Mapper III Local Assessment Operations II Administrative Assistant I
2. Confirms schedule of inspection	2. Informs client of the schedule of inspection thru text or online messaging	None	5 Minutes per client	Assessment Clerk II Administrative Aide I Assessment Clerk II Tax Mapping Aide
	2.1 Conducts ocular inspection & assessment; prepares and signs report	None	3-4 Hours (may vary due to distance size of property & availability of transportati on)	CGADH I Supervising Administrative Officer Tax Mapper III Local Assessment Operations Officer II Administrative Assistant VI(Computer Operator III) Administrative Assistant I
	2.2 Prepares and signs FAAS	None	1 Hour per tax declaration	CGADH I Supervising Administrative Officer



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				Tax Mapper III
				Local Assessment Operations Officer II Administrative Assistant I
	2.3 Approves FAAS	None	15 Minutes/FA AS	CGDH I/ City Assessor Officer
	2.4 Assigns PIN & records FAAS in the Tax Mapping Roll	None	15 Minutes/FA AS	CGADH I Administrative Aide I Administrative Aide I Administrative Assistant VI (Computer Operator III) Assessment Clerk II
	2.5 Assigns PIN & records FAAS in the Tax Mapping Roll	None	15 Minutes/FA AS	CGADH I Local Assessment Operations Officer II
				Administrative Assistant VI (Computer Operator III) Assessment Clerk II
				Administrative Aide I
	2.6 Encodes FAAS and print- outs	None	15 Minutes/FA AS	CGADH I Tax Mapper Aide
	2.7 LAOO signs Tax Declaration	None	15 Minutes/ TD	CGADH I SAO Tax Mapper III Local Assessment Operations Officer II
	2.8 Reviews and Approved the Tax Declaration	None	5 Minutes/ TD	CGDH I/ City Assessor
3. Acknowledges receipts of new Tax Declaration	3. Segregates documents and releases the Tax	None	2 Minutes/TD	Tax Mapper Aide
	Declaration; for online, sends e-			Assessment Clerk II
	copy of Owner's Copy via email			Assessment Clerk II



		Administrative Aide I
Total:	3 Days	

### 3. RE-ASSESSMENT, REVISION, CANCELLATION OF ASSESSMENT OF REAL PROPERTY

The Assessment records are being used as basis for annual real property tax computation. Property owners may request for this service for tax payment purposes

Office or Division:	Evaluation/ Appraisal/ Tax Mapping/ Records			
Classification:	Complex		•••	
Type of Transaction:	Government to Clie	nt (G2C)		
Who may avail:	Real property owne	rs within t		
CHECKLIST OF REQU	JIREMENTS			TO SECURE
a) Letter request or c request form	luly accomplished		Informat	ion Officers
b) Barangay Certification (for C	Cancelation)	Ba	arangay where	property is located
C. Tax Clearance				surer's Office
<ul><li>d. Photocopy of Official Recei</li><li>&amp; Processing Fee</li></ul>	pts of Transfer Tax		City Treas	surer's Office
CLIENT STEPS	AGENCY ACTIONs	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE
	1. Receiving Officer checks as to completeness of requirements and forwarded the same to the City Assessor's for approval request	None	5 Minutes per request	Assessment Clerk II Administrative Aide I
1. Client submits request/e- copy of request at the City Assessor's Office e-mail address together with documentary requirements	1.1 For online, IT personnel acknowledgement receipts of request and attached documents, forwards to the	None	5 Minutes per request	Assessment Clerk II Tax Mapper Aide



				ICIAL S
	City Assessor for approval			
	1.2 City Assessor assigns request to Assessment Officers	None	5 Minutes per request	CGDH I/ City Assessor
	1.3 Verifies records and evaluates, whether there is a			CGADH I Tax Mapper Aide
	basis for cancellation of assessment,	None		Local Assessment Operation Officer I
	revision or re- assessment; when inspection is necessary request forwarded		30 Minutes per request	Local Assessment Operation Officer II
	to LAOO 1.4 LAOO Checks/ verifies		20 Minutes per request	CGADH I
	submitted requirements & calendar date of			Supervising Administrative Officer
	inspection			Tax Mapper III
		None		Local Assessment Operations Officer II
				Local Assessment Operations Officer II
				Administrative Assistant I
2. Confirms schedule of inspection	2. Informs client of the schedule of inspection thru		10 Minutes per client	Assessment Clerk II
text or online				Administrative Aide I
	moodging	None		Assessment Clerk II
				Tax Mapper Aide



	2 Canducto		2 4 1 1	
3. Accompany Assessment Officers during inspection	3. Conducts ocular inspection & Assessment; prepares and signs report	None	3-4 Hours (may vary due to distance size of property & availability of transportati on)	CGADHI I Supervising Administrative Officer Tax Mapper III Local Assessment Operation Officer II Local Assessment Operation Officer II Administrative Assistant Vi (Computer Operator III)
	3.1 Prepares and signs FAAS	None	1 Hour per tax declaration	CGADHI I Supervising Administrative Officer Tax Mapper III Local Assessment Operation Officer II Administrative Assistant I
	3.2 Approves FAAS	None	15 Minutes/ FAAS	CGDH I/ City Assessor
	3.3 Prepares Notice of Cancellation, Revision or Correction	P 100.00 Proces sing Fee	20 Minutes per document	CGADHI I Tax Mapper Aide
	3.4 Verifies, cancels previous TD	None	15 Minutes per Notice	Local Assessment Operations Officer I
				Local Assessment Operations Officer II



	3.5 Approves Notice	None	5 Minutes per Notice	CGDH I/ City Assessor
	4. Releases Notice; for online, sends e-copy of Owners Copy	None	5 Minutes/ TD	Tax Mapper Aide Assessment Clerk II
4. Acknowledges receipts				Assessment Clerk II
				Administrative Aide I
	Total:	100.00	7 hours & 25 mins.	

# 4. ISSUANCE OF TRUE COPY OF TAX DECLARATION, CERTIFICATION OF PROPERTY HOLDING, NO IMPROVEMENT AND OTHER CERTIFICATION

Office or Division:	Evaluation/Records				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Real Property owners within the City of Legazpi				
CHECKLIST OF REQU	JIREMENTS		WHERE TO	SECURE	
a. Letter request or duly accor	mplished request		Informatior	n Officers	
form					
b. Xerox copy of ID and SPA					
requesting party, if not the ow			_		
c. Official Receipt (for online,			City Treasur	er's Office	
receipts paid thru Legazpi City	,				
CLIENT STEPS	AGENCY	FEES TO	PROCES		
	ACTIONs	BE PAID	SING TIME	RESPONSIBLE	
1. Client submits request/e- copy of request at the City Assessor's Office e-mail address together with documentary requirements	1. Receiving Officer checks as to completeness of requirements and verifies	None	5 Minutes per request	Assessment Clerk II Administrative Aide I	
	1.1 For Online, IT personnel acknowledges	None	5 Minute per request	Assessment Clerk II	



2. Client pays for the requested document	receipts or request and attached documents, forwards to Evaluation 2. Prepares the requested documents 2.1 Verifies data in the print -out 2.2 Approves the document	P 50.00 per document None None	20 Minutes per documen t 5 Minute 5 Minute	Tax Mapping Aide CGADH I Tax Mapping Aide Local Assessment Operation Officer I CGDH I/ City Assessor
3. Acknowledge receipt of the requested document	3. Releases requested document; for online, send e- copy via e-mail	None	5 Minutes/ Documen t	Tax Mapping Aide Assessment Clerk II Assessment Clerk II Administrative Aide I
Total:		P 100.00	45 Minutes	

## 5. HISTORY VERIFICATION OF REAL PROPERTY

No online transaction for this service since original copies of documents are required.

Office or Division:	Records Manageme	Records Management Division			
Classification:	Simple				
Type of Transaction:	G2C – Government	to Client			
Who may avail:	Real property owners within the City Government of Legazpi				
CHECKLIST OF REQ	UIREMENTS WHERE TO SECURE				
a. Letter request or duly accord	mplished request	Information Officers			
<ul> <li>b. Xerox copy of ID and SPA or authorization of requesting party, if not the owner</li> <li>c. Official Receipt (for online, client sends receipt paid thru Logazni Citu's Opling</li> </ul>		City Treasurer's Office			
paid thru Legazpi City's Online	e				



		·	•	CIAL 3
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBLE
1. Client submits request/e-copy of request at the City Assessor's Office e-mail address together with documentary requirements	1. Receiving Officer checks as to completeness of requirements and verifies request	None	5 Minutes per request	Assessment Clerk II Administrative Aide I
	1.1 For Online, IT personnel acknowledges receipts or request and attached documents forwards to evaluation	None	5 Minutes per request	Assessment Clerk II Tax Mapping Aide
2. Pays research fee	2. Verifies, researches and documents history of the real property	P/50.00 per property	1-2 Hours (may vary due to distance size of property & availabilit y of transport ation)	Local Assessment Operations Officer I Local Assessment Operations Officer II
	2.1 Result of research presented to the City Assessor for approval of release of documents	None	15 Minutes per request	Local Assessment Operations Officer I Local Assessment Operations Officer II
3. Acknowledgement receipt of the requested document	3. Releases requested document; for online, send e- copy via e-mail	None	5 Minutes/ document	Tax Mapper Aide Assessment Clerk II Assessment Clerk II Administrative Aide I



TOTAL:		2 hours	
	P/ 50.00	& 30	
		mins.	

## 6. SEGREGATION/CONSOLIDATION/SUBDIVION OF REAL PROPERTY

Office or Division:	Records Manageme	ent Divisior		
Classification:	Complex			
Type of Transaction:	G2C			
Who may avail:	Real property owner	rs within th	e City Govern	ment of Legazpi
CHECKLIST OF REQ	UIREMENTS		WHERE 1	TO SECURE
a. Letter request or duly acco	mplished request		Informat	ion Officers
from				
b. Original Owner's Copy or C			City Asse	ssor's Office
of Tax Declaration subject for				
c. Original duplicate copy of D				
(ie Deed of Absolute Sale; De				
Settlement of Estate; Deed o				
d. Certified true copy of Trans				
Title (TCT) issued by Registry	of Deeds (2			
copies) e. Photocopy of Certificate Au	Ithorizing			
Registration (CAR) issued by BIR (2 copies) f. Tax Clearance (present year)				
	g. Photocopy of Official Receipt of Transfer Tax &			
Processing Fee				
CLIENT STEPS	AGENCY	FEES	PROCESS	PERSON
	ACTIONs	TO BE	-ING TIME	RESPONSIBLE
		PAID		
1. Client submits duly filled-	1. Checks	Р	5 Minutes	
up Request form together	completeness and	100.00	per request	Assessment Clerk II
with the complete	forwarded to the	process		
documentary requirements	City Assessor to	ing fee		Administrative Aide I
	seek approval or			
	request	Niewe	10 Minutes	
	1.1 Assigns request to	None	10 Minutes	Tax Mapper III
	Assessment		per request	
	Officers			Local Assessment
	1.2 The LAOO		10 Minutes	<b>Operations Officer II</b>
	Evaluates		Per	
	submitted	None	request	
	documentary			
	2. The LAOO to	None	1 Hour per	CGADH I
	whom it is	None	request	



				ICIAL S
2. Client submits other requirements upon evaluation	assigned prepares, signs and submits FAAS for approval			Supervising Administrative Officer Tax Mapper III
				Local Assessment Operations Officer II
	2.1 Approves FAAS	None	15 Minutes/ FAAS	CGDH I/ City Assessor
	2.2 Assigns PIN & records FAAS in the Tax Mapping Roll		15 Minutes/ FAAS	Supervising Administrative Officer Administrative Aide I
		None		Administrative Assistant VI (Computer Operator III)
				Assessment Clerk II
				Administrative Aide I
	2.3 Encodes FAAS and print -outs	None	15 Minutes/ TD	CGADH I
			10	Tax Mapping Aide
	2.4 Signs Tax Declaration		15 Minutes/ TD	CGADH I Supervising Administrative Officer
		None		Tax Mapper III
				Local Assessment Operations Officer II
	2.5 Cancelation of previous Tax Declaration	None	10 Minutes/ TD	Local Assessment Operation I
	2.6 Reviews and Signs the new Tax Declaration	None	5 Minutes/ TD	CGDH I/ City Assessor
3. Acknowledges Receipt of the new TD	3. Segregates documents and	None	10 Minutes TD	Tax Mapper Aide



releases new Tax Declaration			Assessment Clerk II Administrative Aide I
Total	P/100.0 0	3 Hours	

### 7. ANNOTATION

(Mortage, Tax Liens, Levy, Last Will & Testament, Bailbond, Lis Pendens & Adverse Claim)

Office or Division:	Records Management Division				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Real property owner	s within th			
CHECKLIST OF REQ	UIREMENTS		WHERE 7	<b>FO SECURE</b>	
a. Letter request or duly account from	mplished request		Informat	ion Officers	
b. Xerox copy of ID and SPA requesting party, if not the ow					
c. Mortagage Agreement, Notice Affidavit of Adverse Claim, Notice Will & Testament		Bank/Othe		tution, Court, City Treasurer, aimant	
d. Official Receipt (for online, clie thru Legazpi City's Online Servic	es)		City Treas	surer's Office	
CLIENT STEPS	AGENCY	FEES	PROCESS	PERSON	
	ACTIONs	TO BE PAID	-ING TIME	RESPONSIBLE	
1. Client submits duly filled-up	1. Checks	P/50.00	5 minutes	Assessment Clerk II	
Request Form together with the complete documentary requirements	completeness and forwarded to the City Assessor to seek approval of request	processi ng fee	per request	Administrative Aide I	
	2. Forwarded to Records Division for verification &	none	15 minutes per request	Local Assessment Operations Officer I	
Annotation				Local Assessment Operations Officer II	
	3. To IT for online recording & printing of tax declaration(if requested)	none	5 minutes per request	Tax Mapping Aide	
	4. Approval	none	5 minutes per request	CGDH I/ City Assessor	
	TOTAL:	P/50.00	30 minutes		



### 8. CANCELLATION OF ANNOTATION (Mortgage, Tax Liens, Levy, Last Will &

Testament, Bailbond, Lis Pendens & Adverse Claim)

Office or Division:	Records Management Division/Evaluation				
Classification:	Simple				
Type of Transaction:	Frontline Service				
Who may avail:	Real Property owners/claimant within the City of Legazpi				
CHECKLIST OF REQ	UIREMENTS		WHERE 1	OSECURE	
a. Letter request or duly accomp	lished request form		Informat	ion Officers	
b. Xerox copy of ID and SPA or a requesing party, if not the owner					
c. Release of Mortgage, Court D Clearance		Bank/Othe	0	ution, Court, City Treasurer, imant	
d. Official Receipt (for online, clie thru Legazpi City's Online Servic				surer's Office	
CLIENT STEPS	AGENCY ACTIONs	FEES TO BE PAID	PROCESS -ING TIME	PERSON RESPONSIBLE	
1. Client submits duly filled-up	1. Checks completeness and	P/50.00 processi	5 minutes per request	Assessment Clerk II	
Request Form together with the complete documentary requirements	forwarded to the City Assessor to seek approval of request	ng fee		Administrative Aide I	
	2. Forwarded to Records Division for cancellation	none	15 minutes per request	Local Assessment Operations Officer I	
				Local Assessment Operations Officer II	
	3. To IT for online recording & printing of tax declaration(if requested)	none	5 minutes per request	Tax Mapping Aide	
	4. Approval	none	5 minutes per request	CGDH I/ City Assessor	
	TOTAL:	P/50.00	30 minutes		
9. CORRECTION OF EN		Divisi /F			
	Records Management	UIVISION/E	valuation		
Classification:	Simple				
Type of Transaction:	Frontline Service				
Who may avail:         Real Property owners/claimant within           CHECKLIST OF REQUIREMENTS         Checklist				•	
CHECKLIST OF REQ				O SECURE	
a. Letter request or duly accomplished request form			monnal		
b. Xerox copy of ID and SPA or a requesing party, if not the owner					
C. Title and Technical Descriptio		Reç	gistry of Deeds	City Treasurer's Office	



CLIENT STEPS	AGENCY ACTIONs	FEES TO BE PAID	PROCESS -ING TIME	PERSON RESPONSIBLE
1. Client submits duly filled-up Request Form together with the complete documentary requirements	1. Checks completeness and forwarded to the City Assessor to seek	P/50.00 processi ng fee	5 minutes per request	Assessment Clerk II Administrative Aide I
	approval of request 2. Forwarded to Records Division for verification	none	15 minutes per request	Local Assessment Operations Officer I Local Assessment Operations Officer II
	3. To IT for online correction	none	5 minutes per request	Tax Mapping Aide CGADH I
	4. Online Approval	none	5 minutes per request	CGDH I/ City Assessor
	5. Printing of new corrected Tax Declaration	none	5 mins per request	CGADH I
	6. Countersigning/ signing	none	5 mins per request	CGDH I/ City Assessor
	TOTAL:	P/50.00	40 minutes	

FEEDBACK A	ND COMPLAINTS MECHANISM
How to send feedback?	Answer the Feedback Form located in the Frontline Desk of the City Assessor's Office, then place it inside the drop box or personally hand it over to the Officer of the Day (OD). City Assessor's Office Contact Number: 0966-812-0533
How feedback is processed?	The Administrative Division verifies the nature of the queries and feedback within one (1) working day. The same shall be referred to the concerned Division. Upon receipt of reply from the concerned Division, the Client will be informed via email, text or phone call. For follow-ups or inquiries, the contact information are as follows: <u>legazpi.assessorsoffice@gmail.com</u> 0966-812-0533
How to file complaint?	To file a complaint against the City Assessor's Office, provide the following details through writing on the Complaint Form (CSC Form #3), or via e-mail:



	<ul> <li>Full name, address and contact information of the Complainant</li> <li>Narrative of the Complaint</li> <li>Evidences</li> <li>Name of the Person being Complained</li> <li>Send all complaints against the City Assessor's Office, through writing on the COMPLAINT FORM (CSC Form #3) or to legazpi.assessorsoffice@gmail.com</li> <li>For follow-ups or inquiries, the contact information is: 0966- 812-0533</li> </ul>
How complaints are processed?	All complaints received against the City Assessor's Office will be processed by the Administrative Division. The ADMIN reads (Complaint Form - CSC Form 3), browses, evaluates and determines the complaints received on a daily basis. The ADMIN shall coordinate with the concerned Division to answer the complaint and shall investigate, if necessary. After the concern has been addressed or after conduct of investigation, the ADMIN shall prepare an Incident Report and refer it to the Legal Office, for further review. Then the Legal Office shall forward its findings to the City Mayor, copy furnished the City Assessor's Office, for appropriate action &/or final decision. The ADMIN shall give the feedback to the clients via email, or through writing.
Contact Information of CITY ASSESOR'S OFFICE	Engr. EDUARDO A. LUNA, JR. CGDH I/ City Assessor Engr. ANTHONY JEMAR G. SARTORIO CGADH I/ Asst. City Assessor Office Number: 0966-812-0533 Email Address: legazpi.assessorsoffice@gmail.com



## **CITY BUDGET OFFICE**

**Internal and External Services** 



## • External Services

#### 1. Technical Assistance to Barangay Operations

Provides technical assistance and coaching to Barangay Officials and Sangguniang Kabataan Officials regarding budgetary requirements.

Office or Division:	Barangay Operation	s Division		
Classification:	Simple			
Type of Transaction:	G2G – Government to Government			
Who may avail?		nd Sangguniang Kabataan Officials		
CHECKLIST OF REQ	UIREMENTS	WHERE TO SECURE		
1. Barangay Annual Budg	get (6 sets)			
Transmittal Letter		Concerned barangay (prepared by the Barangay Officials)		
Budget Message		Concerned barangay (prepared by the Barangay Officials)		
Certified Statement	of Income	City Accountant's Office – Barangay Division		
Barangay Appropria	tion Bill	Concerned barangay (prepared by the Barangay Officials)		
Annual Investment F	Program (Annex A)	Concerned barangay (prepared by the Barangay Officials)		
Brgy. Budget Prep. I of Expenditures and Financing (Annex B)		Concerned barangay (prepared by the Barangay Officials)		
<ul> <li>Brgy. Budget Prep. I Programmed Approp Expense Class, Obj and Expected Result</li> </ul>	oriation by PPA ect of Expenditure	Concerned barangay (prepared by the Barangay Officials)		
Brgy. Budget Prep. I of Projects Chargea Development Fund	ble Against the 20%	Concerned barangay (prepared by the Barangay Officials)		
Brgy. Budget Prep. I     Plantilla of Personne		Concerned barangay (prepared by the Barangay Officials)		
Resolution for Local Reduction and Mana (Calamity Fund)	agement Fund	Concerned barangay (prepared by the Barangay Officials)		
<ul> <li>Breakdown of 70% a Disaster Risk Reduct Management Fund I (BDRRMFIP)</li> </ul>	tion and	Concerned barangay (prepared by the Barangay Officials)		



	CIAL 2			
<ul> <li>Report on Utilization of Disaster Risk Reduction and Management Fund Investment Plan</li> </ul>	Concerned barangay (prepared by the Barangay Officials)			
<ul> <li>Local Disaster Risk Reduction and Management Fund Investment Plan (LDRRMFIP)</li> </ul>	Concerned barangay (prepared by the Barangay Officials)			
Vision Statement	Concerned barangay (prepared by the Barangay Officials)			
<ul> <li>Plans, Programs, Projects &amp; Activities for Senior Citizens and PWD</li> </ul>	Concerned barangay (prepared by the Barangay Officials)			
Annual Procurement Plan	Concerned barangay (prepared by the Barangay Officials)			
<ul> <li>Brgy. Council for the Protection of Children (BCPC) with Resolution</li> </ul>	Concerned barangay (prepared by the Barangay Officials)			
<ul> <li>Brgy. Annual GAD Plan Budget with Resolution and Certification from DILG</li> </ul>	Concerned barangay (prepared by the Barangay Officials)			
Anti-Drug Plan	Concerned barangay (prepared by the Barangay Officials)			
20% Brgy. Development Fund	City Planning and Development Office			
Brgy. Nutrition Action Plan with Resolution	Concerned barangay (prepared by the Barangay Officials)			
Barangay Peace and Order Public     Safety Plan Year 2023-2025	Concerned barangay (prepared by the Barangay Officials)			
2. Sangguniang Kabataan Annual Budget (6 sets)				
Certification of 10% SK Fund	Concerned Barangay Treasurer			
CBYDP with Resolution	Concerned barangay (prepared by the SK Officials)			
ABYIP with Resolution	Concerned barangay (prepared by the SK Officials)			
<ul> <li>Breakdown of SK Annual Budget</li> </ul>	Concerned barangay (prepared by the SK Officials)			
<ul> <li>Programmed Appropriation by PPA Expense Class, Object of Expenditures and Expected Results</li> </ul>	Concerned barangay (prepared by the SK Officials)			
Annual Budget Resolution with standing committees	Concerned barangay (prepared by the SK Officials)			
Annual Procurement Plan (APP)	Concerned barangay (prepared by the SK Officials)			
Transmittal Letter	Concerned barangay (prepared by the SK Officials)			



CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
<ol> <li>Issuance of a Certification for 20% Brgy. Development Fund</li> </ol>	1.1. Prepares, encodes & reviews Certification for 20% Development Fund	None	5 minutes/ brgy.	Supervising Admin Officer Admin. Aide III City Budget Office
	1.2. Issues the prepared Certification to Barangay Official	None	2 minutes/brgy.	Admin. Aide III City Budget Office
<ol> <li>Computation of the PS/Cap Limitation</li> </ol>	2.1. Receives the required documents from the barangays and computes the PS Cap	None	30 minutes/brgy.	
	2.a. Brgy. Nos. 1-18 2.b. Brgy. Nos. 19-36 2.c. Brgy. Nos. 37-53 2.d. Brgy. Nos. 54-70			Admin Aide IV Admin Aide I Admin Aide I Admin Officer IV City Budget Office
	2.1. Checks / Reviews the computed PS Cap	None	20 minutes/brgy.	Supervising Admin Officer City Budget Office
<ol> <li>Computation of Leave Benefits of Barangay Officials</li> </ol>	3.1. Receives the required documents from the barangays and computes the Leave Benefits	None	30 minutes/brgy.	
	2.a. Brgy. Nos. 1-18 2.b. Brgy. Nos. 19-36 2.c. Brgy. Nos. 37-53 2.d. Brgy. Nos. 54-70			Admin Aide IV Admin Aide I Admin Aide I Admin Officer IV City Budget Office
	3.2. Checks / Reviews the computed Leave Benefits			Supervising Admin Officer City Budget Office
<ol> <li>Review of Barangay Annual Investment Program (AIP)</li> </ol>	4.1. Receives and reviews the submitted Brgy. AIP; prepares the endorsement letter for CBO's signature	None	20 minutes	Supervising Admin Officer City Budget Office



	4.2. Encodes the prepared endorsement letter for transmittal to CMO	None	10 minutes	Admin Aide III City Budget Office
5. Review of submitted Barangay & SK Annual Budget / Supplemental Budget as to compliance with Budgetary Requirements, PS Limitation and correctness of data	5.1. Receives the required documents from the barangay and undertakes initial / preliminary review. 5.a. Brgy. Nos. 1-18 5.b. Brgy. Nos. 19-36 5.c. Brgy. Nos. 37-53 5.d. Brgy. Nos. 54-70	None	30 minutes/brgy.	Admin Aide IV Admin Aide I Admin Aide I Admin Officer IV City Budget Office
	5.2. Checks the initial findings and prepares the review actions/conditions thereon	None	20 minutes/brgy.	Supervising Admin Officer City Budget Office
	5.3. Encodes the review action / endorsement letter	None	30 minutes/brgy.	Admin Aide III City Budget Office
	5.4. Reviews the encoded review conditions and endorsement letter and submits the same to the Head of Office	None	20 minutes/brgy.	Supervising Admin Officer City Budget Office
	5.5. Final review of the Review Conditions; signs the transmittal letter to the SP Chairman Committee on Appropriation	None	20 minutes/brgy.	<i>City Budget Officer (CGDH-I)</i> City Budget Office

• External and Internal Services



## 1. Processing Payrolls, Vouchers, Purchase Requests and Obligation Requests of the City Offices/Departments

Payrolls, vouchers, purchase requests, obligation requests and other financial documents are submitted for City Budget Officer's certification as to availability of funds (Appropriation and Allotment).

Office or Division:	City Operations Division	City Operations Division			
Classification:	Complex				
Type of Transaction:	G2G (Government to Government)				
Who may avail?	Offices, employees, ba	arangay officia	Is and individuals		
CHECKLIST OF R	EQUIREMENTS		WHERE TO SEC	URE	
<ol> <li>Payroll (1 copy)</li> <li>Voucher (2 copies)</li> <li>Purchase Requesi</li> <li>Obligation Requesi</li> <li>Other related sup</li> </ol>	t (1 copy) st (3 copies) porting documents	by	Concerned individual, office or barangay (Problem by the office/ employee/ official)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Clients' submission of payrolls, vouchers, Purchase Requests (PR), etc. accompanied by Obligation Request (ObR) Form for funds availability	1.1. Receives and records all incoming documents with corresponding Obligation Request (ObR)	None	10 minutes/doc.	Admin Aide IV Admin Aide I Job Order City Budget Office	
	1.2. Forwards the document to the staff in-charge in the City Operations Division for processing	None	4 minutes/doc.	Admin Aide IV Admin Aide I Job Order City Budget Office	



1.3. Evaluates & posts to Registry of Appropriation, Allotment, Obligation and Balances (RAAOB) & forwards the same to numbering staff for assigning number to ObR	None	15 minutes/doc.	Admin Officer V Admin Officer IV Admin Officer II Sr. Admin Asst. II Admin Asst. VI Admin Asst. I Admin Aide IV City Budget Office
1.4. Numbers the processed ObR in numerical order & returns the same to the staff in-charge	None	8 minutes/doc.	<i>Admin Aide II</i> City Budget Office
1.5. Records the ObR number in the respective RAAOB; forwards the document to the Division Chief for review / checking	None	5 minutes/doc.	Admin Officer V Admin Officer IV Admin Officer II Sr. Admin Asst. II Admin Asst. VI Admin Asst. I Admin Aide IV City Budget Office
1.6. Reviews / Checks all supporting docs and that the account used is appropriate and consistent with the revised Chart of Accounts for LGUs and forwards the same to the staff in- charge of outgoing documents	None	8 minutes/doc.	Assistant City Budget Officer/OIC-City Operations Division City Budget Office



1.7. Records outgoing documents in the logbook & forwards the same to the Department Head / Asst. Department Head for signature	None	5 minutes/doc.	Admin Officer II City Budget Office
1.8. Certifies as to existence of appropriation	None	8 minutes/doc.	<i>City Budget Officer (CGDH-I)</i> City Budget Office
1.9. Records & releases the document to the client. Unclaimed documents will immediately be forwarded to the City GSO (PRs) & City Accountant's Office (vouchers & payrolls) for processing	None	10 Minutes/doc.	Admin Aide III City Budget Office



FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback?	Answer the Customer Feedback Form and drop it at the Feedback Drop Box located at the Receiving Area of the office.
How feedbacks are processed?	Every Friday, the Officer at the Receiving Area opens the drop box, compiles and records all feedback submitted. Feedback requiring answers are forwarded to the concerned division and they are required to answer within three (3) days upon receipt of the feedback. The answers are then relayed to the citizens. For inquiries and follow-ups, clients may contact the telephone number: (052) 820- 3048.
How to file a complaint?	Answer the Customer Feedback Form and drop it at the Complaints Drop Box located at the Public Assistance and Complaints Desk (PACD) of the office. Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups, clients may contact the telephone number: (052) 820- 3048.

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How complaints are processed?	The Officer monitoring the PACD opens the drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the officer shall start the investigation and forward the complaint to the division chief for their explanation.
	The officer will prepare a report after the investigation and shall submit to the chief of office for appropriate action.
	The officer will give the feedback to the client.
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> 1-ARTA (2782) PCC: 8888 CCB:0908-881-6565 (SMS)

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Office	Address	Contact Information
City Budget Office	2/F, City Hall Bldg., Rizal Street, Legazpi City	(052) 820-3048 <u>cbo_leg@yahoo.com</u> / <u>legazpicitybudget@gmail.com</u>



## CITY DISASTER RISK REDUCTION MANAGEMENT OFFICE

**DISASTER OPERATIONS CENTER** 

**Frontline Services** 



## 1. Complex Research Services

The Disaster Operations Center gives this type of service to researchers, students, barangays, institutions, and other clients for their complex information needs that entails the collection, customization and modification of existing data tables and templates. This service also includes requests for surveys/ questionnaires for thesis/studies that will require data collection.

Uffice of Division		City Disaster Operation Center:All Divisions and Units			
Classification		Simple			
Type of Transactions		G2C - Governme G2G - Governme G2B - Governme	nt to Government	i	
Who may Avail		All (public and go	vernment)		
Checklist of F	Requirements	v	Where to Secur	re	
1. Written reques and 1 original for		To be provided by	y the requesting p	party	
2. Other Supporti attachments as s request (1 photoc original for office	copy and 1			party	
3. Order of Paym copy)	ent (1 original	To be issued by the CDRRMO			
3. Payment of Fe	es		To be secured at the City Treasurer's Office based on the order of payment from CDRRMO		
Client Steps	Agency Action	Fees to be paidProcessing TimePerson Responsible		Person Responsible	
1. Client signs in the visitor's logbook at the office receiving area	1. Office staff gives the visitor's logbook at the receiving area	Administrative Section:		Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i>	



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2. Client submits written request *Make sure to secure the Order of Payment that will be issued.	2. Office staff receives the written request and attachment/s and checks for completeness	None	3 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i>
	2.1. Issues the order of payment, if all required documents are given and the no. of copies for payment are determined and confirmed	Computer Generated Maps: Colored, Bond Paper PHP 100/page Colored, A3 Size PHP 150/page Certified copy of records PHP 50/page Photocopy of any other copy PHP 5/page Certification, Clearance, Annotation,etc PHP 50/page (Based on City Ordinance No. 0013-2007 known as the Revenue Code of the City of Legazpi)	6 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i> Approval by: <i>Engr. Miladee</i> <i>Azur</i>



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	2.2. Starts processing the request		5 Days	Research and Planning Division: <i>Ms. Niza Ayende</i> <i>Mr. Lawrence</i> <i>Louise Arcos</i> Operations Ms. Patricia Naz and Warning: <i>Ms. Beverly Anne</i> <i>Armeña</i>
3. Client pays the required fees at the City Treasurer's Office by showing the order of payment * Make sure to secure the Official Receipt that will be issued upon payment.	3. (City Treasurer's Office accepts the payment based on the order of payment and issues the official receipt)			City Treasurer's Office
4. Client returns to the City DRRM Office for the processing and release of requested information	4. CDRRMO staff checks the official receipt and the printed information	None	5 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque
	4.1.Releases the requested information			Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana <i>Mr. Andres</i> Barrameda II Ms. Charlotte Aboque



			CIAE
Total	Computer	5 Days, 15	
	Generated	Minutes	
	Maps:		
	Colored, Bond		
	Paper		
	PHP 100/page		
	Colored, A3		
	Size		
	PHP 150/page		
	Certified copy		
	of records		
	PHP 50/page		
	Photocopy of		
	any other copy		
	PHP 5/page		
	Certification,		
	Clearance,		
	Annotation,etc		
	PHP 50/page		
	Annotation,etc		



## 2. Request for Conduct of Orientations and/or Drills

To promote disaster preparedness in the City of Legazpi, the Disaster Operations Center conducts orientations (Early Warning Systems (EWS) in the City, Building Earthquake Evacuation Plan) and/or drills (earthquake, fire, volcanic eruption).

Office or Divisior	ı	City Disaster Operations Center: All Divisions and Units			
Classification		Simple			
Type of Transact	ions	G2G - Government to Government G2B - Government to Business			
Who may Avail		Government and	Business		
Checklist of R	equirements	v	/here to Secur	е	
1. Written request and 1 original for c addressed to: ENGR. MILADEE CGDH I-City DRR City Disaster Risk Management Offic 2F, Albay Public M Aquende Dr. Brgy. Baño, Legaz	<b>N. AZUR</b> M Officer Reduction and ce Market, F.	To be provided by the requesting party		arty	
<ol> <li>Written request following:</li> <li>Services request orientation or drill, tentative schedule</li> <li>Contact number address of the clie person</li> </ol>	ed (if it is or both) and its and e-mail			arty	
Client Steps	Agency Action	Fees to be paidProcessing TimePerson Responsible			



1 Signs in the	1. Gives the			Administrative
1. Signs in the visitor's logbook at the office receiving area	visitor's logbook at the receiving area	None	1 Minute	Section: Mr. Mark Kevin Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque
2. Submits written request	2. Receives the written request and records its details (time and date received, name and contact number of requesting party and subject matter of the letter) and checks for completeness	None	3 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque
	2.1. Issues the routing slip to Operations and Warning Division	None	6 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i> <i>Approval by:</i> <i>Engr. Miladee</i> <i>Azur</i>
3. Receives the Letter Reply	3. Delivers the Letter Reply to the requesting party	None	4 Hours	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque



4. Provides details and other information needed for the conduct of orientation and/or drill	4. Contacts the requesting party and finalizes the schedule of the orientation and/or drill	None	2 Hours	Operations and Warning Division: <i>Beverly Anne P.</i> <i>Armeña</i> <i>Archie L. Rubios</i>
	Total		6 Hours, 10 Minutes	
Conduct of O	rientation and/	or Drill		
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Attends/ participates the orientation and/or drill and gives Certificates of Appreciation and Appearance to the speaker and facilitators	1. Conducts the orientation and/or drill	None	4 Hours	Operations and Warning Division: Beverly Anne P. Armeña Archie L. Rubios Joshua A. Laylo Maree Merrogel Vernalu V. Molina Lonel P. Beltran
2. Client accomplishes Customer Feedback Form	2. Issues the client with a Customer Feedback Form	None	5 Minutes	Operations and Warning Division: Beverly Anne P. Armeña Archie L. Rubios Joshua A. Laylo Maree Merrogel Vernalu V. Molina Lonel P. Beltran
	Total		4 Hours, 5 Minutes	



## 3. Simple Logistics Services

The Disaster Operations Center gives this type of service to barangays, institutions, and other clients for their simple resource and other equipment requests.

UTTICE OF DIVISION		City Disaster Operation Center: All Divisions and Units		
Classification		Simple		
Type of Transac	tions	G2G - Governme	nt to Government	t
Who may Avail		Government		
Checklist of F	Requirements	v	Where to Secu	re
1. Written reques and 1 original for		To be provided by	y the requesting p	party
2. Other Supporti attachments as s request (1 photoc original for office	copy and 1			party
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Client signs in the visitor's logbook at the office receiving area	1. Office staff gives the visitor's logbook at the receiving area	None	1 Minute	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i>
2. Client submits written request	2. Office staff receives the written request and attachment/s and checks for completeness	None	3 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque



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	2.1. Checks the inventory of the availability and/or quantity of the requested resources and other equipment	None	10 Minutes	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i> <i>Mr. Ayan M. De</i> <i>Mesa</i> <i>Ms. Miriam A.</i> <i>Ayende</i>
	2.2. Prepares the Acknowledgeme nt Receipt of Equipment (ARE) and the requested resources	None	1 Hour	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i> Approval by: <i>Engr. Miladee</i> <i>Azur</i>
3. Client receives the requested resources and fills up and signs the ARE	3. Releases the requested equipment	None	15 Minutes	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i>
	Total	None	1 Hour, 29 Minutes	
Returning of bo	rrowed equipmer	nt		
1. Client signs in the visitor's logbook at the office receiving area	1. Office staff gives the visitor's logbook at the receiving area	None	1 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque



	Total	None	32 Minutes	
3. Client accomplishes Customer Feedback Form	3. Issues the client with a Customer Feedback Form	None	1 Minutes	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i>
	2.1 Records the date of return in the logbook and stores the equipment.	None	15 Minutes	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i>
2. Client returns the borrowed resources	2. Receives and checks the returned resources for quantity and quality check	None	15 Minutes	Logistics and Training Division: <i>Mr. Vincent</i> <i>Francis R.</i> <i>Ramirez</i> <i>Mr. Ayan M. De</i> <i>Mesa</i> <i>Ms. Miriam A.</i> <i>Ayende</i>



## 4. Simple Research Services

The Disaster Operations Center gives this type of service to researchers, students, barangays, institutions, and other clients for their simple information needs that are according to the existing format, data tables and templates.

Office of Division		City Disaster Operation Center:All Divisions and Units			
Classification		Simple			
Type of Transactions		G2C - Government to Citizen G2G - Government to Government G2B - Government to Business			
Who may Avail		All (public and government)			
Checklist of Requirements		Where to Secure			
1. Written request (1 photocopy and 1 original for office file)		To be provided by the requesting party			
2. Other Supporting Documents or attachments as stated in the letter request (1 photocopy and 1 original for office file)		To be provided by the requesting party			
3. Payment of Fees		To be secured at the City Treasurer's Office based on the order of payment from CDRRMO			
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible	
1. Client signs in the visitor's logbook at the office receiving area	1. Office staff gives the visitor's logbook at the receiving area	None	1 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i>	



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2. Client submits written request *Make sure to secure the Order of Payment that will be issued.	2. Office staff receives the written request and attachment/s and checks for completeness	None	3 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i>
	2.1. Issues the order of payment, if all required documents are given and the no. of copies for payment are determined and confirmed	P5.00 per page (photocopy or printed) (Based on City Ordinance No. 0013-2007 known as the Revenue Code of the City of Legazpi)	6 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i> <i>Approval by:</i> <i>Engr. Miladee</i> <i>Azur</i>
	2.2. Starts processing the request	None	45 Minutes	Research and Planning Division: <i>Ms. Niza Ayende</i> <i>Mr. Lawrence</i> <i>Louise Arcos</i> Operations and Warning: <i>Ms. Beverly Anne</i> <i>Armeña</i>
3. Client pays the required fees at the City Treasurer's Office by showing the order of payment. *Make sure to secure the Official Receipt that will be issued upon payment.	3. (City Treasurer's Office accepts the payment based on the order of payment and issues the official receipt)			City Treasurer's Office

				OFFICIAL SUT
4. Client returns to the City DRRM Office for the processing and release of requested information	<ul> <li>4. CDRRMO staff checks the official receipt and the printed information</li> <li>4.1.Releases the requested information</li> </ul>	None	5 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i> Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> <i>Ms. Charlotte</i> <i>Aboque</i>
	Total	P5.00 per page (photocopy or printed)	1 hour	

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# LEGAZPI 911 EMERGENCY ACTION CENTER Frontline Services



### 1. 911 CCTV Footage Request for Crime Investigations and Court Litigations

This is a service provided to uniformed personnel and legal counsels who are requesting for CCTV footage to be used in crime investigations and court litigations.

Office or Division		CDRRMO- LEGAZPI 911 EMERGENCY ACTION CENTER/ IT DIVISION		
Classification		Simple		
Type of Transactions		G2C - Governme G2G - Governme G2B - Governme	nt to Government	i
Who may Avail		All (public and go	vernment)	
Checklist of Rec	quirements	Where to Secure	9	
Letter-Request from Attorney's Office or Legazpi City Police Station addressed to the City Mayor and/ or CDRRMO Head		Legal Counsel/Legazpi City Police Station		
Court Order		Issued by a judge		
Storage device (l Hard Drive(prefei format)		Provided by the r	equesting party	
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Client signs in the visitor's logbook at the CDRRM Office receiving area	1. Office staff gives the visitor's logbook at the receiving area	None	1 Minute	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque



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2. Client submits written request	2. Office staff receives the written request and attachment/s or endorsement from the City Mayor's Office and checks for completeness	None	2 minutes	Administrative Section: <i>Mr. Mark Kevin</i> Joy Esplana Mr. Andres Barrameda II Ms. Charlotte Aboque
	2.1. Issues the routing slip to Legazpi 911 EAC	None	2 Minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda</i> <i>Ms. Charlotte</i> <i>Aboque</i> Approval by: <i>Engr. Miladee</i> <i>Azur</i>
	2.2. Starts processing and extracting the request	None	1 Working Day = 8hours	Legazpi 911 EAC personnel on duty
	2.3. Calls the client to bring their storage device	None	1 Minute	Legazpi 911 EAC personnel on duty
4. Client returns to the Legazpi 911 EAC for the release of requested footage	4. Legazpi 911 EAC staff saves the requested footage to the storage device	None	1 Hour	Legazpi 911 EAC personnel on duty
5. Client signs logbook for footage request	5. Releases the requested information	None	1 Minute	Legazpi 911 EAC personnel on duty



6. Client accomplishes Customer Feedback Form	6. Legazpi 911 EAC personnel issues the client with a Customer	None	1 Minute	Legazpi 911 EAC
	Feedback Form	None	1 Day, 1 Hour, 11 Minutes	personnel on duty
	TOLA	None	I I WIIIIules	

## 2. 911 CCTV Viewing Request

CCTV Viewing is a service providing assistance given to Uniformed Personnel and other requesting parties.

Office or Division		CDRRMO- LEGAZPI 911 EMERGENCY ACTION CENTER/ IT DIVISION		
Classification		Simple		
Type of Transactions		G2C - Governme G2G - Governme G2B - Governme	nt to Government	
Who may Avail		All (public and go	vernment)	
Checklist of Rec	quirements	Where to Secure	<b>;</b>	
Any valid Government Issued ID		Provided by the re	equesting party	
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Client signs in the visitor's logbook at the Legazpi 911 EAC receiving area	1. Office staff gives the visitor's logbook at the receiving area	None	1 Minute	Office Security on duty
2. Client shows government issued ID	2. Office security informs the personnel on duty of the request for CCTV viewing	None	1 Minute	Office Security on duty



3. Client views	prepares the footage viewing needs 3. Personnel on			personnel on duty
the footage	duty assists the client in viewing	None	1 Day	Legazpi 911 EAC personnel on duty
4. Client accomplishes Customer Feedback Form	4. Legazpi 911 EAC personnel issues the client with a Customer Feedback Form	None	1 Minute	Legazpi 911 EAC personnel on duty
	Total	None	1 Day, 5 Minutes	

### 3. 911 Emergency Calls

Receives, relays, records and monitors all emergency calls, such as but not limited to police, fire, medical, rescue assistance or any request for assistance directly from its area of jurisdiction.

Office or Divisio	Office or Division		CDRRMO - Legazpi 911 Emergency Action Center		
Classification		Simple			
Type of Transactions		G2C - Government to Citizen G2G - Government to Government G2B - Government to Business			
Who may Avail		All (public and government)			
Checklist of F	Requirements	Where to Secure			
1. Complete basic information regarding the emergency call/incident.		To be provided by the requesting party/caller		arty/caller	
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible	



	1			CIAL
1. Client dials 911 to report an emergency/incid ent	1. Legazpi 911 Emergency Action Center receives the call and records all information relating to the emergency call.	None	2 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	1.1. Legazpi 911 relays the information to concerned/ appropriate responding agency/ies.	None	3 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	1.2. Legazpi 911 Emergency Action Center calls the responding agency/ies and gathers additional information regarding the incident. (request for additional resources)	None	5 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	1.3. Legazpi 911 Emergency Action Center calls the caller/client to provide updates on the response.	None	3 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)



"case closed". Total	None	18 Minutes	duty (3 Shifts)
1.4. Legazpi 911 Emergency Action Center records the incident as	None	5 Minutes	Call Takers/ Dispatchers on

# 4. 911 Emergency Calls (with transfer to hospital from incident location)

Receives, relays, records and monitors all emergency calls, such as but not limited to police, fire, medical, rescue assistance or any request for assistance directly from its area of jurisdiction and transfers them to any government hospital and/or hospital of choice within the city by the client from the incident location.

Office or Divisio	on	CDRRMO - Legazpi 911 Emergency Action Center		cy Action Center
Classification		Simple		
Type of TransactionsG2C - GovernmentG2G - GovernmentG2B - Government		nt to Government	i	
Who may Avail		All (public and government)		
Checklist of I	Requirements	Where to Secure		re
1. Complete basic information regarding the emergency call/incident.		To be provided by the requesting party/caller		
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Calls the Legazpi 911 Emergency Action Center hotline numbers with the basic information of	1. Legazpi 911 Emergency Action Center receives the call and records all information relating to	None	2 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)



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the incident.	emergency call			
	1.1 Legazpi 911 Emergency Action Center relays the incident to EQRT and dispatches an ambulance.	None	2 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
2. Client decides which hospital the patient will be taken	2. Legazpi 911 Emergency Action Center coordinates with the receiving hospital preferred by the client	None	10 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	2.1. Legazpi 911 EAC relays the information to the EQRT	None	1 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	2.2. Legazpi 911 Emergency Action Center records all information of the incident and remarks as "case closed".	None	5 Minutes	Call Takers/ Dispatchers on duty (3 Shifts)
	Total	None	20 Minutes	



# EMERGENCY QUICK RESPONSE TEAM (EQRT) Frontline Services



## 1. Direct Request for Ambulance Transport Outside the City

The Emergency Quick Response Team provides this type of service to requests for ambulance transport outside the city that are not emergency in nature.

Office or Division		CDRRMO-Emergency Quick Response Team			
Classification		Simple			
Type of Transactions		G2C - Governme G2G - Governme	nt to Citizen nt to Government		
Who may Avail		All indigents			
Checklist of F	Requirements	V	Where to Secur	e	
1. Calls directly n written request re		-To be provided b	by the requesting	party	
	2. Complete basic information regarding the emergency call or request		by the requesting	party	
	3. Referral to and approval from receiving hospital		-To be provided by the requesting party		
3. Certificate of Ir	ndigency	-To be issued by the barangay where the caller resides			
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible	
1. Client calls directly the EQRT or signs in the logbook for visitors at the receiving area of the EQRT	-	None	2 minutes	EQRT on duty (3 shifts)	



r				TAC
2. Client submits the written request and certificate of indigency	2.1. EQRT receives and checks the documents for completeness	None	2 Minutes	EQRT on duty (3 shifts)
	2.2. EQRT seeks approval of request from the City Mayor's Office (during working days & hours only)	none	30minutes	EQRT on duty (3 shifts)
	2.3. EQRT prepares the requirements for travel order	None	within Bicol Region - 1 hour Outside Bicol Region - 1 day	
	2.4. EQRT prepares the ambulance and medical equipment, and dons PPE	None	within Bicol Region - 1 hour Outside Bicol Region - 1 day	EQRT on duty (3 shifts)
	2.5. EQRT proceeds to the pick up point	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
	2.6. EQRT arrives at the pick up point and prepares the patient for transport	None	10 Minutes	EQRT on duty (3 shifts)
	2.7. EQRT transports and endorses the patient to the laboratory or hospital, or	None	within Bicol Region - 8 hours Outside Bicol Region - 16 hours	EQRT on duty (3 shifts)



			CIAL
house			
		within Bicol	
2.5 EQRT returns to base	None	Region - 2 hours Outside Bicol	
station		Region - 10 hours	EQRT on duty (3 shifts)
		within Bicol Region	
		(pickup:urban)	
		- 12 hours,	
		49minutes	
		within Bicol	
		Region	
		(pickup:outside	
		urban) - 13	
		hours,	
		14minutes	
		Outside Bicol	
		Region	
		(pickup:urban) - 3 days, 2	
		hours, 49	
		minutes	
		Outside Bicol	
		Region	
		(pickup:outside	
		urban) - 3days,	
		3hours,	
Total	None	14minutes	



#### 2. Direct Request for Ambulance Transport Within the City

The Emergency Quick Response Team provides this type of service to requests for ambulance transport within the city that are not emergency in nature. This service is given most especially to indigents or bedridden or have inconveniences in terms of their physical mobility who need to be transported from their homes or hospital for laboratory and medical check-ups, or those indigents/bedridden released from the hospitals or medical centers to their homes or vice-versa.

Office or Division		CDRRMO-Emergency Quick Response Team			
Classification		Simple			
Type of Transac	tions	G2C - Governme G2G - Governme	nt to Citizen nt to Government	:	
Who may Avail		All indigents			
Checklist of F	Requirements	V	Where to Secur	re	
1. Calls directly n written request re		-To be provided b	by the requesting	party	
2. Complete basi regarding the em request		-To be provided b	-To be provided by the requesting party		
3. Certificate of Ir	3. Certificate of Indigency		-To be issued by the barangay where the caller resides		
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible	
1. Client calls directly the EQRT or signs in the logbook for visitors at the receiving area of the EQRT		None	2 Minute	EQRT on duty (3 shifts)	



				CIAL
2. Client submits the written request and certificate of indigency	2. EQRT receives and checks the documents for completeness	None	2 Minutes	EQRT on duty (3 shifts)
	2.1. EQRT prepares the ambulance and medical equipment, and dons PPE	None	2 Minutes	EQRT on duty (3 shifts)
	2.2. EQRT proceeds to the pick up point	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
	2.3. EQRT arrives at the pick up point and prepares the patient for transport	None	10 Minutes	EQRT on duty (3 shifts)
	2.4 EQRT transports and endorses the patient to the laboratory or hospital, or house	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
	2.5 EQRT returns to base station	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
	Total	None	within the urban area - 31 minutes. outside urban - 1 hour, 46minutes.	



# 3. Direct Request for Emergency Response

The Emergency Quick Response Team provides this type of service to emergency calls that are directly requested from the EQRT. The emergency response services provided vary from medical needs and trauma to transport-related accidents and search and rescue.

Office or Division		CDRRMO-Emergency Quick Response Team		
Classification		Simple		
Type of Transac	tions	G2C - Government to Citizen G2G - Government to Government G2B - Government to Business		
Who may Avail		All		
Checklist of I	Requirements	N	/here to Secu	re
1. Calls directly n written request re	nade to EQRT or eceived by EQRT	-To be provided b	y the requesting	party
2. Complete basic information regarding the emergency call or request		-To be provided b	by the requesting	party
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Client calls directly the EQRT	1. EQRT receives the call and records all information relating to emergency call	None	3 Minutes	EQRT on duty (3 shifts)
	1.1. EQRT relays the information to the Legazpi 911 EAC and requests for coordination to other	None	1 minute	EQRT on duty (3 shifts)



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	responding agencies and hospital			
	1.2. EQRT prepares the ambulance and medical equipment, and dons PPE	None	2 Minutes	EQRT on duty (3 shifts)
	1.3. EQRT proceeds to the pick up point	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
2. Client decides which hospital the patient will be taken	2. EQRT arrives pick up point, administer first aid or pre- hospital care, and prepares the patient for transport	None	20 Minutes	EQRT on duty (3 shifts)
	2.1. EQRT together with the client transports and endorses the patient to the nearest hospital or hospital of choice	None	within the urban area - 5minutes. outside urban - 30minutes.	EQRT on duty (3 shifts)
	2.2. EQRT returns to base station and reports to Legazpi 911	None	5 minutes	EQRT on duty (3 shifts)



EAC			
		within the	
		urban area - 41	
		minutes.	
		outside urban -	
		1 hour,	
Total	None	31minutes.	

# 4. Request for ambulance standby during events

The Emergency Quick Response Team provides this type of service to organizers who request ambulance standby during events/activities.

UTTICE OF DIVISION		City Disaster Ope Units	eration Center:All [	Divisions and
Classification		Simple		
Type of Transactions		G2C - Government to Citizen G2G - Government to Government G2B - Government to Business		
Who may Avail		All (public and go	vernment)	
Checklist of Rec	juirements	Where to Secure	9	
1. Letter Request the Mayor	addressed to	-provided by the r	requesting party	
2. Information regarding the event: Event Description Location Event Duration Number of Participants Contact No.		-provided by the r	requesting party	
Client Steps	Agency Action	Fees to be paid	Processing Time	Person Responsible



			-	CIAL S
1. City Mayor's Office endorses the request to the CDRRMO	1. CDRRMO receives the written request and records its details (time and date received, name and contact number of requesting party and subject matter of the letter) and checks for completeness and attaches the routing slip	none	2 minutes	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i>
			2 111110165	
	1.1 CDRRMO endorses the request to EQRT	none	15 minutes.	Administrative Section: <i>Mr. Mark Kevin</i> <i>Joy Esplana</i> <i>Mr. Andres</i> <i>Barrameda II</i> Approval by: <i>Engr. Miladee</i> <i>Azur</i>
	EQRT receives			
	and records the request in the logbook	none	2 minutes	EQRT on duty (3 shifts
	EQRT prepares the ambulance and medical equipment, and dons PPE and reports to the Legazpi 911			EQRT on duty (3
	EAC	none	2 minutes	shifts



Total	None	within the urban area - 16 hours, 31 minutes. outside urban - 17 hours, 21minutes.	
EQRT reports back to Lgp 911 EAC and returns to base station	none	within the urban area - 5minutes. outside urban - 30 minutes.	EQRT on duty (3 shifts)
EQRT proceeds to the venue of the event EQRT provides standby services	none	area - 5minutes. outside urban - 30 minutes. 16 hours	EQRT on duty (3 shifts) EQRT on duty (3 shifts)
EOBT proceede		within the urban	



# EMERGENCY QUICK RESPONSE TEAM (EQRT) Non-Frontline Services



### 1. Request for Emergency Response via Legazpi 911 EAC

The Emergency Quick Response Team provides this type of service to emergency calls made through the Legazpi 911 Emergency Action Center. The emergency response services provided vary from medical needs and trauma to transport-related accidents and search and rescue.

Office or Division		CDRRMO-Emergency Quick Response Team		
Classification		Simple		
Type of Transac	tions	G2G - Governme	nt to Government	
Who may Avail		Calls made thru t	he Legazpi 911 E	AC
Checklist of F	Requirements	V	Where to Secur	'e
1. Dispatch call fr EAC	om Legazpi 911	-To be provided b Action Center	by the Legazpi 91 <sup>-</sup>	1 Emergency
2. Complete basic information regarding the emergency call		-To be provided b Action Center	by the Legazpi 91 <sup>-</sup>	1 Emergency
Client Steps	Agency Action	Fees to be paid	Processing TIme	Person Responsible
1. Lgp 911 EAC calls the EQRT for dispatch and relays all information relating to the	1 EQRT receives the call and records all information relating to emergency call	None	2 Minutes	EQRT on duty (3 shifts)
emergency call	1.1. EQRT prepares the ambulance and medical equipment, and dons PPE	None	2 Minutes	EQRT on duty (3 shifts)
	1.2. EQRT proceeds to the pick up point	None	within the urban area - 5 minutes outside urban - 30 minutes	EQRT on duty (3 shifts)



	· · · · · · · · · · · · · · · · · · ·			CIAC
2. Client decides which hospital the patient will be taken	2. EQRT arrives at the pick up point and relays to LGP 911 where the patient will be taken, administers first aid or pre- hospital care, and prepares the patient for transport	None	20 Minutes	EQRT on duty (3 shifts) Call Takers/ Dispatchers on duty (3 Shifts)
	2.1. EQRT transports and endorses the patient to the nearest hospital or hospital of choice	None	within the urban area - 5 minutes outside urban - 30 minutes	EQRT on duty (3 shifts)
	2.2. EQRT reports back to Lgp 911 EAC and returns to base station	None	5 minutes	EQRT on duty (3 shifts) Call Takers/ Dispatchers on duty (3 Shifts)
	Total	None	within the urban area - 39 minutes outside urban - 1 hour, 29 minutes	



## FEEDBACK AND COMPLAINTS MECHANISM

FEEDBACK AN	ID COMPLAINTS MECHANISM
How to send feedback?	Answer the client feedback form available at the receiving desk and drop it at the designated drop box in the same area. or Contact info: 09209528188 legazpi.cdrrmd@gmail.com
How feedback is processed?	Every Friday, the Administrative Section opens the drop box and compiles and records all feedback submitted. Feedback requiring answers are forwarded to the relevant officers or personnel and are required to answer within three (3) working days from the receipt of the feedback. The answer of the office is then relayed to the citizen or institution. For inquiries and follow-ups, clients may contact the following landline and mobile numbers: 052-4310330 09209528188
How to file complaint?	Answer the client Complaint Form and drop it at the designated drop box at the receiving area. Complaints may also be filed via telephone or email. Make sure to provide the following information: - Name of person being complained - Incident and date of incidence - Evidence
How complaint is processed?	You may call our landline and mobile numbers: 052-4310330/09209528188; Or email: legazpi.cdrrmd@gmail.com The Administrative Section opens the complaints drop box on a daily basis and evaluates each complaint. Upon evaluation, the administrative officer shall relay the information to the department head. The department head starts the investigation and calls the attention of the personnel concerned.



	The department head creates a report after the investigation and submits it to the head of the agency, through the City Human Resource Management Officer, for appropriate action. The department head gives feedback to the client. For inquiries and follow-ups, clients may contact our landline and mobile numbers: 052-4310330/ 09209528188.
Contact Information of ARTA, PCC and CCB	ARTA: <u>complaints@arta.gov.ph</u> 8478 5093
	PCC: 8888 CCB: 0908-881-6565 (SMS)



# **CITY ENGINEER'S OFFICE**



#### **ISSUANCE OF SPECIAL PERMIT FOR TRUCK BAN**

Office or Division:	City Engineer's Office, Administrative Division					
Classificatio	Simple Transaction					
n: Type of Transaction: Who may avail:	Government to Client (G2C)					
CHECKLIST OF REQUIREMENTS WHERE TO SECURE						
	copy of Letter Request copy of OR / CR					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E		
1.1 Submit letter	1.1. Receives and verifies submitted documents	None	10 mins.	Administrative Aide III		
request together with OR/CR	1.2. Prepares assessment of payment	None	10 mins.	Administrative Aide III		
2. Payment of fees	2.1 Receives payment	750 (Class A) gross weight 1000(Clas s B) 4,500 – 12,000 gross weights 1,250 (Class C) above 12,000 gross weights	10 mins.	Cashier		
	2.2 Prepares Permit	None	20 mins.	Administrative Aide III		
	2.3 Checks/reviews/countersi gns permit	None	10 mins.	Division Head		
	2.4 Recommends to the City Mayor for Approval	None	10 mins.	Assistant City Engineer City Engineer		



2.5 Approves Permit	None	Within 1 day	City Mayor
		or lesser time	
		depending on	
		the availabity	
		of the City	
		Mayor	
TOTAL:	None	1 day, 1	
		hour &	
		10 mins.	

#### ISSUANCE OF PERMIT FOR USE OF ROADS (Motorcade, Parade, Fun Run, Recorrida, Road Closure)

Office or Division:	City Engineer's Office, Administrative Division					
Classification:	Simple Transaction					
Type of	Government to Client					
Transaction:						
Who may avail:						
CHECKLIST OF	REQUIREMENTS		WHERE TO S	SECURE		
One (1) copy of Lette	er Request					
One (1) copy of route	e of the activity		1			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE		
1. Submits letter request together	1.1 Receives and verifies submitted documents	none	10 minutes	Administrative Aide IV		
with the route of the activity	1.2 Refers request to City Engineer	none	1 hour	Assistant City Engineer City Engineer		
	1.3 Prepares assessment of payment	none	5 minutes	Administrative Aide IV		
	2.1 Receives payment	P/ 350.00 per day of the activity	10 minutes	Cashier		
2. Payment of fees	2.2 Prepares permit	none	20 minutes	Administrative Aide IV		
	2.3 Checks / reviews / countersigns permit	none	10 minutes	Division Head		
	2.4 Recommends for City Mayor's approval	none	10 minutes	Assistant City Engineer City Engineer		
	2.5 Approves the permit	none	within the day	City Mayor		



Tota		, 1 hour ninutes
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#### **ISSUANCE OF PERMIT**

#### (For hanging of banners/Tarpaulins/Streamers)

Office or Division:	City Engineer's Office, Administrative Division				
Classification:	Simple Transaction				
Type of Transaction:	Government to Client				
Who may avail:					
CHECKLIST OF RE	EQUIREMENTS		WHERE TO S	ECURE	
One (1) copy of Letter Req Actual streamers/banners/t hanged	uest arpaulins to be				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Submits letter request together with the actual number of	1.1 Receives and verifies	none	5 minutes	Administrative Aide IV	
streamers/banners/ tarpaulins to be hanged	1.2 Refers request to City Engineer	none	1 hour	Assistant City Engineer	
	1.3 Prepares assessment of payment	none	5 minutes	City Engineer Administrative Aide IV	
2. Payment of fees	2.1 Receives payment	/ 24.00 per sq.m. / week per piece with additional charge for dismantling fee based on the number of banners per week	5 minutes	Cashier	
	2.2 Prepares permit	none	20 minutes	Administrative Aide IV	
	2.3 Reviews permit for approval	none	10 minutes	Division Head	
	2.4 Approves the permit and signs	none	10 minutes	Assistant City Engineer	



banners / tarpaulins / streamers			City Engineer
2.5 Approves the permit	none	within the day	City Mayor
Total:		1 day, 1 hour	
		& five minutes	

#### ASSISTANCE TO RESEARCHERS

Office or Division:	City Engineer's Office, All Divisions				
Classification:	Government to Client				
Type of Transaction:	Simple Transaction				
Who may avail:	Students				
CHECKLIST OF REQUIREMENTS			WHERE TO SE	ECURE	
Letter Request/referral					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
	1.1 Receives request / referral	none	10 minutes	Receiving Clerk (Administrative Aide I)	
1. Submits request /	1.2 Refers request / referral to Administrative Officer	none	2 hours	City Engineer	
referral	1.3 Evaluates request and refers to division / section head if needed	none	30 minutes	Division Head	
	1.4 Informs requesting party of the status of the request	none	30 minutes	Division Head	
	Total:		1 day, 1 hour & five minutes		

### ASSISTANCE TO STUDENTS ON IMMERSION, PRACTICUM & ON-THE-JOB TRAINING (OJT)

Office or Division:	City Engineer's Office, All Divisions
Classification:	Government to Client
Type of Transaction:	Simple Transaction
Who may avail:	Students



CHECKLIST OF REQUIREMENTS			WHERE TO SI	ECURE
Letter Request/referral				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
	1. 1 Receives request / referral	none	10 minutes	Receiving Clerk (Administrative Aide I)
	1.2 Refers request / referral to Administrative Officer	none	1 hour	City Engineer
1. Submits request / referral	1.3 Evaluates request and confers with division/section heads if the request is practicable	none	30 minutes	Division Head
	1.4 Recommends request for approval	none	30 minutes	Division Head
	1.5 Approval of request	none	10 minutes	City Engineer
	1.6 Informs requesting party of the status of the request	none	5 minutes	Division Head
			2 hours and 25 minutes	

# PREPARATION OF PROGRAM OF WORKS AND ESTIMATES (ONE OR TWO - STOREY BUILDING)

Office or Division:	City Engineer's Office, Construction Division			
Classification:	Government to Government			
Type of Transaction:	Highly Technical Trans	action		
Who may avail:		-		
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				ECURE
One (1) copy of Letter Req	uest / Referral			
CLIENT STEPS		FEES TO	PROCESSI	
CLIENT STEFS	AGENCY ACTIONS	BE PAID	NG TIME	PERSON RESPONSIBLE
	AGENCY ACTIONS 1.1 Receives letter request after referral of the head of office			



			CIAL 9
1.3 Assigns technical staff	none	20 minutes	Division Head
1.4 Site Inspection	none	4 hours	Engineer IV Engineer II Lab. Tech. II Draftsman Engineering Assts.
1.5 Ground / Foundation Survey	none	7days	Engineer IV Engineer II Laborer Engineering Aides
1.6 Drafting and Design	none	14 days	Engineer IV Engineer II Architect III Draftsman Engineering Assts. Engineering Aides
1.7 Prepares estimate and Program of Work	none	6 days	Engineer II Lab. Tech. II Engineering Assts. Engineering Aides
1.8 Checks and reviews	none	1 day	Division Head
1.9 Recommends for approval	none	2 hours	City Engineer
1.10Approves	none	within 1 day or lesser time depending on the availability of the City Mayor	City Mayor
DURATION OF TRANSACTION: Three- Storey Building		26 days, 2 hours & 30 minutes	

#### PREPARATION OF PROGRAM OF WORKS AND ESTIMATES (ROADS AND DRAINAGES for 1 Million Pesos and Below)

Office or Division:	City Engineer's Office, Construction Division			
Classification:	Government to Government			
Type of Transaction:	Highly Technical Transaction			
Who may avail:				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) copy of Letter Req				



				CIAL 9
	1.1 Receives letter request after referral of the head of office	none	10 minutes	Receiving Clerk (Administrative Aide I)
	1.2 Log-in record or refer to the Annual Investment Plan	none	half day	Division Head
1. Submits letter request	1.3 Assigns technical staff	none	20 minutes	Division Head
	1.4 Site Inspection and reconnaissance	none	4 hours	
	1.5 Route/Profile Levelling Survey (Topographic Survey)	none	5 days (for roads) 4 days (for drainage)	Engineer II Lab. Tech. II Engineering Assts.
	1.6 Drafting and Design	none	6 days (for roads) 10 days (for drainage)	Engineering Aides
	1.7 Prepares estimate and Program of Work	none	5 days	
	1.8 Checks and reviews	none	4 hours	Division Head
	1.9 Recommends for approval	none	2 hours	City Engineer
	1.10 Approves	none	within 1 day or lesser time depending on the availability of the City Mayor	City Mayor
	Total:		24 days, 6 hours & 30 minutes	

# PREPARATION OF PROGRAM OF WORKS AND ESTIMATES (WATER SYSTEM AND BRIDGES)

Office or Division:	City Engineer's Office, Construction Division		
Classification:	Government to Government		
Type of Transaction:	Highly Technical Transaction		
Who may avail:			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
One (1) copy of Letter Req	uest / Referral		



V(IAV 3				
CLIENT STEPS	AGENCY ACTIONS	FEES TO	PROCESSI	PERSON
CLIENT STEPS	AGENCIACIONS	<b>BE PAID</b>	NG TIME	RESPONSIBLE
	1.1 Receives letter	none	10 minutes	Receiving Clerk
	request after referral of			(Administrative
	the head of office.			`Aide I)
	1.2 Log-in record or	none	half day	Division Head
	refer to the Annual		,	
	Investment Plan			
	1.3 Assigns technical	none	20 minutes	Division Head
	staff.			
1. Submits letter request	1.4 Site Inspection and	none	4 hours	Engineer II
	reconnaissance			Lab. Tech. II
	1.5 Topographic	none	4 days	Engineering Assts.
	Survey		(for water	Engineering Aides
			system)	
			5 days	
			(for bridges	
	1.6 Drafting and	none	14 days	
	Design			
	1.7 Prepares estimate	none	10 days	
	and Program of Work			
	1.8 Checks and	none	1 day	Division Head
	reviews			
	1.9 Recommends for	none	2 hours	City Engineer
	approval			
	1.10 Approves	none	within 1 day	City Mayor
			or lesser time	
			depending on	
			the availability	
			of the City	
			Mayor	
	Total:		37 days, 2	
			hours & 30	
			minutes	

# PREPARATION OF PROGRAM OF WORKS AND ESTIMATES (BARANGAY PROJECTS)

Office or Division:	City Engineer's Office, Barangay Projects Section		
Classification:	Government to Government		
Type of Transaction:	Complex Transaction		
Who may avail:	70 Legazpi City Barang	gays	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Letter Request		Barangay (requesting barangay)	



Approved Barangay Resolution noted by the City Mayor for Augmentation or City Funded Project		City Engineer's Office/City Budget Office		
Approved Barangay Resolution or AIP for barangay funded projects		City Engineer's Office/City Budget Office		
Letter of Consent - for projects to be constructed inside or passing thru a private property		Lot Owner o	of private prope	rty
CLIENT STEPS	AGENCY ACTIONS	FEES TOPROCESSIPERSONBE PAIDNG TIMERESPONSIB		
	1.1 Receives request and required documents	none	10 minutes	Receiving Clerk (Administrative Aide I)
	1.2 Refers request	none	4 hours	City Engineer
	1.3 Assigns technical staff	None	30 minutes	Section Head
1. Submits request	1.4 Inspects/verifies/ prepares plan, estimate & POW	None	3 weeks	Section Head Civil Engineer Elec. Engineer Gen. Foreman Eng'g. Asst. Lab. Tech. II
	1.5 Checks and recommends for approval	none	2 days	Section Head Asst. City Engineer
	1.6 Approves and releases POW	none	1 day	City Engineer Releasing Clerk (Administrative Aide I)
	DURATION OF TRANSACTION		37 days, 2 hours & 30 minutes	

#### ISSUANCE OF FINAL INSPECTION REPORT TO COMPLETED BARANGAY PROJECTS

Office or Division:	City Engineer's Office, Barangay Projects Section		
Classification:	Government to Government		
Type of Transaction:	Complex Transaction		
Who may avail:	70 Legazpi City Barang	gays	
CHECKLIST OF RE	REQUIREMENTS WHERE TO SECURE		
Letter Request		Barangay (requesting party)	
Duly labelled pictures of the completed project (before, during & after)		Barangay (requesting party)	
Certificate of completion ar barangay projects	nd acceptance of	City Engineering (Barangay Division)	



Notice of commencement of work		City Engineering (Barangay Division)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Submits request together with required documents	1.1 Receives/verifies request and required documents	none	10 minutes	Receiving Clerk (Administrative Aide I)
	1.2 Refers request to Assistant City Engineer	none	4 hours	City Engineer
	1.3 Assigns inspectors	None	1 day	Assistant City Engineer
		None	2 days	
	1.4 Inspects / assesses completed project			Section Head Civil Engineer Electrical Engineer Gen. Foreman Engineering Asst. Lab. Tech. II Administrative Aide IV
	1.5 Prepares and releases inspection report	none	30 minutes	Releasing Clerk (Administrative Aide I)
	DURATION OF TRANSACTION		3 days, 4 hours & 40 minutes	

#### REPAIR & MAINTENANCE OF STREETLIGHTS AND OTHER ELECTRICAL FACILITIES

Office or Division:	City Engineer's Office,	Electrical Se	ction		
Classification:	Government to Government				
Type of Transaction:	Complex Transaction	Complex Transaction			
Who may avail:	70 Legazpi City Barang	gays & City C	Offices		
CHECKLIST OF RI	REQUIREMENTS WHERE TO SECURE				
Letter Request/referral	Letter Request/referral				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
CLIENT STEPS	AGENCY ACTIONS 1.1 Receives request / referral				



Total		7 Days	
1.6 Commencement of work	None	depends on work activities needed/the extent of the repair or work to be done	Electrical Team
1.5 Assigns action team	none	20 minutes	Section Head
1.4 Inspects/assesses needs	none	4 hours	Electrician
1.3 Assigns inspectors to validate needs	none	4 hours	Section Head

#### REPAIR AND MAINTENANCE OF SERVICE VEHICLES AND HEAVY EQUIPMENTS AND OTHER EQUIPMENTS

Office or Division:	City Engineer's Office.	City Engineer's Office, Motorpool Division			
Classification:	Government to Government				
Type of Transaction:	Complex Transaction				
Who may avail:	City Government Offices				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Letter Request/referral					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Submits request	1.1 Receives request / referral	none	10 minutes	Receiving Clerk (Administrative Aide I)	
	1.2 Refers request / referral to division head	none	2 hours	City Engineer	
	1.3 Evaluates and prepares Pre-Repair Recommendation	none	1 day	Section Head Mechanic	
	1.4 Commencement of work	none	depends on work activities needed and availability of materials	Mechanic	
	1.5 Prepares and submits Post-Repair Inspection Report	none	2 hours	Section Head	
	Total:		7 Days		



# REPAIR, IMPROVEMENT AND MAINTENANCE OF ROADS AND DRAINAGES

Office or Division:	City Engineer's Office, Maintenance Division				
Classification:	Government to Government/Government to Client				
Type of Transaction:	Complex Transaction				
Who may avail:	70 Legazpi City Baran	gays			
CHECKLIST OF RE	EQUIREMENTS		WHERE TO SI	ECURE	
Letter Request/referral					
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSI PERSON BE PAID NG TIME RESPONSI			
	1.1 Receives request / referral	none	10 minutes	Receiving Clerk (Administrative Aide I)	
	1.2 Refers request / referral to division head	none	1 day	City Engineer	
1. Submits request	1.3 Assigns inspectors to validate needs	none	1 day	Section Head	
	1.4 Inspects / assesses needs	none	3 hours	Foreman	
	1.5 Assigns action team	none	30 minutes	Section Head	
	1.6 Commencement of work	none	depends on work activities needed/the extent of the repair or work to be done	Maintenance Team	
	Total:		7 Days		

## PREPARATION OF CONSTRUCTION PLANS (BUILDINGS, SYMBOLIC STRUCTURES AND SPECIAL FLAGSHIP PROJECTS)

Office or Division:	City Engineer's Office, Planning, Design and Programming Division		
Classification:	Government to Government		
Type of Transaction:	Highly Technical Transaction		
Who may avail:	The Local Government		
CHECKLIST OF RE	QUIREMENTS WHERE TO SECURE		



Copy of referred letter request or as per instruction of the Honorable Mayor and City Engineer.

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
	1.1 Conference with the stakeholders to ascertain requirements	none	2 hours	Division Head
	1.2 Conduct site inspection and assessment of the site or location	none	4 Hours / Half Day	Division Head Draftsman
1. Submit letter request or as per instruction from the Honorable Mayor and City Engineer	1.3 Research / benchmark and prepare preliminary design / plan for approval	none	1 week	Division Head
	1.4 Collate engineering designs inputs for: Geodetic Engineer, Electrical Engineer, Structural, Mechanical and Plumbing Engineer	none	2 Weeks (depends on the submittal of allied Engineering Professionals)	Division Head Engineer IV (Civil Engineer Engineer IV (Mechanical Engineer Engineer IV (Electrical Engineer) Engineer II (Geodetic Engineer)
	1.5 Drafting of plans / drawing productions and technical specifications	none	Simple: 2 Weeks Complex: 4 Weeks or more	Draftsman CADD operator (3 persons)
	1.6 Review, checking and approval	none	2 days	Division Head
	1.7 Submission	none	1 day	Division Head
	Total:		2 weeks to 2 Months	



# ISSUANCE OF CERTIFICATE OF ANNUAL INSPECTION

Office or Division:	City Engineer's Office, Annual Building Inspection Section				
Classification:	Government to Client				
Type of Transaction:	Complex Transaction				
Who may avail:	Business Establishmer	nts			
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE	
Business Permit Applicati	on (new applicant)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Submits Application @ BPLO	1.1 Receives/validates request thru email sent by BPLO	none	20 minutes	Receiving Clerk	
	1.2 Inspects business establishment	none	2 to 3 days	Inspectorate Team (composed of Civil, Mechanical & Electrical Engineers)	
	1.3 Reviews / verifies compliance and issuance of Certificate or return of Application	none	30 Minutes	Section Head	
	1.4 (a) Assesses fees thru ETRACS (if approved)	none	1 hour	Assessment Clerk	
	1.4 (b) Letter of Denial (if disapproved)	none	30 Minutes	Encoder	
	2.1 Receives payment	Attached Schedule of Fees	5 minutes	Cashier	
	2.2 Prepares certificate	none	10 minutes	Clerk	
2. Payment of Fees	2.3 Checks / countersigns Certificate of Annual Inspection / Letter	none	15 minutes	Section Head	
	2.4 Approves the Certificate of Annual Inspection / Letter	none	10 minutes	Department Head	
	2.5 (a) Releases the 2.6 Certificate of Annual Inspection / Letter	none	20 minutes	Releasing Clerk	
	2.5 (b) Delivery of letter of Denial	none	2 to 3 days	Messenger / Clerk	



Total:	3 days, 2	
	hours and 45	
	minutes	

### **Building Permit Application**

A Building Permit is issued by the Building Official (BO) 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:	Building Permit Division/One-Stop Shop for Construction Permits				
Classification:	Government to Client (G2C), Government to Business Entity (G2B), Government to Government (G2G)				
Type of Transaction:	Highly Technical				
Who may avail:	All				
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE			
Four (4) copies of duly account notarized Application Form and the necessary Ancillary	for Building Permit	Legazpi City Website https://legazpi.gov.ph/services			
Proof of lot/property owners <b>a.</b> In case the applicant is the the lot, one (1) certified true Original Certificate of Title (Certificate of Title (TCT), or of Deeds <b>b.</b> In case the applicant is r owner of the lot, in addition copy of latest OCT/TCT, ard duly notarized copy of the C Award Notice, Deed of Abs Sell, Extra-Judicial Settlem the registered owner Certification from a duly lice Geodetic Engineer that the construction, renovation, al addition shall be within the owner/applicant and will no adjoining property <i>(incorpor)</i> of Architectural Design Plan	ship: he registered owner of e copy of latest (OCT)/Transfer in file with the Registry not the registered to the certified true by of the following: Contract of Lease, olute Sale, Contract to ent or Authority from ensed and registered proposed teration, repair or property of the t encroach any rated in the first page	Registry of Deeds			



	CIAL 3
Four (4) sets of Survey Plans, Design Plans/Drawings, Specifications and other documents prepared, signed and sealed over the printed name of the respective duly licensed and registered design professionals, and approved by the owner/applicant	
Three (3) sets of Structural Analysis and Design, signed and sealed over the printed name of the duly licensed and registered Civil/ Structural Engineer (Applicable for all buildings/structures except for one storey and single detached building/structure with a total floor area of 20.00 sq. meters or less)	
Boring and Load Test (Applicable for buildings/structures of three (3) storeys and higher, lower building structures for areas with potential geological/geotechnical hazards, or if necessary in accordance with the provisions of the National Structural Code of the Philippines- NSCP)	
Three (3) sets of Electrical Analysis and Design, signed and sealed over the printed name of the duly licensed and registered Professional Electrical Engineer	
One (1) photocopy of latest PRC Identification Card and Professional Tax Receipt, signed (three specimen signatures) and sealed by the respective professionals	
Four (4) sets of duly notarized Bill of Materials/Cost Estimate of the building or structure to be erected, signed and sealed over the printed name by a duly licensed and registered Architect or Civil Engineer, and approved by the owner/applicant	
One (1) Construction Logbook, signed and sealed over the printed name of the duly licensed and registered Civil Engineer or Architect- In- Charge of construction, and signed by the owner/applicant	
Certificate of Approval of Construction Safety and Health Program (CSHP) Certification that the project will NOT affect the Power Line Corridor, per Republic Act No. 11361	
Fire Safety Compliance Report (FSCR), if applicable (as prescribed by the provisions of the Revised IRR of Fire Code of the Philippines)	

				OF LEC
				CTAL SUT
Affidavit of Undertaking (fo National Government Ager submitted 30 days or less a the Building Permit per JM applicable for Simple Struc	ncies which can be after the issuance of C No. 2018-01,			
Special Power of Attorney Board Resolution/Secretary corporations) for the author representative/signatory in owner/applicant	y's Certificate (for rized behalf of the			
Other Zoning requirements necessary/applicable: a. Affidavit of Non-Obje b. Affidavit of Undertak c. Barangay Resolution d. Manifestation e. Simple Subdivision Approved Subdivision f. Other pertinent docu	ection king on Lot Occupancy n/Endorsement Approval/Copy of on Plan ments based on the			
evaluation of the applicatio Affidavit of Undertaking (for clearances from National Government Agencies which can be submitted 30 days or less after the issuance of the Building Permit per JMC No. 2018-01, applicable for Simple Structures only)	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
	1.1 Receive Application Form and Documentary Requirements	None	15 minutes	Receiving Clerk
1. Submit the Application Form and Documentary Requirements (Window B	1.2 Review Application Form and Documentary Requirements	None	1 hour	Document Verifier
- Receiving Window)	1.3 If compliant, issue Claim Stub. If non-compliant, issue Checklist of Deficiencies	None	15 minutes	Receiving Clerk



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	1.4 Zoning Review and Evaluation	None	4 hours	Zoning Evaluator
				Zoning Officer
				Zoning Administrator
	1.5 If non-compliant,	None	30 minutes	Zoning Evaluator
	issue Notice of Deficiencies			Zoning Officer
				Zoning Administrator
	1.6 Technical Review and Evaluation	None	5 days (for Complex Applications)	Bureau of Fire Trade Evaluators
			15 days	Building Permit Division Chief
			(for Highly- Technical Applications)	Fire Marshall
				Building Official
	1.7 If non-compliant, issue Notice of Deficiencies	None	30 minutes	Building Permit Division Chief
	Denoienoies			Building Official
	1.8 Prepare Consolidated Order of Payment	None	1 hour	Assessor
	1.9 Review Consolidated Order of Payment	None	1 hour	Building Permit Division Chief
	1.10 Approve Consolidated Order of Payment	None	1 hour	Building Official
2. Receive the Order	2.1 Pay Fees and Charges	Based on Order of Payment	15 minutes	Cashier
of Payment (through SMS and E-mail) and Pay the Fees and	2.2 Prepare Permits and Clearances for Issuance	None	1 hour	Clerk



				CIAL
Charges (Window A -	2.3 Recommend	None	1 hour	Building Permit
Cashier or Online	Issuance of Building			Division Chief
Payment)	Permit			
	2.4 Approve	None	1 hour	Building Official
	Issuance of Building			-
	Permit			
3. Receive the Building	Release Building	None	15 minutes	Releasing Clerk
Permit, Locational	Permit, Locational			
Clearance and Fire	Clearance and Fire			
Safety Evaluation	Safety Evaluation			
Clearance (Window C	Clearance			
- Releasing Window)				

- NOTE:
  - The contents of all design plans/drawings, specifications and other documents prepared by the respective design professionals must be based from the requirements as prescribed by the provisions of Rule III, Section 302 (Application for Permits) of the Implementing Rules and Regulations of the National Building Code of the Philippines (PD 1096) and the latest Zoning Ordinance of the City
  - Only COMPLETE and COMPLIANT applications will be accepted

"SIMPLE STRUCTURES," under JMC 2018-01, are defined as structures with a maximum floor area of 1,500 sq. m., which covers the following types of structures: (a) Single dwelling residential of not more than three (3) storeys; (b) Commercial buildings of not more than two (2) storeys; (c) Renovation within a mall with issued Building Permit; and (d) Warehouse storing non-hazardous substance.

#### **REQUIRED SIZE OF BUILDING PLANS:**

- A3 (297 mm x 420 mm) or Standard Size for RESIDENTIAL BUILDINGS
- Standard Size (20" x 30" or 30" x 40") for COMMERCIAL AND OTHER BUILDING TYPES

Plans must be drawn to scale of not less than **1:100 m** showing readable/clear/complete labels, dimensions and specifications

#### **Certificate of Occupancy Application**

A Certificate of Occupancy issued by the Building Official (BO) to an owner/applicant before using a building/ structure. The purpose of obtaining the said permit is to confirm that the house or building is in a suitable living condition considering its compliance to the provisions of the code and to the submitted plans and specifications.

Office or Division:	Building Permit Division/One-Stop Shop for Construction Permits			
Classification:	Government to Client (G2C), Government to Business Entity (G2B),			
Classification.	Government to Government (G2G)			
Type of Transaction:	Highly Technical			
Who may avail:	All			

**CHECKLIST OF REQUIREMENTS** 

WHERE TO SECURE



				FICIAL SE
Three (3) copies of duly ac	•			
Application Form for Certifi				
Three (3) copies of duly ac notarized form for Certifica				
Three (3) sets of As-Built F				
deviations made from the a	-			
plans, prepared, signed an	•••			
printed names of the duly li				
professionals who signed t	•			
plans				
Certification from the Geod	•			
construction, alteration, rep				
encroach any adjoining pro				
the first page of As-Built A	rchitectural Design			
Plans) One (1) photocopy of lates	t PPC Identification			
Card and Professional Tax				
specimen signatures) and				
respective design profession	2			
Duly accomplished Constru				
Certification from the duly I	5			
Civil Engineer or Architect-	In-Charge of			
construction				
Photographs of the comple	eted structure showing			
front, sides and rear areas	front, sides and rear areas			
Fire Safety Compliance an	d Commissioning			
Report (FSCCR), if applica				
the provisions of the Revis				
the Philippines)			-	
CLIENT STEPS	AGENCY ACTIONS	FEES TO	PROCESSI	PERSON
		BE PAID	NG TIME	RESPONSIBLE
	1.1 Receive	None	15 minutes	Receiving Clerk
	Application Form and			
	Documentary Requirements			
	1.2 Review	None	1 hour	Document Verifier
1. Submit the	Application Form and			
Application Form and	Documentary			
Documentary	Requirements			

1. Submit the	Application Form and			
Application Form and	Documentary			
Documentary	Requirements			
Requirements	1.3 If compliant,	None	15 minutes	Receiving Clerk
(Window B - Receiving	issue Claim Stub. If			
Window)	non-compliant, issue			
	Checklist of			
	Deficiencies			



				CIALS
	1.4 Joint Site Inspection	None	1 day	Zoning
				Bureau of Fire
				Trade Inspectors
	1.5 Technical Review	None	5 days	Zoning Burgau of Fire
	and Evaluation		(for Complex Applications)	Bureau of Fire Trade Inspectors
				Building Permit
			15 days	Division Chief
			(for Highly- Technical	Zoning Administrator Fire
			Applications)	Marshall Building Official
	1.6 If non-compliant,	None	30 minutes	Building Permit
	issue Notice of Deficiencies			Division Chief Building Official
	1.7 Prepare	None	1 hour	Assessor
	Consolidated Order of Payment			
	1.8 Review	None	1 hour	Building Permit
	Consolidated Order of Payment			Division Chief
	1.9* Approve Consolidated Order of Payment	None	1 hour	Building Official
2. Receive the Order	2.1 Pay Fees and	Based on	15 minutes	Cashier
of Payment (through	Charges	Order of		
SMS and E-mail) and Pay the Fees and	2 2 Proparo Pormito	Payment None	1 hour	Clerk
Charges (Window A - Cashier or Online	2.2 Prepare Permits and Clearances for Issuance	NUTE	i noui	CIEIK
Payment)	2.3 Recommend	None	1 hour	Building Permit
	Issuance of			Division Chief
	Certificate of			
	Occupancy 2.4 Approve	None	1 hour	Building Official
	Issuance of			
	Certificate of			
3. Receive the Building	Occupancy 3. Release Certificate	None	15 minutes	Releasing Clerk
Permit, Locational	of Occupancy and	NULLE		Neleasilly Clerk
Clearance and Fire	Fire Safety			
Safety Evaluation	Inspection Certificate			
Clearance (Window C - Releasing Window)				
			I	



NOTE:

- The contents of all design plans/drawings, specifications and other documents prepared by the respective design professionals must be based from the requirements as prescribed by the provisions of Rule III, Section 302 (Application for Permits) of the Implementing Rules and Regulations of the National Building Code of the Philippines (PD 1096) and the latest Zoning Ordinance of the City
- Only COMPLETE and COMPLIANT applications will be accepted

"SIMPLE STRUCTURES," under JMC 2018-01, are defined as structures with a maximum floor area of 1,500 sq. m., which covers the following types of structures: (a) Single dwelling residential of not more than three (3) storeys; (b) Commercial buildings of not more than two (2) storeys; (c) Renovation within a mall with issued Building Permit; and (d) Warehouse storing non-hazardous substance.

#### **REQUIRED SIZE OF BUILDING PLANS:**

A3 (297 mm x 420 mm) or Standard Size for RESIDENTIAL BUILDINGS

• Standard Size (20" x 30" or 30" x 40") for COMMERCIAL AND OTHER BUILDING TYPES

Plans must be drawn to scale of not less than **1:100 m** showing readable/clear/complete labels, dimensions and spec

#### Electrical/Temporary Wiring Permit and Certificate of Final Electrical Inspection Application (CFEI)/Certificate of Electrical Inspection (CEI)

Office or Division:	Building Permit Divisio	n		
Classification:	Government to Client (G2C), Government to Business Entity (G2B), Government to Government (G2G)			
Type of Transaction:	Complex			
Who may avail:	All			
CHECKLIST OF RE	EQUIREMENTS	WHERE TO SECURE		
Letter of intent/request		Building Permit Division City Engineer's Office		
Four (4) copies of duly acc Form for Electrical Permit	omplished Application	Building Permit Division City Engineer's Office		
Electrical Design Plan, sigr the printed name of the dul registered Professional Ele approved by the owner/app	y licensed and ctrical Engineer, and			
of latest Original Ce (OCT)/Transfer Cert on file with the Regis b. In case the applican owner of the lot, in a true copy of latest O following: duly notar	t is the registered (1) certified true copy rtificate of Title ificate of Title (TCT), stry of Deeds t is not the registered iddition to the certified CT/TCT, any of the	Registry of Deeds		



Abaaluta Oala Out	reat to Call Easters			CIAL 2
<ul> <li>Absolute Sale, Contract to Sell, Extra- Judicial Settlement or Authority from the registered owner</li> <li>c. If within a resettlement site, Certification from the Urban Poor Affairs Office that the applicant is the awardee of house/lot applied for</li> </ul>		Urban Poor Affairs Office		
Photographs of the structure	re applied for showing			
front, sides and rear areas				-
Barangay Clearance		Office of the	e Punong Barar	ngay Concerned
CLIENT STEPS		FEES TO	PROCESSI	PERSON
		BE PAID	NG TIME	RESPONSIBLE
	1.1 Receive Application Form and Documentary Requirements	None	15 minutes	Receiving Clerk
1. Submit the Application Form and Documentary	1.2 Review Application Form and Documentary Requirements	None	1 hour	Document Verifier
Requirements (Window E)	1.3 If compliant, issue Claim Stub. If non-compliant, issue Checklist of Deficiencies	None	15 minutes	Receiving Clerk
	1.4 Technical Review and Evaluation	None	2 days	Electrical Evaluator Building Permit Division Chief
	1.5 Site Inspection	None	1 day	Electrical Inspector
	Prepare Order of Payment	None	1 hour	Electrical Inspector
	If non-compliant, issue Notice of Deficiencies/ Notice of Denial	None	1 hour	Building Permit Division Chief Building Official
2. Receive the Order of Payment (Window E)	2. Release Order of Payment	Based on Order of Payment	15 minutes	Releasing Clerk
	3.1 Pay Fees and Charges	Based on Order of Payment	15 minutes	Cashier



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3. Pay the Fees and	3.2 Prepare Permit	None	1 hour	Clerk
Charges (Window A -	for Issuance			
Cashier)	3.3 Recommend	None	1 hour	Building Permit
	Issuance Permit			Division Chief
	3.4 Approve	None	1 hour	Building Official
	Issuance of Permit			
4. Receive the	4. Release	None	15 minutes	Clerk
Temporary/Permanent				
Wiring Permit and	nt Wiring Permit and			
Certificate of Electrical	Certificate of			
Inspection	Electrical Inspection			
(CEI)/Certificate of	(CEI)/Certificate of			
Final Electrical	Final Electrical			
Inspection Application	Inspection			
(CFEI)(Window E)	Application (CFEI)			

### **Mechanical Permit Application**

Office or Division:	Building Permit Division
Classification:	Government to Client (G2C), Government to Business Entity (G2B), Government to Government (G2G)
Type of Transaction:	Complex
Who may avail:	All

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Letter of intent/request	
Four (4) copies of duly accomplished Application Form for Mechanical Permit	
Five (5) sets of Mechanical Design Plans, signed and sealed over the printed name of the duly	
licensed and registered Professional Mechanical Engineer, and approved by the owner/applicant	
Five (5) sets of Mechanical Design Specifications, signed and sealed over the	
printed name of the duly licensed and registered Professional Mechanical Engineer, and approved by the owner/applicant	
Five (5) sets of Bill of Materials/Cost Estimate of the proposed work, signed and sealed over the	
printed name by the duly licensed and registered Professional Mechanical Engineer, and approved by the owner/applicant	
Five (5) sets of Design Computation, signed and sealed over the printed name of the duly licensed	



				CIALS
and registered Professional Mechanical Engineer (for elevators)				
Five (5) sets of Heat Load C Energy Efficiency Ratio (EE sealed over the printed nam and registered Professional <i>(for air-conditioning units)</i> Five (5) sets of Hydraulic Ca sealed over the printed nam and registered Professional <i>(for sprinkler system)</i>	R), signed and he of the duly licensed Mechanical Engineer alculation, signed and he of the duly licensed			
CLIENT STEPS		FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
	1.1 Receive Application Form and Documentary Requirements	None	15 minutes	Clerk
	1.2 Review Application Form and Documentary Requirements	None	1 hour	Document Verifier
1. Submit the Application Form and Documentary Requirements (Window B)	1.3 If compliant, issue Claim Stub. If non-compliant, issue Checklist of Deficiencies	None	15 minutes	Receiving Clerk

1. Submit the Application Form and Documentary Requirements (Window B)	non-compliant, issue Checklist of Deficiencies			
	1.4 Technical Review and Evaluation	None	2 days	Mechanical Evaluator Building Permit Division Chief
	1.5 If non-compliant, issue Notice of Deficiencies/ Notice of Denial	None	1 hour	Building Permit Division Chief Building Official
	1.6 Prepare Order of Payment	None	1 hour	Mechanical Evaluator
2. Receive the Order of Payment (Window B)	2. Release Order of Payment	None	15 minutes	Releasing Clerk
3. Pay the Fees and Charges (Window A - Cashier)	3.1 Pay Fees and Charges	Based on Order of Payment	15 minutes	Cashier
	3.2 Prepare Permit for Issuance	None	1 hour	Clerk



	3.3 Recommend Issuance Permit	None	1 hour	Building Permit Division Chief
	3.4 Approve Issuance of Permit	None	1 hour	Building Official
4. Receive the Mechanical Permit(Window C)	Release Mechanical Permit	None	15 minutes	Clerk

# Excavation Permit to Operate Application

			phoanon		
Office or Division:	Maintenance Division				
Classification:	Government to Client (G2C), Government to Business Entity (G2B),				
		Government to Government (G2G)			
Type of Transaction:	Simple				
Who may avail:	All	-			
CHECKLIST OF RE	QUIREMENTS		WHERE TO SI	ECURE	
Letter of Intent/Request					
Three (3) copies of duly acc	complished	Maintenanc	e Division		
Application for Excavation I			-		
Three (3) sets of Total Estir					
Three (3) copies of propose schedule of PERTCPM/Bar more than Fifteen (15) days construction schedule shall restoration work. Three (3) sets of construction showing sketch /street plan excavation work is propose trees/shurbs, pavement, sid islands and other fixtures. Three (3) copies of street m traffic flow pattern to be sub	c chart if duration is s. The proposed include the on drawing/plans s/profile where such d including affected dewalks, center				
such cases where the traffic re-routing is considered necessary.					
Three (3) sets of built plan.					
CLIENT STEPS		FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Submit the Application	1.1 Receive	None	15 minutes	Receiving Clerk	
Form and Documentary	Application Form				
Requirements	and Documentary				
	Requirements				



	<b>F</b>			VCIAL S
	1.2 Review Application Form and Documentary Requirements.	None	15 minutes	Documentary Verifier
	1.3 Technical Review and Evaluation	None	1 Hour	Trade Evaluator, Maintenance Division Chief
	1.4 If no complaint, Issue Notice of Deficiencies/Notice of Denial	None	30 Minutes	Division Chief/City Engineer
	1.5 Site Inspection	None	2 Hours	Inspectorate Team/Division Chief
	1.6 If no Complaint, Issue Notice of Deficiencies/Notice of Compliance	None	30 Minutes	Maintenance Division Chief/ City Engineer
	1.7 Prepare Order of Payment	None	30 Minutes	City Assessor
2. Receive the Order of Payment (Window B)	2. Release Order of Payment	None	15 minutes	Releasing Clerk
3 .Pay the Fees and Charges (Window A - Cashier)	3.1 Pay Fees and Charges	Based on Order of Payment	15 minutes	Cashier
	3.2 Prepare Permit for Issuance	None	1 hour	Clerk
	3.3 Recommend Issuance Permit	None	1 hour	Maintence Division Chief
	3.4 Approve Issuance of Permit	None	1 hour	City Engineer
4. Receive the Excavation Permit	4. Release Mechanical Permit	None	15 minutes	Clerk

# **Smoke-Free Certificate of Compliance Application**

Office or Division:	Maintenance Division			
Classification:	Government to Client (G2C), Government to Business Entity (G2B), Government to Government (G2G)			
Type of Transaction:	Simple			
Who may avail:	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Letter of Intent/Request				



Three (3) copies of duly accomplished Application for Smoke Free Certificate of Compliance. Three (3) sets of floor Plan.		Maintenance	e Division	CIAL 2
Attached Business Permit				
CLIENT STEPS		FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
	1.1 Receive Application Form and Documentary Requirements	None	15 minutes	Receiving Clerk
	1.2 Review Application Form and Documentary Requirements.	None	15 minutes	Documentary Verifier
1. Submit the Application Form and Documentary	1.3 Technical Review and Evaluation	None	1 Hour	Trade Evaluator, Maintenance Division Chief
Requirements	1.4 If no compliant, Issue Notice of Deficiencies/Notice of Denial	None	30 Minutes	Division Chief/City Engineer
	1.5 Site Inspection	None	2 Hours	Inspectorate Team/Division Chief
	1.6 If no Complaint, Issue Notice of Deficiencies/Notice of Compliance	None	30 Minutes	Maintenance Division Chief/ City Engineer
	1.7 Prepare Order of Payment	None	30 Minutes	City Assessor
2. Receive the Order of Payment (Window B)	2. Release Order of Payment	None	15 minutes	Releasing Clerk
3. Pay the Fees and Charges (Window A - Cashier)	3.1 Pay Fees and Charges	Based on Order of Payment	15 minutes	Cashier
	3.2 Prepare Permit for Issuance	None	1 hour	Clerk
	3.3 Recommend Issuance Permit	None	1 hour	Maintence Division Chief
	3.4 Approve Issuance of Permit	None	1 hour	City Engineer



FEEDBACK AND CO	MPLAINTS MECHANISM
How to send feedback	Send text/e-mail or call up City Engineers Office
	e-mail address: <u>ceolegazpicity@gmail.com</u> contact number: 09283375065
How feedbacks are processed	<ol> <li>Internalizes feedbacks and discovers the area of concerns for corrective measures</li> <li>Quick look at it from other point of view or perspective for possible growth area</li> </ol>
	3. Provide or enlist help for a positive result
How to file complaint	<ol> <li>Secure, fill-up properly and sign Client's Feedback Form provided near the Suggestion Box at the PACD and drop the same</li> </ol>
	<ol> <li>Formal letter/complaint addressed to the City Engineer</li> </ol>
	<ol> <li>Can call or contact the City Engineer thru the CEO e-mail or mobile number</li> </ol>
How complaints are processed	1. Retrieve/classify and summarize complaint
	<ol> <li>Analyze complaint and take appropriate action</li> </ol>
	<ol> <li>Inform/notify the client of the action/s taken through letter</li> </ol>
	4. If not within the authority, endorse/forward complaint to Head of Office
Contact Information of CCB, PCC, ARTA	



# **CITY HEALTH OFICE**



# **CITY HEALTH OFFICE**

**Administrative Division** 



## ADMINISTRATIVE SERVICES

The Administrative Division offers the following services: Preparation of Medical and Death Certificate, Transfer Permit and Schedule of Activities.

Issuance of Medical Certificate				
Office or Division:	Division: ADMINISTRATIVE DIVISION			
Classification:	Simple			
Type of	G2C			
Transaction:	010			
Who may avail:	General Public			
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE		
For Enrollment/Sch	olarship			
- Chest X-Ray		Laboratory Section		
Complete Blood Co	unt (CBC)	Laboratory Section		
Urinalysis		Laboratory Section		
For Private Employr	ment:			
- Complete Blood Co	unt (CBC)	Laboratory Section		
- Urinalysis		Laboratory Section		
- Fecalysis		Laboratory Section		
- Chest X-Ray		Laboratory Section		
- ECG		Laboratory Section		
-Recent Drug Test		Laboratory Section		
For Government Em	ployment:			
- Complete Blood Co	unt (CBC)	Laboratory Section		
- Urinalysis	Laboratory Section			
- Chest X-Ray	X-Ray Unit			
- Neuropsychiatric Exam				
<u>For Fit to Work</u>				
- Record of Consultat				
Check-up Record fror	n Legazpi City			
Health Office				
For Training of Emp	loyee (Private) / M	en in Uniform (PNP/BFP)		
- Complete Blood Co	unt (CBC)	Laboratory Section		
- Urinalysis	· ·	Laboratory Section		
- Fecalysis		X-Ray Unit		
- Chest X-Ray				
- ECG				
-Recent Drug Test				
Teacher For Annual	Check-up / Reinst	tatement		
X-Ray	X-Ray Unit			
Urinalysis				
- Birth Certificate of ba	aby if from	Local Civil Registrar's Office		
Maternity Leave				
For Security Guard				
- Complete Blood Count (CBC)				



				CIALS
- Urinalysis				
- Chest X-Ray				
-Recent Drug Test				
- Neuropsychiatric Te				
For On the Job Trai	nin <u>g (OJT)</u>			
		1		
- Complete Blood Co	unt (CBC)			
- Urinalysis				
- Fecalysis				
- Chest X-Ray				
For Reference : Med				
- Certification of Indig	ency from the	Barangay	Captain	
barangay				
<u>For Travel</u>				
-Certification of Non-I		Barandov	Cantain	
Result of Laboratory		Barangay	/ DOH Accedited	laboratory
COVID - 19 Positive (		ion of any		Laboratory
Certification of Monito		Barandav	Captain/ICR	
- Officical Receipt (OI			urer"s Office (CTC	))
	()			
For Bond				
<u></u>				
- Official Receipt (OR)				
- Official Receipt (Or	()			
	()			
- Official Receipt (OF		FEES	PROGEOGING	DEDOON
CLIENT STEPS	AGENCY	FEES TO BE	PROCESSING	PERSON
			PROCESSING TIME	RESPONSIBLE
CLIENT STEPS 1. Client presents	AGENCY ACTIONS 1 .Client is given	TO BE PAID		RESPONSIBLE Administrative.
CLIENT STEPS 1. Client presents Of-ficial Receipt	AGENCY ACTIONS 1 .Client is given list of required	TO BE PAID Regular:		RESPONSIBLE
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other	AGENCY ACTIONS 1 .Client is given list of required laboratory	TO BE PAID	TIME	RESPONSIBLE Administrative. Aide I
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to	TO BE PAID Regular: P50.00		RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and	TO BE PAID Regular: P50.00	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO)	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO)	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at	TO BE PAID Regular: P50.00 Student:	TIME	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS 1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative Division.	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLE Administrative. Aide I Administrative
CLIENT STEPS          1. Client presents         Of-ficial Receipt         (OR) and other         supporting         documents at         Administrative         Division.         2. Client undergo	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division 2. Review of the	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLE Administrative. Aide I Administrative Officer I
CLIENT STEPS         1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative Division.         2. Client undergo Eye Acuity Test and Blood Pressure	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division 2. Review of the submitted	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLEAdministrative.Aide IAdministrativeOfficer IAdministrativeAdministrativeAdministrativeAdministrativeAdministrativeAdministrative
CLIENT STEPS         1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative Division.         2. Client undergo Eye Acuity Test and Blood	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division 2. Review of the submitted	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLEAdministrative.Aide IAdministrativeOfficer IAdministrativeAdministrativeAdministrativeAide IAdministrative
CLIENT STEPS         1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative Division.         2. Client undergo Eye Acuity Test and Blood Pressure	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division 2. Review of the submitted	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLEAdministrative.Aide IAdministrativeOfficer IAdministrativeAdministrativeAdministrativeAdministrativeAdministrativeAdministrative
CLIENT STEPS         1. Client presents Of-ficial Receipt (OR) and other supporting documents at Administrative Division.         2. Client undergo Eye Acuity Test and Blood Pressure	AGENCY ACTIONS 1 .Client is given list of required laboratory examinations to be completed first and instructed to pay fee at the City Treasurer's Office (CTO) before securing medical certificate at Admin. Division 2. Review of the submitted	TO BE PAID Regular: P50.00 Student: P30.00	TIME 3 mins	RESPONSIBLEAdministrative.Aide IAdministrativeOfficer IAdministrativeAdministrativeAdministrativeAide IAdministrative



				CIAL S	
3. Client proceeds to Medical Division.	3. Preparation of Medical Certificate	None	11 mins	Administrative. Aide I Administrative Officer I	
4.Client submits/ presents needed requirement/s at the receiving desk	4. Recording of the Official Receipt (OR) number and amount in the logbook.	None	5 mins.	Administrative. Aide I Administrative Officer I	
5. Client fills up the information sheet.	5.1 Assessment of presented documents and conduct of the physical examination.	None		c/o Medical Division	
	5.2 Signing of Medical Certificate (if with incidental findings, prescribes medicines and recommends appropriate laboratory tests, etc.).	None		c/o Medical Division	
	Total:		15 Minutes		
Queeing /Waiting time presented documents For any inquiries/com	S.		s in the flow of cor		
Issuance of Dea	•				
Office or Division:	ADMINISTRATIV		N		
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	General Public (Relatives/Closest Informant of the Deceased)				
CHECKLIST OF REQUIREMENTS WHERE TO SECURE					
For Death at Home			at Home or Con		
- Certification from the Captain stating the information:		- Certification from barangay Captain stating the following information:			



ng name		
extension (Jr., Sr., II, III)		
For Death at Home or Community:		
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6. Client reviews	6. Admin. Staff			
the prepared	prepares the			
Death	Death	None	5 mins	Administrative
Certificate.	Certificate.			Aide I
7. Client proceeds	7. Admin. Staff	None	1 min	
to the Medical	for-wards the			
Division for	Death			
signature.	Certificate to			
	Admin. Officer			Administrative
	IV for			Aide I
	signature in			
	the absence			
	of A.O. IV, a			
	designated			
	CHO staff			
	signs the			
	Death			
	Certificate.			
8. Client proceeds	8. Conduct of	None	30 mins	c/o Medical
to the embalming	interview with			Division
for signature	the			
	informant/rela-			
	tive of the			
	deceased for			
	the cause of death.			
9. Client proceeds	9.1 Admin. Staff	None	1 min	
to Local Civil	types the	None		Administrative
Registrar's Office	cause of death			Aide I
(LCRO) to	in the Death			
register the Death	Certificate.			
Certificate.	9.2 Recording of	None	1 min	
	Official			Administrative
	Receipt (OR)			Aide I
	at Admin. Division.			
	Total:	P60.00	47 mins	
Queeing/Waiting time			-	the conversation
and presented docum				
For any inquiries/com		lease contact	:: Fatima F. Intia -	- 09175613873

Preparation of Transfer Permit				
Office or Division:	ADMINISTRATIV	ADMINISTRATIVE DIVISION		
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	il: Relatives/Closest informant of the Deceased			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				



1. Completed Death Certificate		Local Civil Registrar's Office (LCRO)		
2. Official Receipt (OR)		City Treasurer's Office (CTO)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client pays fee at the City Treasurer's Office (CTO).	1. Admin. Staff instructs client to pay fees at the City Treasurer's Office (CTO)	P60.00	2 mins	Administrative Aide I
2. Client pre-sents needed requirements at the Admin. Division.	2. Admin. Staff reviews the presented documents and prepares the permit.	None	5 mins	Administrative Aide I
3. Client pre-sents needed requirements at Admin. Division and presents the official receipt (OR)	3. Recording of Official Re- receipt (OR) in the logbook	None	2 mins.	Administrative Aide I
4.Client proceeds to medical division for the signing of the Transfer Permit	4. 4. Client is instructed to proceed to the Medical Division for the signing of the Transfer Permit.	None	2 mins	Administrative Aide I
	Total:	P60.00	11 mins	
Queeing/Waiting Time is not included and time varies in the flow of conversation and presented document/s.         For any inquiries/comments/complaints, please contact: Fatima F. Intia - 09175613843				

# Request for Medical Team, Medical and Dental Mission and Speaker Office or Division: ADMINISTRATIVE DIVISION Classification: Simple Type of Transaction: G2C, G2G



Who may avail: Government Agency, Non-Government Agency, Public and					
-	Private Office, Organization, Barangay				
	CHECKLIST OF REQUIREMENTS WHERE TO SECURE			ECURE	
Mayor and coursed the	Letter of Request addressed to the City Mayor and coursed thru the City Health Officer (at least one (1) month before the activity		Requesting Party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Client coordinates at City Health Office (CHO).	1. Admin. Staff instructs the client to make a request letter to the City Mayor coursed thru the City Health Officer	None	5 mins	Supervising Administrative Officer	
2.Client proceeds to City Mayor's Office to deliver the letter.	2. Admin. Staff receives the advanced copy of the letter.	None	1 min	Administrative Aide I	
<ol> <li>Client returns to City Health Office to give advance copy of the letter.</li> </ol>	3. Admin. Staff temporarily calendar the request while waiting for the approval from the City Mayor's Office	None	2 mins.	Supervising Administrative Officer	
4. The client do the follow-up of their request.	<ol> <li>Admin. Staff advises the client to make a follow-up on the request.</li> </ol>	none	5 working days	Supervising Administrative Officer	
	Total:	None	5 days and 8 minutes * working days upon receipt of the request letter from the City Mayor's Office (CMO).		
Queeing/Waiting Time is not included and time varies in the flow of conversation and presented document/s.					

For any inquiries/comments/complaints, please contact: Fatima F. Intia - 09175613843

Issuance of Medical Certificate for Travel



				CIAL 3
Office or Division:	ADMINISTRATIVE DIVISION			
Classification:	Simple			
Type of	G2C, G2G			
Transaction:				
Who may avail:	General Public			
CHECKLIST OF F			WHERE TO SI	ECURE
For Non PUI/F	,			
Vaccinati	on Card			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client present the needed requirements for securing medical certificate.	1.1 Admin. Div. staff receives and review the requirements for medical certificate	None	5 mins.	Administrative Aide I
				Administrative Officer I
	1.2. Admin. Staff encodes and prints the medical certificate.	None	5 mins.	
	1.3 Admin. Staff records and reviews medical certificate and forward it to the City Health Officer for signature.	None	10 mins.	Administrative Aide I
	1.4. Admin. Staff checks the medical certificate in the log-book and endorses/forwards	None	5 mins	Administrative Aide I



		it to Admission				
		Area for release.				
		Total:	None	25 mins		
Quee	eing/Waiting Tim	e is not included and	time varies	in the flow of co	nversation and	
	0 0					
prese	presented document/s.					
For a	For any inquiries/comments/complaints, please contact: Fatima F. Intia - 09175613843					

For Client in Need of Certification/Certified True Copy:				
Office or Division:	ADMINISTRATIVE DIVISION			
Classification:	Simple			
Type of Transaction:	G2Ċ, G2G			
Who may avail:	General Public	1		
CHECKLIST OF I	REQUIREMENTS		WHERE TO SE	CURE
. For Certification		Administra	tive Division	
- Data needed for the	e certification			
- Official Receipt (Ol Treasurer's	R) from City			
Office				
(CTO)				
B. For Certified True	Сору	Administra	tive Division	
- Original copy of documents/papers needed to be				
certified				
- Official Receipt(Ol Treasurer's	R) from City			
Office (CTO)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The client is presents the needed data	1. Admin. staff assist the client and give instruct-ion to pay fee at the City Treasurer's Office (CTO)	P50.00	2 mins	Administrative Aide I Administrative Officer I
2. The client pays the fee at the	2. Admin. The staff prepare the	None		



	1		1	
City Treasurer's Office (CTO)	certification upon presentation of complete data and official receipt		12 mins	Administrative Aide I
3.The client presents the Official Receipt (OR)	3. Admin. Staff forward the certificate to the head of the office for signature	None	1 min	Administrative Aide I Administrative Officer
4.Client get the certification	4. Release of certificate	None	1 min	Administrative Aide I
<ul> <li>B. For Certified True Copy</li> <li>1. Client presents the original document/papers needed to be certified</li> </ul>	<ol> <li>Admin. staff assist the client and give instruction to pay fee at the City Treasurer's Office (CTO)</li> </ol>	P50.00	2 mins	Administrative Aide I Administrative Officer I
2. The client pays the fee at the City Treasurer's Office (CTO) and presents the OR to Ad- min.Division	<ol> <li>Admin. Staff ask the client for the original copy of document/- papers needed to be certified upon presentation of OR and forward it to the Admin.OfficerIV for processing</li> </ol>	None	3 min	Administrative Aide I Nursing Aide Administrative Officer I
2. The client pays the fee at the City Treasurer's Office (CTO) and present the OR to Admin.Division	3. Admin. Staff ask the client for the original copy of the document/- papers needed to be certified upon presentation of OR and forward it to the Admin. Officer IV for	None	2 mins	Administrative Aide I Nursing Aide Administrative Officer I Supervising Administrative Officer



	processing				
	2.1 Release of the certified document/papers	None	2 min	Administrative Officer I Supervising Administrative Officer	
	Total:	P100.00	23 minutes		
Queeing/Waiting Time is not included and time varies in the flow of conversation and presented document/s. For any inquiries/comments/complaints, please contact: <b>Fatima F. Intia - 09175613843</b>					

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	1. By Serving feedback form or			
	2. Thru the following cellphone numbers:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09175613843 – Fatima F. Intia			
How feedbacks are processed?	1. By asking short and simple questions.			
	2. Think of the experience it will give to the client.			
	3. Pay attention to the feedback.			
	4. Turn feedback into action.			
	5. Share the feedback to all members of the office.			
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)			
	2. Write your complaint in the form and include the following:			
	A. Complete name of the person you are			



	complaining
	B. Date
	C. Time
	3. Drop the filled-up complaint form in the drop box located at PACD or
How complaints are processed?	1. Get The reason of complaints.
	2. Listen to the complainant.
	3. Acknowledge the problem.
	4. Get the facts.
	5. Offerr a solution.
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>
	09771833638 – Dr. Fulbert Alec R. Gillego
	09175613843 – Fatima F. Intia



# **CITY HEALTH OFFICE**

**Dental Division** 

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# **DENTAL SERVICES**

The Dental Clinic offers the following services: Oral Examination, tooth Extraction, Restoration, oral prophylaxis and fluoridization.

CHECK-UP					
Office or Division:	DENTAL DIVISION				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	All constituents of	Legazni City	N/		
CHECKLIST OF R		Loguzpion	WHERE TO SI	ECURE	
Official Receipt (OR	2)	City Treas	surer's Office (C	TO)	
PhilHealth ID (Masa	a, NHTS), MDR				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
		None			
1. Client fill-up	* <u>For New</u>		20 mins		
Form 1.	Patient:		20111113	Dentist I	
	-Make a new				
	indivi-			Dentist II	
	dual treat- ment record			Dentist III	
	(ITR)				
	* For Old Patient:				
	- Retrieves and				
	udates the ITR				
	1.1 The Den-	None	20 mins		
	tists do the				
	oral examina- tion if the			Dentist I	
	tooth/teeth is indica-			Dentist II	
	ted of ex-			Dentist III	
	traction or				
	any other				
	treatment				
	1.2 If indicated			Dentist I	
	for extrac- tion: the	P120.00	15 mins	Dentist II	
	patien is given a charge slip		10 mins	Dentist III	
	and directed to City Trea- surer's Of				



	7			CIAL		
	fice (CTO).					
	1.3 The patient	None		Dentist I		
	will come back					
	and wait for their			Dentist II		
	names to be		<i>i</i> <b>–</b> 1			
	called to		15 mins.	Dentist III		
	undergo to the					
	treatment					
	1. 4 After the	None		Dentist I		
	procedure, the					
	den-			Dentist II		
	tists pres-					
	cribed the		1 hour	Dentist III		
	necessary					
	medica-					
	tion and					
	explained the					
	post operative instruct-					
	ions					
-	Total:					
	lotan		2 hours and 2			
			minutes			
Queeing /Waiting time	Queeing /Waiting time is not included and time varies in the flow of conversation and					
presented documents.						
For any inquiries/comments/complaints, please contact: Fatima F. Intia – 09175613873						

Issuance of Denta	I Certificate			
Office or Division:	DENTAL DIVISIO	N		
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	All constituents of	Legazpi City		
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE
Official Receipt (OF	R) City Treasurer's Office (CTO)			O)
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Issuance of Dental Certificates :</li> </ol>	1.1 Patient will be given charge slip and direc-ted to City Treasurer's Office (CTO).	P50.00	15 mins	Dentist I Dentist II Dentist III
Client proceeds to Dental Division to submit for oral				

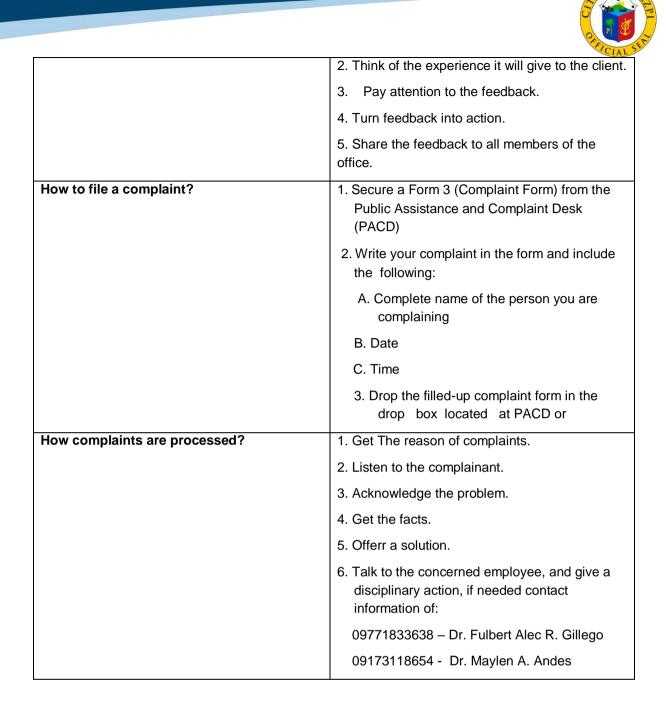


				CIAL		
examination and						
fill-up the						
necessary						
documents				-		
	1.2. Dentists do	None	20 mins	Dentist I		
	the oral					
	examination			Dentist II		
	and fill up the					
	necessary			Dentist III		
	documents.					
	2. Schedule:	None	20 mins.			
Consultation for	Every Tuesday					
pregnant women	& Thursday			Dentist I		
	scheduled					
	of Pregnant			Dentist II		
	Wo-					
	men Oral			Dentist III		
	Examination,					
	Dental					
	Mission,					
	Daycare					
	Center, any-					
	time re-					
	quested by					
	different					
	barangays					
	and other					
	agencies.					
F	Fluoridization					
	scheduled 2x					
	a year for					
	ages 1-5.					
	Total: P60.00 45 mins					
Queeing/Waiting time is	Queeing/Waiting time is not included and the time varies on the flow of the conversation					
and presented documents.						
and presented docume						

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	feedback:     1. By Serving feedback form or			
	2. Thru the following cellphone numbers:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09173118654 - Dr. Maylen A. Andes			
How feedbacks are processed?	1. By asking short and simple questions.			





**Environmental and Sanitation Section** 



## ENVIRONMENTAL and SANITATION SERVICES

Office or Division:	ENVIRONMENTAL SANITATION SECTION				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Walk-in clients				
CHECKLIST OF REC	QUIREMENTS:	WHERE TO SECURE:			
For Walk-in Client:					
Official Receipt (OR)		City Treasurer's Office (CTO)			
For Blue Card (Food I Official Receipt (OR) Sputum Result Chest X-Ray Result for mths Latest Residence Certificate Food Handler's Semina Rectal Swab Original C 1 x 1 ID Picture (Latest	r the last six (6) ficate Latest ar Certificate Official Receipt	Official Receipt (OR) City Health Office (Laboratory Section) City Health Office (X-Ray Unit) or any other X-Ray facility Place of Residency City Health Office (Environmental Sanitation Section) Department of Health, BRTTH Compound, Legazpi City			
For PINK Card and B (Non-Food Handler):					
Official Receipt (OR) Sputum Result 1 x 1 ID Picture (Latest	)	City Treasurer's Office (CTO) City Health Office (Laboratory Section) City Health Office (Laboratory Section)			
For YELLOW Card:					
Official Receipt (OR)					



CHECKLIST OF REQUIREMENTS:			WHERE TO	SECURE:
Latest Residence Certificate		Place of	Residency	
2 x 2 ID Picture (Lat	, ,			
For Massage Therapist/Masseus Photocopy of NC II Certificate or				
License for Massage		TESDA	Regional Office	Department of
Therapist/Masseur	i de la constante de	Health		
merapion/massedi			al Office V	
CLIENT STEPS	AGENCY ACTIONS	FEES PROCESSING PERS		PERSON RESPONSIBLE
1. Client presents com-plete documents to Environmental Sani-tation Section staff.	1. Environmental Sa-nitation Section staff registers the health card/yellow card.	None	5 mins.	SI III SI II S.I. Designate
	2. ESS staff release health card/yellow card to client.		5 mins.	SI III SI II S.I. Designate

CLIENT STEPS		AGENC ACTION		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	3.	ESS	staff	None	5 mins.	SI III



				CIAL	
	instructs clients			0.11	
	to proceed to the Medical			SI II	
	the Medical Division for			S.I. Designate	
	signature			O.I. Designate	
Total Times 45 minut	6				
Total Time: 15 minutes					
Queeing/Waiting time is	s not included.				
For any inquiries/comm 09392625123	nent/complaint, please	e contact:	Jacquenette Ann	V. Calamucha:	
REQUIREMENTS FOR WATER REFILLING STATIONS					
Office or Division:	ENVIRONMENTAL SANITATION SECTION				
Classification:	Highly Technical				
Type of Transaction:	G2B				
Who may avail:	Owners of Water Re Machines/Mobile Wa				
CHECKLIST OF R	EQUIREMENTS:		WHERE TO	SECURE:	
Official Receipt (OR)		City Treasurer's Office (CTO)			
Operational Permit if source of water is from Level I and Level II Original		Department of Health Regional Office V Bagtang, Daraga, Albay			
Сору	Any Department of Health Accredited				
Bi-annual Physical-C water sample - Ph		Wa	ater Analysis Lal	ooratory	

CHECKLIST OF REQUIREMENTS:	WHERE TO SECURE:
Initial Bacteriological Result of Water Sample-Photocopy	Any Department of Health Accredited Water Analysis Laboratory
Certification from Legazpi City Water District if water source is public - Original copy	Legazpi City Water District (LCWD) Bitano, Le-gazpi City



CLIENT STEPS	AGENCY	FEES	PROCESSING	PERSON
	ACTIONS	TO BE	TIME	RESPONSIBLE
1. Client presents com- plete documents to ESS staff.	1. ESS staff reviews the submitted documents and gives claim stub.Operational PermitCertificate of Water PotabilityDrinking Water Site Clearance: Level I Level II Sanitary Survey2. ESS staff 	P600.00 P300.00 P100.00 P200.00 P150.00	20 days	Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate Dr. Fulbert Alec R. Gillego / CHO Officer Noel E. Rosal / City Mayor
Total Time: 20 days	0			
Queeing/Waiting time	is not included.			
For any inquiries/com 09392625123	ment/complaint, pleas	e contact:	Jacquenette Ann '	V. Calamucha:
Issuance of HE	ALTH CARD			
Office or Division:	Environmental san	itation Sec	tion	
Classification:	Simple			
Type of Transaction:	G2C			

Who may avail:	Walk-in clients	
CHECKLIST OF	REQUIREMENTS:	WHERE TO SECURE:



Official Receipt (OR) HIV/RPR Latest Result for GROs Latest Residence Certificate 2 x 2 ID Picture (Latest) 2 pcs.		City Heal	surer's Office (C h Office (Social Residency	CTO) Hygiene Clinic )
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client presents complete docu-ments to ESS staff.	1. ESS staff types entry to the health card/ (non- \food handler)/GROs.			Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate
	For YELLOW CARD: Health Card Sputum PTR Fee For PINK and BLUE Card (Non-Food Handler): Health Card Sputum For BLUE CARD (Food Handler): Health Card Sputum	P30.00 P90.00 P100.00 P30.00 P90.00 P30.00 P90.00		



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	Stool Chest X-ray	P60.00 P120.00			
	2. ESS staff release health card/yellow card to client.		5 mins.	Sanitary Inspector III Sanitary Inspector II	
	to client.			Sanitary Inspector Designate	
	3. ESS staff instructs clients		5 mins.	Sanitary Inspector III	
	to proceed to CHO laboratory for submission of specimen.			Sanitary Inspector II Sanitary Inspector Designate	
	4. ESS staff advice clients to return for health cards		5 mins.	Sanitary Inspector III Sanitary Inspector II	
	after compliance of the laboratory exam			Sanitary Inspector Designate	
Total Time: 20 minutes					
Queeing/Waiting tir	Queeing/Waiting time is not included.				
For any inquiries/co 09392625123	omment/complaint, pleas	se contact:	Jacquenette Ann	V. Calamucha:	



				CIAL	
Issuance of San	itary Vehicle Cle	arance:			
Office or Division:	ENVIRONMENTAL SANITATION SECTION				
Classification:	Complex				
Type of	G2B				
Transaction:	Cataring Carryiaga/	Dekeehen	- Mater Defilling		
Who may avail:	Catering Services/ Stations(WRS)/Wa with Food Deliverie	ater Tank S	Suppliers & Haul		
CHECKLIST OF R	EQUIREMENTS:		WHERE TO S	ECURE:	
Official Receipt (OR) Photocopy	) Original with	Photocop Vehicle	by of OR and C.F	R. of Delivery	
Photocopy of OR an Vehicle	hotocopy of OR and C.R. of Delivery ehicle				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Client proceeds to ESS	1. ESS staff gives client order of	P150.00	5 mins.	Sanitary Inspector III	
	payment for Sanitary Delivery			Sanitary Inspector II	
	Vehicle inspection.			Sanitary Inspector Designate	
2. Client proceeds to City Treasurer's office (CTO) for payment.	2. ESS staff files the photocopy of receipt and advice clients to notify CHO if delivery vehicle is ready for business		5 mins.		
3. Client presents the receipt and submits the photocopy to ESS staff. CHO and give the OR to ESS staff.	3. ESS staff conducts inspection and advice clients to return to ESS Section after 2		2 days	ESS Chief Sanitary Inspector	



CLIENT STEPS	AGENCY	FEES	PROCESSING	PERSON
	ACTIONS	TO BE PAID	TIME	RESPONSIBLE
	days	. ,		Sanitary Inspector
4. Client proceeds to	4. ESS staff issues		1 day	
ESS Section to	Sa-nitary			ESS Chief
claim the Delivery	Vehicle Clear-			Loo onici
Vehicle	ance and forward it to			
Clearance.	ESS Chief and			City Health Officer II
	City Health			
	Officer for			
	signature.			
	-			
Total Time: 4 days a	nd 15 minutes			
Queeing/Waiting time	is not included.			
For any inquiries/comi 09392625123	ment/complaint, pleas	e contact:	Jacquenette Ann	V. Calamucha:
Request for Wat	er Sampling:			
NOTE: Schedule of	Water Sampling is f	rom Mond	ay to Thursday o	only 8:00am to
3:00pm				
Office or	ENVIRONMENTA	L SANITA	TION SECTION	
Division:				
Classification:	Complex			
Type of	G2G, G2B, G2C			
Transaction:				
Who may avail:	Any client			
CHECKLIST OF R	EQUIREMENTS:		WHERE TO SEC	URE:
Official Receipt (OR)		City Trea	surer's Office (C	CTO)
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client proceeds to	1. ESS staff	P600.00	5 mins	Sanitary Inspector III
ESS.	records			
	the receipt and gives Colilert			Sanitary Inspector II



2. Client submits the wa-	bottle and instructs client with regards to water collection and sub-mission of water sam- pling.	1 week	Sanitary Inspector Designate
	2 .ESS staff advice		

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
ter sample specimen to ESS.	client to get results						
Total Time: 1 week and	d 5 minutes						
Queeing/Waiting time i	s not included.						
For any inquiries/comm 09392625123							
Request for Fur	<u>nigation</u>						
Office or Division :	ENVIRONMENTA	L SANITA	ATION SECTION	J			
Classification :	Highly Technical	I					
Type of Transaction :	G2G, G2B, G2C						
Who may avail :	Any client						
CHECKLIST OF R	EQUIREMENTS:		WHERE TO S	SECURE:			
Letter Request addre	essed to the City						
Health Officer with P	hotocopy						
Gasoline Expenses for Fogging							
Machine if Private							
Gasoline/Diesel for F							
Unlead-ed Gasoline							
dilution depending or	n the area size						



Total Time: 2 weeks and 5 minutes

Queeing/Waiting time is not included.

For any inquiries/comment/complaint, please contact: Jacquenette Ann V. Calamucha: 09392625123

## Registration of Sanitary Permits/Health Clearance/Health Cards

Office/Division:	ENVIRONMENTAL SANITATION SECTION			
Classification:	Simple			
Type of Transaction:	G2B			
Who may avail:	All Business Establishme	ents		
CHECKLIST OF RE	QUIREMENTS:	WHERE TO SECURE:		
Official Receipt Duly Accomplished Sanitary Cards/Health Clearance Valid Wastewater Discharge F Hotels/Restaurants/Lodging H Parlors/Apartelles/Laboratorie	Permit for ouses/Inns/Funeral s/Manufacturing/Laundry	Official Receipt DENR-EMB Regional Center site Rawis, Legaz- pi City		
Shops/Catering Services-Photocopy onlyPermit to Operate for Generator Set if there is any- Photocopy onlyPermit to Operate for Generator Set if there is any- Photocopy only		DENR-EMB Regional Center Site Rawis, Legazpi City DENR-EMB Regional Center Site Rawis, Legazpi		

CHECKLIST OF REQUIREMENTS:	WHERE TO SECURE:
Permit to Operate for Underground Tank for Gasoline Stations- Photocopy only	DENR-EMB Regional Center Site Rawis, Legazpi city
Permit to Operate for Compressor for Auto Painting Shops-Photocopy	DENR-EMB Regional Center Site Rawis, Legazpi city



Drugstore/Lying-in Clinics/Hospitals/Bakeries/Funeral Parlors-Photocopy onlyAlbayLicense Certificate or NCT II Certificate for Massage Therapist/Masseur for Massage Parlor-PhotocopyDOH Regional V Office Bagtang, Daraga, AlbayDENR ID for Hazardous Waste for Funeral Parlors/Hospitals/Lying-in Clinics/Medical ClinicsDENR-EMB Regional Center Site Rawis, Legazpi CityOperational Clearance for Cemeteries-Photocopy onlyDOH Regional V Office Bagtang, Daraga, AlbayCLIENT STEPSAGENCYFEES TO BEPROCESSINGPERSON	only				CINU	
Certificate for Massage Therapist/Masseur for Massage Parlor-Photocopy       Albay         DENR ID for Hazardous Waste for Funeral Parlors/Hospitals/Lying-in Clinics/Medical Clinics       DENR-EMB Regional Center Site Rawis, Legazpi City         Operational Clearance for Cerneteries-Photocopy only       DOH Regional V Office Bagtang, Daraga, Albay         1. Client presents documents to ESS staff.       1. ESS staff reviews the submitted documents and releases claim stub to clients.       FEES TO BE PAID       PROCESSING TIME       PERSON RESPONSIBLI         2. ESS staff.       1. ESS staff reviews the submitted documents and releases claim stub to clients.       FEES TO BE PAID       PROCESSING TIME       PERSON RESPONSIBLI Sanitary Inspector III Sanitary Inspector III         2. ESS staff       Adjust       Amount of fees to be paid for the Services, based on the Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007(Revenue Code of Legazpi City)       Sanitary Inspector III Inspector III         . Client presents the claim stub.       2. ESS staff informs clients to claim the submitted       5 mins.       Sanitary Inspector III	Drugstore/Lying-in Clinics/Hospitals/Bakeries/Funeral		DOH-FDA Regional Office V Bagtang, Daraga, Albay			
Funeral Parlors/Hospitals/Lying-in Clinics/Medical ClinicsOperational Clearance for Cemeteries-Photocopy onlyDOH Regional V Office Bagtang, Daraga, AlbayCLIENT STEPSAGENCY ACTIONSFEES TO BE PAIDPROCESSING TIMEPERSON 	License Certificate or NCT II Certificate for Massage Therapist/Masseur for Massage		u u			
Cemeteries-Photocopy onlyAlbayCLIENT STEPSAGENCY ACTIONSFEES TO BE PAIDPROCESSING TIMEPERSON RESPONSIBLI1. Client presents complete documents to 	Funeral Parlors/Ho	spitals/Lying-in		•	Site Rawis,	
ACTIONSPAIDTIMERESPONSIBLI1. Client presents complete documents to ESS staff.1. ESS staff reviews the submitted documents and releases claim stub to clients.Amount of fees to be paid for the Services, based on the Order of Payment issued by the CTO with reference to City OO7(Revenue Code of Legazpi City)TIMERESPONSIBLI Sanitary Inspector III. Client presents the claim stub.2. ESS staff informs clients2. ESS staff informs clients to claim the submitted5 mins.Sanitary Inspector II. Client presents the claim stub.2. ESS staff informs clients to claim the submitted5 mins.Sanitary Inspector II	•		•	/ Office Bagtan	g, Daraga,	
1. Client presents complete documents to ESS staff.       1. ESS staff reviews the submitted documents and releases claim stub to clients.       Amount of fees to be paid for the Services, based on the Order of Payment issued by the CTO with reference to City Ordinance No. 13-2007(Revenue Code of Legazpi City)       Sanitary         . Client presents the claim stub.       2. ESS staff informs clients to claim the submitted       5 mins.       Sanitary	CLIENT STEPS				PERSON RESPONSIBLE	
the claim stub.     informs clients to claim the submitted     Inspector III       Sanitary	complete documents to ESS staff.	<ol> <li>ESS staff reviews the submitted documents and releases claim stub to clients.</li> </ol>	Amount of fees to be paid for the Services, based on the Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007(Revenue Code of		Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate	
		informs clients to claim the submitted		5 mins.	Inspector III Sanitary	



		Sanitary
		Inspector
		Designate

CLIENT STEPS	AGENCY ACTIO	NS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	the following day	/.			
	3. ESS staff regis the accomplish	ned	None	1 day	Sanitary Inspector III
	documents and submits to ESS Chief and City	-			Sanitary Inspector II
	Health Officer signature.	for			Sanitary Inspector
					Designate
Total Time: 2 weeks and	5 minutes				
Queeing/Waiting time is n	not included.				
For any inquiries/commer 09392625123	nt/complaint, please	e conta	act: Jaco	quenette Ann V. (	Calamucha:
Issuance of Smok	ing Permit				
Office or Division:	ENVIRONMEN	TAL	SANITA	ATION SECTION	N
Classification:	Simple				
Type of Transaction:	G2B				
Who may avail:	All Business Est	ablish	hments	with Smoking A	rea
CHECKLIST OF REC	QUIREMENTS:		W	HERE TO SE	CURE:
Certificate of Complia	nce	City	Engine	eering Office (C	CEO)
CLIENT STEPS	AGENCY ACTIO	NS	FEES TO	PROCESSING TIME	PERSON RESPONSIBLE



		BE PAID	
1.Client presents to ESS the required documents.	1. ESS staff prepares the Smoking Permit and submit to ESS Chief for signature.	5 mins	ESS Chief Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate

CLIENT STEPS	AGENCY ACTION	NS FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	2. ESS staff releas	es		
	the Smoking Permit and advi			
	client to proceed			
	to the City Healt			
	Officer 's office			
	signature			
Total Time: 5 minutes			<u></u>	
Queeing/Waiting time is	not included.			
For any inquiries/comm 09392625123	ent/complaint, please	contact: Jac	quenette Ann V. (	Calamucha:
Sanitary Complai	<u>nts</u>			
Office or Division:	ENVIRONMENTAL	SANITATI	ON SECTION	
Classification:	Simple / Highly Technical			
Type of Transaction:	G2c, G2b, G2g			
Who may avail:	Any Client			
CHECKLIST OF		V	HERE TO SEC	CURE:



REQUIREME	NTS:				
Letter of Complaint/Complaint Filed at CHO		Corr	nplaining	Party	
CLIENT STEPS		ONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Client presents the required documents if barangay issues.</li> </ol>	<ol> <li>ESS staff receives the documents an advice clients returned after weeks</li> </ol>	s to	None	5 mins.	Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
For Walk-in Clients:				Sanitary
Client proceeds to ESS for filing				Inspector III
complaints (food				Sanitary
issues)				Inspector II
				Sanitary
				Inspector
				Designate
	2. ESS staff records	None	5 mins.	Sanitary
	the complaint filed.		1 day for walk-	Inspector III
			in clients.	Sanitary



	Inspector II
	Sanitary
	Sanitary Inspector Designate
	Designate
3. ESS staff	
conducts in-	
vestigation	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
				ESS Chief Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate
	<ol> <li>ESS staff prepares reports and submits to the City Health Officer for review and evaluation.</li> </ol>			/ESS Chief Sanitary Inspector III Sanitary Inspector II Sanitary Inspector Designate
Total Time: 4 days and 10	) minutes			



Queeing/Waiting time is not included.

For any inquiries/comment/complaint, please contact: Jacquenette Ann V. Calamucha: 09392625123

### **COVID 19 Related Activities (MISTING)**

Office or Division:	ENVIRONMENTAL SANITATION SECTION
Classification:	Highly Technical
Type of Transaction:	G2C, G2B, G2G
Who may avail:	General Public

CHECKLIST OF REQ	UIREMENTS:	N	HERE TO SE	CURE:
Letter of Request				
CLIENT STEPS	AGENCY	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits letter of request to Admin. Division.	1. Admin. Staff receives the letter, enter it in the incoming communica- tion logbook and make a follow-up then for- ward the letter to the Ci- ty Health Officer.	e	5 mins	Administrative Aide I
2. Client make a follow- up.	2. Admin. Staff schedule the misting activity after CHO Office	r	1-5 mins	Administrative Aide I



	approved the request.				
Total Time: 5-10 mins					
Queeing/Waiting time is not included.					
For any inquiries/comment/ 09392625123	/complaint, please con	tact: Jac	quenette Ann V. (	Calamucha:	

FEEDBACK AND COMPLAINT MECHANISM					
How to send a feedback:	1. By Serving feedback form or				
	2. Thru the following cellphone numbers:				
	09771833638 – Dr. Fulbert Alec R. Gillego				
	09392625123 – Jacquenette Ann V. Calamucha				
How feedbacks are processed?	1. By asking short and simple questions.				
	2. Think of the experience it will give to the client.				
	3. Pay attention to the feedback.				
	4. Turn feedback into action.				
	5. Share the feedback to all members of the office.				
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)				
	2. Write your complaint in the form and include the following:				
	A. Complete name of the person you are complaining				
	B. Date				
	C. Time				
	3. Drop the filled-up complaint form in the drop box located at PACD or				
How complaints are processed?	1. Get The reason of complaints.				
	2. Listen to the complainant.				
	3. Acknowledge the problem.				



4. Get the facts.
5. Offerr a solution.
<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>
09771833638 – Dr. Fulbert Alec R. Gillego
09392625123 – Jacquenette Ann V. Calamucha



Health Program Management Division



## HEALTH PROGRAM MANAGEMENT DIVISION

Request for U	se of Amb	pulance 1			
Office or Division	on: HEA	LTH PROGRA	M MAN	AGEMENT DIV	ISION
Classification:	Simpl	е			
Type of	G2C				
Transaction:	Brogr	ant Nowhorn Lu	ndor Fivo C	hildren, Older Child	ron Toonagoro
Who may avail:		s, Senior Citizen		fillulen, Older Child	ilen, Teenayers,
CHECKLIST				WHERE TO S	ECURE
If mentally-ill pat required to provi transport			PSO or E	Barangay Tanod	
Referral Form			CSWDO		
Letter request si Officer	gned by Cit	ty Health	СНО		
CLIENT STEP	S I	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Client coordina at City Health Office (CHO)</li> </ol>		. HEMS staff instructs the client to secure note of approval from City Mayor's Office (CMO)	None	2 mins	Population Program Officer I
2. Client proceeds City May Office (CMO) to seek for approval and note	s to or's	. Hems Staff interview the client and schedule transport.	None	10 mins	Population Program Officer I
3. Client returns to City Heal Office to give advance copy of th letter	3 th	. Hems staff temporarily calendar the request while waiting for the approval from the City Mayor's Office	None	2 mins	Population Program Officer I



				CIAL SE				
4. The client do the follow-up of their request.	4.Hems staff advises the client to make follow-up on the request.	a	3 working days	Population Program Officer I				
	Tota	l:	3 days and 14 minutes					
Queuing/Waiting time is not included.								
For any inquiries/cc 09171365502	omment/compliant	, please cor	itact: Maricel S.	Banzuela -				
Request for Medic	al Team							
Office or Division:	HEALTH PROG	RAM MAN	IAGEMENT DI	/ISION				
Classification:	Simple							
Type of Transaction:	G2C ,G2G							
Who may avail:	All							
CHECKLIST OF R			WHERE TO SE	CURE				
Letter of Request a City Mayor and cou City Health Officer a month before the ad	rsed thru the at least one (1)							
Referral Form	surry,	CSWDO						
Letter signed by Cit and City Mayor	y Health Officer	001120						
	FEES TO	PROCESSING	PERSON					
CLIENT STEPS	AGENCY ACTIONS	BE PAID	TIME	RESPONSIBLE				
1. Client coordinates at City Health Office (CHO)	1. HEMS Staff instructs the client to make a request letter to the City Mayor coursed thru the City Health Officer	None	5 mins	Population Program Officer I				
2. Client proceeds to City Mayor's Office to deliver the letter.	2.1HEMS Staff receives the advanced copy of the letter.	None	1 min	Population Program Officer I				
	2.2HEMS Staff receives and review and document the request.	None	2 mins	Population Program Officer I				



				CIAL		
3. The client do the	3.Hems staff advises the	None	3 days	Population Program Officer I		
follow-up of	client to					
their	make a					
request.	follow-up on					
	the request.					
	Total:	None	3 days and 8 mins			
Queuing/Waiting time is not included.						
For any inquiries/co 09171365502	For any inquiries/comment/compliant, please contact: Maricel S. Banzuela -					

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

Request for Use of Ambulance 2						
Office or Division:	ffice or Division: HEALTH PROGRAM MANAGEMENT DIVISION					
Classification:	Simple					
Type of Transaction:	G2C					
Who may avail:	Pregnant, Newborn, Under	Five Chi	ldren, Older Child	ren, Teenagers,		
CHECKLIST OF R	Adults, Senior Citizen					
Referral Form	EQUIREMENTS		WHERE TO S	ECURE		
	Officer and City Mayor					
Letter signed by City Health		FEES				
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
<ol> <li>Relative/Client request for transfer of confinement</li> </ol>	<ol> <li>Interviewed and asked Relative/Client for ambulance letter request</li> </ol>	None	5 mins	Nurse on Duty		
<ol> <li>Relative/Client is instructed to wait at the designated waiting area.</li> </ol>	2. Waiting for Admin Office or Senior House Officer for the approval and release of Trip Ticket	None	2 mins	Admin Officer		
3. For request outside Legazpi City, relative/client is instructed to follow up to HEMS staff	<ol> <li>Waiting for the approval of travel order and release of Trip Ticket</li> </ol>	None	3 days	Admin Officer/HEMS Staff		
<ol> <li>Relative/Client is informed of approval/Disapproval</li> </ol>	4.1 Approved/Disapproved the validity of verbal/personal request.	None	3 mins	Admin Officer/HEMS Staff		



				CIAL S	
	4.2 Sworn Statement with Release of Liability Waiver for ambulance use will be discussed to the requesting party and after concurring be signed with the witness	None	3 mins	Admin Officer/HEMS Staff	
<ol> <li>Relative/Client is given instruction on when to pick up the patient</li> </ol>	5.Ambulance is provided,HEMS assistance be on case to case basis.	None	5 mins	Admin Officer/HEMS Staff	
6.Relative/Client is being informed that ambulance driver is ready to pick up the patient.	6. Pick-up the patient	None	Travel Time	Driver	
	Total:	None	36 minutes		
Queuing/Waiting time is not included.					
For any inquiries/comment/	compliant, please contact:	Marice	I S. Banzuela -	09171365502	

Request for RT-PCR/ Antigen Test				
Office or Division:	HEALTH PROGRAM M	ANAGE	EMENT DIVISIO	DN
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	Close Contact, Symptomation Worker and Travelers	c/Asymp		
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE
Request letter received and Officer	l signed by City Health			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>The client/patient proceeds to Triage Area</li> </ol>	1. Profiling of Patients/Client for Rt-Pcr and Antigen Testing	None	5 Mins	Nurse on Duty
2. Patients waits to be called	2.1 wabbing/Antigen Testing of Patients/Clients	None	5 Mins	Medtech on Duty
	2.2 Collection/Examination of Specimen	None	5 Mins	Medtech on Duty
	2.3 RT-PCR specimen to be transported to BRDRL	None	5 Mins	Medtech on Duty & Driver
	2.4 Specimen for Antigen Testing is being checked or observed or examined by the Medtech for the result	None	5 Mins	Medtech on Duty



				CIAL
3. The patient is	3.Releasing of	None	20 Mins for	Medtech/Nurse
informed to wait	Results		Antigen	on Duty
for the result.			24-48 hrs or	
			RT-PCR	
	Total:	None	45 minutes	
Queuing/Waiting time is not	t included.			
For any inquiries/comment/compliant, please contact: Maricel S. Banzuela - 09171365502				

<b>Primary Health Care Serv</b>	ices / Ekonsulta				
Office or Division:	HEALTH PROGRAM M	ANAGE	EMENT DIVISIO	<b>N</b>	
Classification:					
Type of Transaction:	G2C				
Who may avail:	Pregnant, Newborn, Under Adults, Senior Citizen	Five Chi	ldren, Older Child	ren, Teenagers,	
CHECKLIST OF F	REQUIREMENTS		WHERE TO S	ECURE	
Any personal identification spelling / Member Data Rec client)		Philhe	alth Office		
CLIENT STEPS	AGENCY ACTIONS	ACTIONS FEES TO PROCESSING PERSO BE TIME RESPONS			
1.Patients fills up the Ekonsulta registration form.	1.Interviews client. <u>For New Patient</u> – Ekonsulta Registration form filled up. <u>For Old Patient –</u> Request for Authorization transaction code form filled up.	None	5 Mins	Nurse on Duty	
2.Patients waits for ATC (Authorization Transaction Code)	2.Registration of patient in ekonsulta website is being processed	None	5 Mins	Nurse on Duty	
3.ATC is being received by the Patient.	3.Authorization Transaction Code is given to patient with instruction.	None	5 Mins	Nurse on Duty	
	Total:	None	15 minutes		
Queuing/Waiting time is no	t included.				
For any inquiries/comment/		Marice	I S. Banzuela -	09171365502	

FEEDBACK AND COMPLIANT MECHANISM					
How to send a feedback:	<ol> <li>By serving feedback form or thru the following cellphone numbers:</li> </ol>				
	09455161347 - Ma. Rosario R. Balonzo 09988653468 – Maricel S. Banzuela				



	09171274686 – Ronald Joy Miña
How feedback are processed?	<ol> <li>By asking short and simple questions.</li> <li>Think of the experience it will give to the client.</li> <li>Pay attention to the feedback</li> <li>Turn feedback into action.</li> <li>Share the feedback to all members of the office</li> </ol>
How to file a complaint?	<ol> <li>Secure a Form 3 (Compliant Form) from the Public Assistance and Compliant Desk (PACD)</li> <li>Write your compliant in the form and include the following:         <ul> <li>A. Complete name of the person you are complaining</li> <li>B. Date</li> <li>C. Time</li> </ul> </li> <li>Drop the filled-up compliant form in the dropbox located at PACD or</li> <li>Thru cellphone numbers above.</li> </ol>
How complaints are processed?	<ol> <li>Get the reason of complaints.</li> <li>Listen to the compliant.</li> <li>Acknowledge the problem.</li> <li>Get the facts</li> <li>Offer a solution</li> <li>Talk to the concerned employee, and give a disciplinary action, if needed. Contact information of 09455161347 - Ma. Rosario R. Balonzo 09988653468 - Maricel S. Banzuela 09171274686 - Ronald Joy Miña</li> </ol>



**Laboratory Services** 



# LABORATORY SERVICES (Sputum, Fecalysis Examination for Health Card)

Office or Division:	LABORATORY SEC	TION				
Classification:	Simple					
Type of	G2C					
Transaction:						
Who may avail:	General Public					
CHECKLIST OF I	REQUIREMENTS		WHERE TO S	ECURE		
Official Receipt (OR)		City Trea	surer's Office (CT	0)		
Philhealth ID/MDR of						
Paid (renewed, not e						
Examination Reques	t	City Heal	th Doctor			
Specimen		FFFO				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Client inquires at the Laboratory Section.	1. Receive and assess the health card and the official receipt. Give procedure on proper collection and submission of the specimen.	P90.00	15 mins.	Medical Technologist Laboratory Aide		
2. Client submits the specimen and health card.	2. Receive and assess if the specimen is properly collected. Label and give instructions on how to claim the health card and the result	None	15 mins.	Medical Technologist Laboratory Aide		
3. Client presents the official receipt (OR) of the health card to laboratory staff.	3. Check the official receipt (OR) and release the result to the client.	None	5 mins.	Medical Technologist Laboratory Aide		
4. Client claims the result and health card.	4. Releasing of the result and health card	None	5 mins	Medical Technologist Laboratory Aide		
	Total:	P90.00	40 mins			
Queuing/Waiting tir For any inquiries/com		· · ·				



LABORATORY SE	RVICES (Blood Ch	emistry Exami	nation)	ICIAL S
Office or	LABORATORY S	SECTION		
Division:				
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	General public			
CHECKLIST OF F			WHERE TO SEC	URE
Official Receipt (OF			's Office (CTO)	
Philhealth ID/MDR				
LGU Paid (renewed	l, not expired)			
Examination Reque	est	City Health Do		
Specimen			's Office (CTO)	DEDOON
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client inquire	Checks for the	None	5 mins.	
on how to avail	availability of			Med. Tech III
laboratory	the re-quested			
services.	examination.			Med. Tech II
	* 16 ( )			
	* If requested			Lab. Aide
	examination is			
	not available			Lab. Aide II
	client/			
	patient may go to			Lab.tech
	their			Lab.lech
	clinical			
	laboratory			
0. Olionet remonente	of choice			
2. Client presents request from the	2. If available,	CBC-P90.00		
physician.	staff will give	Blood		Med. Tech III
	instruct-ion	Typing- P90.00		
	and order slip.			Med. Tech II
	Silp.	Urinalysis- P60.00		
				Lab. Aide
		Fecalysis-		200.7100
		P60.00		Lab. Aide II
		Sputum		
		Exam P90.00		Lab taak
				Lab.tech
		FBS-P130.00		
		Total		
		Cholesterol-		
		P130.00		
		HDL		
		Cholesterol- P220.00		
		1 220.00		



				CICIAL ST
		LDL Cholesterol- P220.00		
		Triglycerides- P130.00		
		BUN- P130.00		
		BUA- P130.00		
		SGOT- P220.00		
		SGPT- P220.00		
3. Client proceeds to City Treasurer's	3. Staff assess the documents	None	30 mins.	Med. Tech III
Office.	presented, give instruction prior			Med. Tech II
	to collection.			Lab. Aide
				Lab. Aide II
				Lab.tech
4. Client presents Official Receipt	4. Laboratory staff will ready	None	30 mins.	Med. Tech III
(OR).	the pro-per procedure on blood collection.			Med. Tech II
				Lab. Aide
				Lab. Aide II
				Lab.tech
5. Client is instructed to wait	5. Laboratory staff explains the	None	30 mins.	Med. Tech III
at the designated waiting area until his/her number is	pro-cess of the re-quested			Med. Tech II
called.	laboratory procedure.			Lab. Aide
				Lab. Aide II
				Lab.tech
L		1		



				CIAL				
6. When the number is called, client submits for blood collection and/or submits specimen.	6. 1Laboratory staff will extract blood samples.	None	30 mins.	Med. Tech III Med. Tech II Lab. Aide Lab. Aide II Lab.tech				
				Lab.lech				
	6.2 Client is	None		Med. Tech III				
	given instruct-ion on how and when to		2 days	Med. Tech II				
	comeback for the result			Lab. Aide				
				Lab. Aide II				
				Lab.tech				
	Total:	None	2 Days,2					
			hours and 5					
	mins							
Queeing/Waiting time is not included varies on the flow of conversation and presented document/s								
For any inquiries/comment/complaint, please contact: Guadalyn D. Nuyda-09982199815								

Specimen Submission				
Office or Division:	LABORATORY SECTION			
Classification:	Simple			
Type of Transaction:	G2C			
Who may avail:	General Public			
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	ECURE
Official Receipt (OR)		City Tr	easurer's Office (	CTO)
Philhealth ID/MDR of Masa, N	IHTS, LGU Paid (renewed,			
not expired)				
Examination Request		City Health Doctor		
Specimen				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client proceeds to in- formation area of	<ol> <li>Laboratory staff releases results and document it in the releasing logbook.</li> </ol>	None	30 mins.	Med. Tech III Med. Tech II

				FICIAL SEL
laboratory, present				Lab. Aide II
official receipt or its				
equivalent.				
	Total:	None	36 minutes	
Queeing/Waiting time is not ir	<u>ncluded varies on the flow of c</u>	conversa	ation and present	ed document/s.
For any inquiries/comment/co	mplaint, please contact: Gua	dalvn D.	Nuvda- 09696499	9777

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	1. By Serving feedback form or			
	2. Thru cellphone number:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09696499777 – Guadalyn D. Nuyda			
How feedbacks are processed?	1. By asking short and simple questions.			
	2. Think of the experience it will give to the client.			
	3. Pay attention to the feedback.			
	4. Turn feedback into action.			
	5. Share the feedback to all members of the office.			
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)			
	2. Write your complaint in the form and include the following:			
	A. Complete name of the person you are complaining			
	B. Date			
	C. Time			
	3. Drop the filled-up complaint form in the drop box located at PACD or			
How complaints are processed?	1. Get The reason of complaints.			
	2. Listen to the complainant.			
	3. Acknowledge the problem.			
	4. Get the facts.			



5. Offer a solution.
<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>
09771833638 – Dr. Fulbert Alec R. Gillego
09696499777 – Guadalyn D. Nuyda



**Medical Division** 



## MEDICAL SERVICES

Office or Division:	MEDICAL DIVISION						
Classification:	Simple						
Type of Transaction:	G2C	G2C					
Who may avail:	General Public, Patients						
CHECKLIST	OF REQUIREMENTS:		W	HERE TO SEC	URE:		
1.Any personal id validation	lentification or ID for						
2. Copy of Memb Philhealth	er Data Record (MDR)	Phil	Health (	Office Legazpi	City		
3.Existing Immun	ization Card						
4.Existing mother Based maternal F	and Baby Book or Home Record (HBMR)						
5.Barangay Certi	fication						
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIB LE		
1.Consultation – Patient/Client proceeds to Out- Patient Department for Interview.	1.Staff on duty retrieves the of the patient/client.	ITR	None	2 mins.	City Health Officer/		
2. Patient/ Client undergo physical examnination	2.1 Provides medical, and physical examination/consulta tion to patient		None	15 mins.	Medical Officers		
	2.2 Medical and medico lega examination con-ducted.	l	P50.0 0	45 mins			



Total Time: 1 hour							
Queeing/Waiting ti	me is not included.						
For any inquiries/c	omment/complaint, please contact: Dr. Adelsa R. Tee-09453414544						
Other Health I	Related Services (Signing of Death Certificate, Burial						
and Transfer I	and Transfer Permit)						
Office or Division :	MEDICAL DIVISION						
Classification:	Simple						
Type of Transaction:	G2C						

Who may avail:	General Public, Patients				
CHECKLIS		WH	ERE TO SECUR	RE:	
Official Receipt (OF	R) (	City Treasurer's o	ffice (CTO)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Client proceeds to City Treasurer's Office (CTO) for payment.	<ol> <li>Reviewed and verbal autopsy to the relative of the deceased and indicate cause of death.</li> </ol>	Amount of fees to be paid for the Services, based on the Order of Payment issued by the CTO with reference to City Ordinance No. 13- 2007(Revenue Code of Legazpi City)	5-10 mins.	City Health Officer/Medical Officers	



				MCIAL SP
	*Burial Permit *Transfer Permit	P30.00 P60.00		
Total Time: 22 mins.				
Queeing/Waiting time				
For any inquiries/con	nment/complaint, pl	lease contact: Dr. A	delsa R. Tee-094	53414544
Signing of Med	ical Certificate	<u>)</u>		
Office or	MEDICAL DIVISION	ON		
Division:				
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	General Public, P			
CHECKLI	ST OF	WHERE TO SECURE:		
REQUIREN	MENTS:			
1. Official Rece	eipt (OR)	1. Official Receipt	: (OR)	
2. Laboratory Results (x-ray, urinalysis, fecalysis, ultrasound, etc.)		2.Laboratory Results (x-ray, urinalysis, fecaly ultrasound, etc.)		lysis, fecalysis,
CLIENT STEPS	AGENCY	FEES TO BE	PROCESSING	PERSON
1. Client presents the requirements.	ACTIONS 1.1 Reviews documents for completeness of attached requirements.		7 mins.	RESPONSIBLE City Health Officer/ Medical Officers



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1.2 Evaluation and ma-nagement of labora-tory results (x-ray, urinalysis, fecalysis, CBC, ultrasound, etc.)	None	5 mins	City Health Officer/Medical Officers
	1.3 Signing of documents. Medical Certificate	P50.00- regular	15 mins.	
		P50.00- for student		City Health Officer/Medical Officers
		P50.00		
	Bond	P30.00		
	Health Card			
Total Time: 22 mins.	1	Į	<u> </u>	
Queeing/Waiting time	s not included.			
or any inquiries/com	nent/complaint, please o	contact: Dr	. Adelsa R. Tee-0	9453414544

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.



FEEDBACK AND COMPLAINT MECHANISM						
How to send a feedback:	1. By Serving feedback form or					
	2. Thru cellphone number:					
	09771833638 – Dr. Fulbert Alec R. Gillego					
	09453414544 – Dr. Adelsa R. Tee					
How feedbacks are processed?	1. By asking short and simple questions.					
	2. Think of the experience it will give to the client.					
	3. Pay attention to the feedback.					
	4. Turn feedback into action.					
	5. Share the feedback to all members of the office.					
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)					
	2. Write your complaint in the form and include the following:					
	A. Complete name of the person you are complaining					
	B. Date					
	C. Time					
	3. Drop the filled-up complaint form in the drop box located at PACD or					
How complaints are processed?	1. Get The reason of complaints.					
	2. Listen to the complainant.					
	3. Acknowledge the problem.					
	4. Get the facts.					
	5. Offerr a solution.					
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>					
	09771833638 – Dr. Fulbert Alec R. Gillego					
	09453414544 – Dr. Adelsa R. Tee					

Γ



**Nursing Division** 



NURSING SERVICES					
Office or Division:	NURSING DIVISION				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Pregnant and Lactatin Older children, Teena				
CHECKLIST O	F REQUIREMENTS:			WHERE TO S	ECURE:
1. Any personal i validation of s	dentification or ID for pelling.				
2. One (1) Photo Data Record (					
3. Existing Immu	nization Card				
CLIENT STEPS	AGENCY ACTION	S	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Patient fills up the outpatient (OPD) logbook and is given a number for consultation.</li> </ol>	For Old Patient - Individual Treatment For Old Patient - Individual Treatment Record (ITR) is retrieved and update	p ed.	None	25 minutes	<i>Nurse/Midwife</i> on Duty
2. Patient proceeds to vital signs area.	2.Takes vital signs of patient.	F	None	5 mins.	<i>Nurse/Midwife</i> on Duty



3. Patient waits for their number to be called.	3. Directs patient to waiting area for consultation.	None	3 mins.	<i>Nurse/Midwife</i> on Duty
	ELDERLY, DIFFERENT			
	LY ABLED/PWDs, PREGNANT are given			
4. Patients undergo triaging for prioritization	4. Assesses difficulty of breathing for control of Acute Respiratory Infection (CARI) patients	None	15 mins.	

5. Patient is referred to Pharmacy for medicine dispensing.	5. Assesses signs of dehydration for control of Diarrheal Disease (CDD) in patients	None	15 mins.	<i>Nurse/Midwife</i> on Duty
6. Patient submits for information education campaign (IEC).	<ol> <li>Assesses mental health status of Men- tal Health Program clients.</li> </ol>	None	15 mins.	Nurse/Midwife on Duty
7. Patient submits for diagnostic examination.	7. Emergency and/or infectious disease patients are referred immediately to the doctor.	None	5 mins.	<i>Nurse/Midwife</i> on Duty
8. Patient is given referral slip for further management and evaluation.	8. Receives prescription and instruction on doctors order.	None	15 mins.	<i>Nurse/Midwife</i> on Duty
9. If in need of immediate care, proceed to hospital.	9.1 Conducts individual counselling for health wellness.	None	20 mins.	<i>Nurse/Midwife</i> on Duty
10. Client proceeds to Laboratory section	10. Referral to Labo- ratory Section for the requested examina-	None	5 mins.	<i>Nurse/Midwife</i> on Duty



	tion.			
11. Client secure referral for higher level of care if needed.	11. Gives referral hos- pital or specialty cli- nics for higher level of care if needed.	None	10 mins.	<i>Nurse/Midwife</i> on Duty
12. Client request for	12.1 Ambulance	None	30 mins.	HPMO-
transport to hospital in	transport			Health
case of emergency	to hospital for emer-			Program
case.	gency cases			Management
				Officer
	12.2 Recording of	None	15 mins.	Nurse/Midwife
	Indi- vidual			on Duty
	Treatment Record			
	(ITR) at General Medical Medical			
	Services			
	logbook.			
	Total:	None	2 hrs and 38	
			min.	
Queeing/Waiting time is no	t included.	•		
For any inquiries/comment/	complaint, please conta	act: Sheil	a L. Estipona-09	322827914

## **UNDER FIVE CLINIC (UFC) & IMMUNIZATION SERVICES**

Office or Division:	NURSING DIVISION				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Pregnant and Lactating Women, Newborn, Under Five Children, Older Children, Teenagers, Adults, Senior Citizen				
CHECKLIST OF REQUIREMENTS:					
		WHERE TO SECURE:			
	S:	WHERE TO SECURE:			
REQUIREMENT 1. Any personal identific	<b>S:</b> ation or ID for	WHERE TO SECURE:			



4.Existing Mother and Baby Book, or Home	
Based Maternal Record (HBMR)	

Based Maternal Record (HBMR)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Parents of newborn pro- ceeds to Immunization Room and is given a number	<ol> <li>Interviews parent of Newborn</li> <li><u>NEW -</u> underfive clinic record is filled- up</li> <li><u>OLD -</u> underfive clinic record (UFC) is retrieved and updated.</li> </ol>		15 mins.	<i>Nurse/Midwife</i> on Duty
2. Newborn vital signs are taken.	2. Takes vital signs of newborn and records at UFC record.	None	20 mins.	<i>Nurse/Midwife</i> on Duty
3. Sick child is assisted to a doctor.	3. Sick child is referred to a doctor and immunization is deferred.	None	5 mins.	<i>Nurse/Midwife</i> on Duty
4. Staff determines what vaccines are to be given.	4. Administers vaccina- tion and records at immunization card.	None	20 mins.	<i>Nurse/Midwife</i> on Duty
5. Parents are given health education	5. 1Conducts counselling and schedules if when is the next visit.	None	20 mins.	Nurse/ <i>Midwife</i> on <i>Duty</i>
	5.2 Records vaccine given at logbook and Target client List (TCL).	None	15 mins.	Nurse/ <i>Midwife</i> on <i>Duty</i>



	None	1 hr. & 35 minutes			
Queeing/Waiting time is not included.					
For any inquiries/comment/complaint, please contact: Sheila L. Estipona-09322827914					

PRENATAL & POSTNATAL SERVICES				
Office or Division	NURSING DIVISION			
Classification	Simple			
Type of	G2C			
Transaction Who may avail	Pregnant and Lactating	g Wome	n	
CHECKLIST O	F REQUIREMENTS:		WHERE T	O SECURE:
1.Any personal ident validation of spelling				
2.Copy of Member D	Data Record (MDR)			
3.Existing Immuniza	tion Card			
4.Existing Mother and Baby Book, or Home Based Maternal Record (HBMR)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Pregnant/Lactating women proceeds to prenatal area and is given a number.       NEW - Maternal record is filled-up.       None		10 mins. 15 mins.	<i>Nurse/</i> Midwife on Duty <i>Nurse/Midwife</i> on Duty	
2. Pregnant/Lactating women proceeds to vital signs area.	updated. 2. Takes vital signs of pregnant /lactating women.	None	20 mins.	Nurse/Midwife on Duty



3. Pregnant	3. Performs prenatal	None	30 mins.	Nurse/Midwife on	
/Lactating wo-	examination.			Duty	
women proceeds					
to examination					
room.					
4.	4. Referral of	None	10 mins.	Nurse/Midwife on	
Pregnant/Lactating	pregnant/lactating			Duty	
wo-men are	women with medical				
assisted to doctor	problems to doctor				
for consultation.					
5. Pregnant/Lactating	5. Administers Tetanus	None	10 mins.	Nurse/Midwife on	
women submits for	Diptheria (Td)			Duty	
Tetanus Diptheria	immunization and				
(Td) immunization.	records at Mother and				
	baby Book or HBMR				
6. Pregnant/Lactating	6. Conducts counsel-	None	20 mins.	Nurse/Midwife on	
women attends for	ling pregnant			Duty	
health advocacy	/lactating women.				
7. Pregnant/lactating	7. Records at Target	None	10 mins.	Nurse/Midwife on	
women proceeds	Client List (TCL)			Duty	
to Dental Division	logbook.				
	_				
8. Pregnant/Lactating	8. Referral to Dental	None	5 mins.	Nurse/Midwife on	
women proceeds	Division for basic oral			Duty	
to Dental Division	Health Care (BOHC).				
9. Pregnant/Lactating	9. Referral to Nutrition	None	5 mins.	Nurse/Midwife on	
women proceeds	Section for			Duty	
to Nutrition Section	micronutrient				
	supplementation.				
	supplementation.				
	Total:	None	2 hours and 15 Minutes		
Queeing/Waiting time is not included.					
For any inquiries/comm	ent/complaint_please.com	tact: She	ila L Estinona-09	322827914	

For any inquiries/comment/complaint, please contact: Sheila L. Estipona-09322827914

UNDER FIVE CLINIC (UFC) AND IMMUNIZATION SERVICES					
Office or	NURSING DIVISION				
Division:					
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Pregnant and Lactating Women, Newborn, Under Five Children,				
	Older Children, Teenagers, Adults, Senior Citizen				
CHECKLIST	OF	WHERE TO SECURE:			

**REQUIREMENTS:** 



				CIAE	
Immunization Reco	rd/Card				
Member Data Reco	ord (MDR) or Phihealth				
ID					
CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING	PERSON	
		ТО	TIME	RESPONSIBLE	
		BE			
		PAID			
1. Children/Infants	* Children/Infants for		1hr and 35		
proceeds to the	childcare services are		minutes		
OPD	scheduled 5 at a time to	None			
accompanied by	observe "social distancing"			Nurse/Midwife as-	
Parents/Guardian.	following the protection			signed at	
	protocol issued by the City			barangay	
				a en en igely	
	Health Officer.				
	Total:	None	1hr and 35		
			minutes		
Queeing/Waiting tir	ne is not included.				
For any inqueries/c	omment/complaint, please	e contact:	Sheila L. Estip	ona-	
09322827914					

PRENATAL/ POSTNATAL CARE SERVICES					
Office or Division	NURSING DIVISION				
Classification	Simple	Simple			
Type of Transaction	G2C				
Who may avail	Pregnant and Lactating Women, Newborn				
CHECKLIST O	CHECKLIST OF REQUIREMENTS: WHERE TO SECURE:				
Existing Mother and Baby Book, or Home Based Maternal Record (HBMR)					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	



		 CIAL
	Due to the COVID 19 pandemic,	Nurse/Midwife assigned at
	PREGNANTS as	barangay
	belonging to the	
	"vulnerable group"	
	are advised to	
	seek routine maternal care	
	services at their	
	respective barangay	
	health centers	
	wherein frontliners	
	assigned are waiting	
	for them and	
	further to	
	avoid exposure	
	to any	
	infectious diseases.	Nurse/Midwife
	<ul> <li>Pregnants/Postpartum and Lactating</li> </ul>	assigned at
	Women for maternal	barangay
	care services	barangay
	are are	
	scheduled 5 at a time	
	to observe "social	
	distancing" following	
	the protection	
	protocol issued by	
	the City Health Officer	
Total Time: 2 hours ar		
Queeing/Waiting time	e is not included.	

For any inquiries/comment/complaint, please contact: Sheila L. Estipona-09322827914

## **CONTROL OF ACUTE RESPIRATORY INFECTION (ARI)**

Office or Division :	NURSING DIVISION	l
Classification :	Simple	
Type of Transaction:	G2C	
Who may avail :		ing Women, Newborn, Under Five Children, nagers, Adults, Senior Citizen
CHECKLIST OF REQUIREMENT		WHERE TO SECURE:



				CIAL
1.Any personal identificat validation of spelling.	tion or ID for			
2.Philhealth ID, Copy of M Record (MDR), NHTS, M				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Parent of Child/Patient submit for thermal scanning and sanitize hands.	<ol> <li>Staff on duty subject the pare of child/ patient a subjected to thermal scanning and sanitize hands.</li> </ol>	are	3 mins.	Triage <i>Nurse/Midwif</i> e
<ol> <li>Parent &amp; child/Patient proceeds to triage area.</li> </ol>	<ol> <li>Staff on duty instructs the parent of child/ patient to proce to triage area.</li> </ol>	None	3 mins	Triage <i>Nurse/Midwif</i> e
3. Parents/Patients proceed triage area for assessment of infectious disease.	3. Staff on du assessed th	ity None ne of if	10 mins.	Triage Nurse/Midwife
	New patient giv pertinent data during initial interview a records at Individual Treatment Records at Individual Treat- ment Record (ITR)		10 mins.	Triage Nurse/Midwife



			CIAL
Old patientIndividualTreatment Record(ITR) is retrievedand upda-ted.Emergency casesare referred tomedical doc-tor .	None	3 mins.	
4. Doctors on duty pro-ceeds to consultation TENT 2.	None	20 mins.	
Patient is assessed for difficulty of breathing.		2 mins	
Doctor assigned at ICR Quarantine Faci- lity is notified.		2 mins	
* EQRT is called for transport of patient to ICR if needed.	None	5 mins.	
* If patient needs medi-cation, prescription will be issued.	None	3 mins.	
* If laboratory exami- nation is needed, labo- ratory request is given.	None	3 mins.	
*If referral to higher level of care is needed, patient is transported	None		



	5. Patients	None	2 mins.	
	prescription is			
	brought by CHO			
	staff to Pharmacy			
	Unit for medicine			
	dispensing			
	Total:	None	1 hr and 6 minutes	
Queeing/Waiting time is not	included.			
For any inquiries/comment/c		ct: Sheila	L. Estipona-093	22827914

## MENTAL HEALTH PROGRAM SERVICES

Office or Division	NURSING DIVISIO	NURSING DIVISION				
Classification	Simple	Simple				
Type of Transaction	G2C	G2C				
Who may avail	General Public, P	atients				
CHECKLIST OF R	EQUIREMENTS: WHERE TO SECURE:					
Any Record from Previous Consultation						
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Client/Family of Patient undergo thermal scanning and sanitize hands.	<ol> <li>Staff on duty at the triage area check the client/patient to undergo thermal scanning and sanitize hands.</li> </ol>		3 mins.	Triage <i>Nurse/Midwife</i>		
2.Client/Family of patient submits for interview.	<ol> <li>Staff on duty interviews client/famil of patient.</li> </ol>		20 mins.	Nurse on Duty/Nurse Coordinator		



				CIAL
	New Patient  - Individual  Treatment  Record  (ITR) will be made.			
	*Old Patient - Individual Treatment Record (ITR) will be retrieved and updated.			
3. Client/Family of patient proceeds to medical doctor for assessment	3. Staff on duty refers the client/family of patient to medical doc-tor for assessment.	None	15 mins	Nurse on Duty/Nurse Coordinator
4. Client/Family of patient receives referral for their psychiatrist of choice.	4. Staff on duty gives	none	5 mins	Nurse on Duty/Nurse Coordinator
	If prescribed with medicine CHO staff will facilitate to Pharmacy unit the drug dispensing			



5. Client's/Family undergo counselling	<ol> <li>Staff on duty gives counseling to client/ family of patient</li> </ol>	none	10 mins	Nurse Coordinator
	For Vagrant Psychotic Client/Patient:			
	<u>(a) For</u> <u>Legazpi</u> <u>Residents:</u>	None		Medical Officer Nurse
	- Family will be notified			
	- Referred to medical doctor for assessment Unit (APU)			
	(b) For Non-Legazpi Residents:			Nurse CoordinatorSocial
	- City Social Worker (CSW) will be notified for data			Worker Medical Technologist
	profiling and location.			
	- Undergo Rapid Test- ing as requirement			
	from border security before			
	transport to residence of			
	origin.			
	- Referral is			
	given. Total:		53 Minute2	
Queeing/Waiting time is not			JU Minutez	
For any inquiries/comment/		ct: Sheila	L. Estipona-09	0322827914
Queeing/Waiting time is not		ot. Onend		022021014



## **GENERAL MEDICAL SERVICES**

Office or Division	NURSING DIVIS	ION	١		
Classification	Simple				
Type of Transaction	G2C				
Who may avail	Pregnant and Lac Children, Older C				
CHECKLIST OF R	EQUIREMENTS:			WHERE TO S	SECURE:
1. Any personal identific validation of spelling.					
2.Copy of Member Data	Record (MDR)				
3.Existing Immunization	Card				
4.Existing Mother and Ba Home Based Maternal R					
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Patient fills up the outpa-tient (OPD) logbook and is given a number for con-sultation.</li> </ol>	1. Interviews client For New Patient Individual Treatme Record (itr) is filled up For Old Patient Individual Treatment Record (ITR) is retrieved and updated.	- - - <u>t</u> -	None	25 mins.	<i>Nurse/Midwife</i> on Duty
2. Patient proceeds to vital signs area.	2. Takes vital signs patient.	s of	None	20 mins.	<i>Nurse/Midwife</i> on Duty



3. Patient waits for their number to be called.	<ul> <li>3. Directs patient to waiting area for consultation.</li> <li>ELDERLY, DIF- FERENTLY ABLED, PWDs, PREGNANT</li> <li>are given</li> </ul>	None	3 mins.	<i>Nurse/Midwife</i> on Duty
Total Time: 48 minutes				
Queeing/Waiting time is	not included.			
For any inquiries/comme	nt/complaint, please cor	ntact: Sh	eila L. Estipor	a-09322827914

Queeing/Waiting time is not included.

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

FEEDBACK AND COMPLAINT MECHANISM					
How to send a feedback:	1. By Serving feedback form or				
	2. Thru cellphone number:				
	09771833638 – Dr. Fulbert Alec R. Gillego				
	09959116607 – SHEILA L. ESTIPONA				
How feedbacks are processed?	1. By asking short and simple questions.				
	2. Think of the experience it will give to the client.				
	3. Pay attention to the feedback.				
	4. Turn feedback into action.				
	5. Share the feedback to all members of the office.				
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)				
	2. Write your complaint in the form and include the following:				
	A. Complete name of the person you are complaining				
	B. Date				
	C. Time				



	3. Drop the filled-up complaint form in the drop box located at PACD or
How complaints are processed?	1. Get The reason of complaints.
	2. Listen to the complainant.
	3. Acknowledge the problem.
	4. Get the facts.
	5. Offerr a solution.
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>
	09771833638 – Dr. Fulbert Alec R. Gillego 09959116607 – SHEILA L. ESTIPONA



**Nutrition Services** 



NO III

NO I

#### **NUTRITION SERVICES**

The Nutrition Services promotes good nutrition and prevents malnutrition, rehabilitate malnourished

thru the conduct of Operation Timbang (OPT), Sagip Kalusugan, medical and dental check-up, Laboratory exam, x-ray, PPD, supplementary feeding, ready to use therapeutic/supplemental food (RUTF/RUSF), 120 feeding days, provision of maternal milk, vitamins and minerals, micronutrient, Vitamin A, deworming, ferrous sulfate, calcium carbonate. Conduct of healthy lifestyle, diet counselling,, Buntis/Breastfeeding Congress, intensified mothers classes and other related activities.

Office or Division:	NUTRITION SECTION				
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Pre-school, School Children, Pregnant and Lactating, Adolescents, Adults, Caregi- vers and Senior Citizens				
CHECKLIST OF REQUIRE	MENTS		WHERE TO S	SECURE	
None					
CLIENT STEPS	AGENCY ACTIONS	FEE S TO BE PAI D	PROCESSI NG TIME	PERSON RESPONSI BLE	
1. The client register at the logbook and request for the services needed.	1. Interviews client for the services needed.	Non e	5 mins	NO IV NO III NO I	
2. Client/child undergo weight and height taking, mid upper arm circumference (MUAC) and interview	2. Evaluates the nutritional status of the child/client through weight and height taking, mid upper arm circumference (MUAC) and interview.	Non e	10 mins	NO IV NO III NO I	
3. Client give data and present status to nutrition officer	3. Data gathering/past/	Non e	5 mins	NO IV	

client

Present status of



				CIAL		
4. Client/parents/pregnant/postpartum/c aregiver undergo counseling	4.Conducts c- counselling with the	Non e	20 mins	NO IV		
	client/parents/			NO III		
	pregnant/postpar tum/ caregiver			NO I		
5.Client/parents/pregnant/postpartum/ caregiver Receives Services	5. 1 Provision of services	Non e	10 mins	NO IV		
	30111003			NO III		
				NO I		
	5.2 Recording of clients	Non e	5 mins	NO IV		
				NO III		
				NO I		
	5.3 Referral of patients to	Non e	5 mins.	NO IV		
	physician for treatment.			NO III		
				NO I		
	<b>–</b> ( )					
	Total:	Non	1 hour			
		е				
Queuing/Waiting time is not included	<u> </u>		<u> </u>	1		
For any inquiries/comment/complaint, please contact: Mercy A. Morante - 09955726257						

## NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.



FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	1. By Serving feedback form or			
	2. Thru cellphone number:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09955726257 – Mercy A. Morante			
How feedbacks are processed?	1. By asking short and simple questions.			
	2. Think of the experience it will give to the client.			
	3. Pay attention to the feedback.			
	4. Turn feedback into action.			
	5. Share the feedback to all members of the office.			
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)			
	2. Write your complaint in the form and include the following:			
	A. Complete name of the person you are complaining			
	B. Date			
	C. Time			
	3. Drop the filled-up complaint form in the drop box located at PACD or			
How complaints are processed?	1. Get The reason of complaints.			
	2. Listen to the complainant.			
	3. Acknowledge the problem.			
	4. Get the facts.			
	5. Offerr a solution.			
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09955726257 – Mercy A. Morante			



**Population Section** 



### **POPULATION SERVICES**

The Population Section promotes counselling and provision of contraceptive method for the intensive implementation of National Family Planning Program, Pre-Marriage Counselling (PMC) to Would-Be Couples and Issuance of Pre-Marriage Certificate.

Office or Division:	POPULATION SECTION						
Classification:	Simple	Simple					
Type of Transaction:	G2C						
Who may avail:	Women of Reprodu	ctive Age,	Teenage Mothe	ers			
CHECKLIST OF R	EQUIREMENTS:		WHERE TO S	ECURE:			
6 weeks after pregna menstruation							
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
For Current Users: 1. (a) Client proceed to Population Section for re-supply of: Pills (POP & COC) Condom	1.1 Population staff facilitates the needs of the clients	None	5 mins	PPO II PPO			
Injectibles -for injectibles (DMPA) with lost card after payment at the City Treasurer's Office (CTO) proceed to City Health Office for the issuance of new DMPA card.	1.2 Population staff records to Target Client List (TCL)	None	5 mins	PO II PPO			



			-	CIAL
2. Client proceed to City Treasurer's Office (CTO) for payment	2. Population staff to pay at CTO	P100.00	2 mins	PO II PPO
	Total:	P100	12 mins	
2. (b) For New Acceptors of Family Planning (FP) Methods: Client to undergo FP counselling.	2.1 Popsec staff to fill-out form and to give counselling to the client.	None	12 mins.	PO II PPO
3. Client received the requested commodity.	3. Dispensing of the requested commodity.	None	2 mins	PO II PPO
<ol> <li>Clients referred to other facilities for FP services not available in City Health Office.</li> </ol>	4 Popsec staff will prepare a referral form, signed and will be given to client.	none	3 mins	PO II PPO
	Total:	None	17 Mins	
Queeing/Waiting time For any inquiries/comr		e contact: :	Amylene B. Santi	llan - 09238779953



Issuance of Pre-Marriage Certificate								
Office or Division:	POPULATION SECTION							
Classification:		Simple						
Type of	G2C							
Transaction:								
Who may avail:	Women of Reprod	uctive Age	e, Teenage Moth	iers				
CHECKLIST OF RE			WHERE TO SE	CURE:				
Official Receipt (OR)		City Treas	surer's Office (CT	O)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE				
1. Non-Filipino Citizen client attends a special PMC at Popsec CHO	1.1 Conduct of Pre-Marriage Counselling and Family Planning Seminar to would be couples.	P100.00	45 mins.	PO II PPO				
	1.2 Special PMC conducted on the Popsec Office,	P100.00		PO II				
	done with privacy			PPO				
	1.3 Popsec staff asked the following	None	15 mins.	PO II				
	information from the would-be couples			PPO				
	A. <b>Pregnant</b> or has child/children							
	B. Educational attainment							
2. Client undergoes counseling and introduce to family	2Popsec staff counsel a potential client	None	10 mins	PO II				
planning commodities	and introduces Family Planning			PPO				



	commodities.					
3. Student researcher proceed to the	3. Popsec staff res ponds to students,	None	5 mins.	PO II		
Population section for the request of pertinent documents/data on Family Planning.	researchers and other agencies re-quest on pertinent documents/data on Family Plan- ning upon ap- proval from the Local Chief Executive and City Health Officer.			PPO		
	Total:	P100.00	1 hour and 15 mins.			
Queeing/Waiting time is not included.						
For any inquiries/comment/complaint, please contact: : Amylene B. Santillan - 09238779953						

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.

FEEDBACK AND COMPLAINT MECHANISM					
How to send a feedback:	1. By Serving feedback form or				
	2. Thru cellphone number:				
	09771833638 – Dr. Fulbert Alec R. Gillego				
	09273879953 – Amylene B. Santillan				
How feedbacks are processed?	1. By asking short and simple questions.				
	2. Think of the experience it will give to the client.				
	3. Pay attention to the feedback.				



	4. Turn feedback into action.
	5. Share the feedback to all members of the office.
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)
	2. Write your complaint in the form and include the following:
	A. Complete name of the person you are complaining
	B. Date
	C. Time
	3. Drop the filled-up complaint form in the drop box located at PACD or
How complaints are processed?	1. Get The reason of complaints.
	2. Listen to the complainant.
	3. Acknowledge the problem.
	4. Get the facts.
	5. Offerr a solution.
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>
	09771833638 – Dr. Fulbert Alec R. Gillego
	09273879953 – Amylene B. Santillan



**Social Hygiene Clinic** 



### SOCIAL HYGIENE CLINIC SERVICES

The Social Hygiene Clinic offers the following examination and laboratory services : Gram Stain-ing, KOH, Wet Mount for sexually transmitted infections; PAP Smear for sexually active women; breast examinations; free screening and counselling for HIV, RPR and Hepa B to all pregnant wo-men and clients at risk or risky behavior, and give free condoms and lubricants.

Check-up Sexu	ally Transmitt	ed Infe	ection	1	
Office or Divsion	: SOCIAL HY	SOCIAL HYGIENE CLINIC			
Classification:	Simple				
Type of Transacti	on: G2C				
Who may avail:	Having Sex (housewife,	Registered Sex Workers, Freelance Sex workers, Men Having Sex with Man, Client Sex Workers and others: (housewife, husband, single male and female, live-in, pregnant and other professions)			
None					oloonl.
CLIENT STEPS	AGENCY ACTIONS	FEES BE P		PROCESSING TIME	PERSON RESPONSIBLE
1.The client register in a logbook and request what service they need.	1.Client/Patient register for admission.	None		15 mins	STI Coordinator Nurse Attendant I Laboratory Aide II
2. Client undergo Pre-Counselling	<ol> <li>Pre- Counselling</li> <li>3. SHC Staff</li> </ol>	None P150.0	0	20 mins 2 mins	STI Coordinator Nurse Attendant I Laboratory Aide II
3. Client Proceeds to CTO for Payment	3. SHC Staff give the client/ patient order	P150.0	νU	2 mins	City Treasurer's Office (CTO)



	1	1		CIAL
	of payment.			
4. Client undergo Collection/ Examination of Specimen	4.1 Collection/ Exa-mination of spe-cimen.	None	10 mins	STI Coordinator Nurse Attendant I Laboratory Aide II
	4.2 Gram Staining	None	10 mins	STI Coordinator
				Nurse Attendant I
				Laboratory Aide II
	4.3 Microscopic Examination	None	30 mins	STI Coordinator
				Nurse Attendant I
				Laboratory Aide II
5. Client get the results	5. Release of Results	None	10 mins	STI Coordinator
				Nurse Attendant I
				Laboratory Aide II
6. Client proceeds to the physician for treatment.	6. Refer client to physician for treatment	none	15 mins	c/o CHO Physicians
7. Client undergo counselling	7. Counselling	none	20 mins	STI Coordinator



				Nurse Attendant I	
				Laboratory Aide II	
	Total:	P150.00	2 hours and		
			12 mins		
Queeing/Waiting Time is not included and time varies in the flow of conversation and					
presented document/s.					
For any inquiries/comments/complaints, please contact: Portia O. Rogando – 09171085509					

PAP Smear							
Office or Division	Office or Division: SOCIAL HYGIENE CLINIC						
Classification:	S	Simple					
Type of Transacti	on: 0	52C					
Who may avail:		Sexually Active					
CHECKLIST	OF R	EQUIREME	NTS:		WHERE TO	SECURE:	
None							
CLIENT STEPS		AGENCY FEES TO BE ACTIONS PAID			PROCESSING TIME	PERSON RESPONSIBLE	
1.Client /Patient register in logbook.	the tien	C Staff assist client/pa- at to register ogbook.	None		5 mins	STI Coordinator Nurse Attendant I Laboratory Aide II	
2. Client proceed to CTO for payment	cha	C Staff give arge slip for ment	P170.00		2 mins	City Treasurer's Office (CTO)	
3. Client undergoes collection of specimen		ollection of ecimen.	None		10 mins	STI Coordinator Nurse Attendant	



	3.2 Specimen sent to Laboratory Section	None	15 mins	STI Coordinator Nurse Attendant I			
4. Client get the	4. Release of	None	2 mins				
result	result.			STI Coordinator			
				Nurse Attendant I			
	Total:	P170.00	34 mins				
Queeing/Waiting Time is not included and time varies in the flow of conversation and presented							
document/s.							
For any inquiries/comments/complaints, please contact: Portia O. Rogando-09171085509							

HIV, RPR and HEPA B SCREENING (HBsAg) TEST						
Office or Division	n:					
Classification:						
Type of Transaction:						
Who may avail:						
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Client undergo pre-counselling	1. P cour	re- nselling	None	15 mins	STI Coordinator Nurse Attendant I Laboratory Aide II	
2. Client fill-up questionnaire form A and consent form	qı fo	lling-up of uestionnaire orm A and onsent form.	None	30 mins	STI Coordinator	



	1			CIAL 3
				Nurse Attendant I
				Laboratory Aide II
3. Client submit for blood extraction	3. 1Extraction of blood	None	1 min.	
	2.2 Contrifugo	None	30 mins	Laboratory Aide II Med. Tech. II
	3.2 Centrifuge the blood sample.	None	50 mms	Med. Tech III
Client undergo counselling and eceives the	4. Post- counsel- Ling and re-	None	10 minutes	STI Coordinator
esult.	lease of			Nurse Attendant
	result.			Laboratory Aide II
	* If REACTIVE: Send blood serum to Manila for confirmatory test			C/O SACCL San Lazaro, Manila
5. REACTIVE batient proceeds o HACT in BRTTH for baseline test and check up.	5. Bring <b>REACTIVE</b> patient to <b>HACT</b> in <b>BRTTH</b> for baseline test and check up.	None	5 hours	STI Coordinator
	Total:	None	6 hours and 26 minutes	
Queeing/Waiting Ti presented documer	me is not included a nt/s.	nd time varies	s in the flow of con	versation and

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.



FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	1. By Serving feedback form or			
	2. Thru cellphone number:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09171085509 – Portia O. Rogando			
How feedbacks are processed?	1. By asking short and simple questions.			
	2. Think of the experience it will give to the client.			
	3. Pay attention to the feedback.			
	4. Turn feedback into action.			
	5. Share the feedback to all members of the office.			
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)			
	2. Write your complaint in the form and include the following:			
	A. Complete name of the person you are complaining			
	B. Date			
	C. Time			
	3. Drop the filled-up complaint form in the drop box located at PACD or			
How complaints are processed?	1. Get The reason of complaints.			
	2. Listen to the complainant.			
	3. Acknowledge the problem.			
	4. Get the facts.			
	5. Offer a solution.			
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09171085509 – Portia O. Rogando			



# **CITY HEALTH OFFICE**

**PPMD TB DOTS Services** 



#### **PPMD TB-DOTS**

The PPMD TB-DOTS offers casefinding, sputum examination, and treatment for TB; promotes health and quality of life by preventing, controlling the spread of Tuberculosis

#### **Casefinding**

Office or Division:	PPMD TB DOTS SE	ERVI	CES		
Classification:	Simple				
Type of Transaction:	G2C				
Who may avail:	Presumptive TB (with	th co	ugh	of 2 weeks or mo	re)
CHECKLIST OF REQU	IREMENTS:			WHERE TO	SECURE:
Referral Forms			СН	O/Public/Private	;
Chest X-Ray			СН	O/Private	
DSSM/Gene-Expert			СН	O/BDRL - BRTT	ГН
CLIENT STEPS	AGENCY ACTIONS	FE TO PA	BE	PROCESSING TIME	PERSON RESPONSIBLE
<ul> <li>1. The client proceeds to PPMD Unit for the services needed for TB management and treatment.</li> <li>2. The client proceeds to PPMD Unit for sputum collection.</li> </ul>	<ul> <li>1.Interviews and evaluate clients for the services need.</li> <li>2. Client/Patient is given a sputum cup and proceeds to induction room for proper instruction on sputum collection</li> </ul>	Nor		20 mins 15 mins.	Nurse III Nurse Attendant I Medical Technologist II Nurse III Nurse Attendant I Medical Technologist I
3. The client/patient proceeds to PPMD Unit for registration/consultation/admission (client/patient with sputum positive result).	3 .Client/Patient is instructed to proceed to the process-ing area to submit	Nor	ie	15 mins.	<i>Nurse III Nurse</i> Attendant I



	opu tum opoci			1
	spu-tum speci- men.			Medical Technologist I
<ol> <li>The client/patient proceeds to PPMD Unit for registration/ consultation (client with sputum negative result.) and for certification of treatment.</li> </ol>	<ol> <li>Profiling and history taking of client/patient were taken for baseline re- cord.</li> </ol>	None	10 mins.	Nurse III
	4.1 Client/Patient is referred to doctor for medical con- sultation.	None		City Health Physicians
	4.2 Client/Patient is admitted and provided with NTP drugs for treatment	None	15 mins.	Nurse III Nurse Designate
	regimen.			Medical Technologist II
				Nurse Attendant
	4.3 Client/Patient is given scheduled date	None	5 mins.	Nurse III
	of sputum col- lection and undergo health			Nurse Designate
	education			Medical Technologist II
				Nurse Attendant
	4.4 Client/Patient Is given scheduled date of sputum collection and	None	5 mins.	
	undergo health education regarding			Nurse III



4.5Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patientNone5 minsCity Health Physicians Nurse III5.Client will be prescribed medicines or will be given health education.5.1If needed, client/patient will be prescribed with medicines or will be given health education.None30 mins.Nurse III5.Client will be prescribed medicines or will be given health education.5.1If needed, client/patient will be prescribed with medicines or will be given health education.None30 mins.Nurse III5.2.Client/Patient is instructed when to return for follow-up check-up.None10 mins.Nurse III	Queeing/Waiting time is not included	ļ			ļ
4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patientNone s mins5 minsCity Health Physicians Nurse III Nurse Designate5. Client will be prescribed medicines or will be given health education.5.1 If needed, client/patient will be prescribed with medicines or will be given health education.None s 30 mins.30 mins.5. Client will be prescribed medicines or will be given health education.5.1 If needed, client/patient will be prescribed with medicines or will be given health education.None s 30 mins.30 mins.6. Client Proceed to CTO for payment6.1 Client/Patient requested to pay to City Treasurer's Office (CTO) for medical.None s minutes10 mins.6. Client Proceed to CTO for payment6.1 Client/Patient requested to pay to City Treasurer's Office (CTO) for medical.P50.00 s minutes2 minsC/o City Treasurer's Office (CTO) for medical.6. 2 Signing of the medical certificate.6.1 Signing of the medical certificate.5 minutesCHO Officer		Total:	P50.00		
4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patientNone5 minsCity Health Physicians Nurse III Nurse Designate5. Client will be prescribed medicines or will be given health education.5.1 If needed, client/patient will be prescribed with medicines or will be given health education.None30 mins.Nurse Attend5. Client Proceed to CTO for payment5.2. Client/Patient requested to pay to City Treasurer's Office (CTO) forNone10 mins.Nurse III6. Client Proceed to CTO for payment6.1 Client/Patient requested to pay to City Treasurer's Office (CTO) forP50.002 minsC/o City Treasurer's Office (CTO) for		medical certificate.			CHO Officer
4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patient       None       5 mins       City Health Physicians         Nurse III       Nurse III       Nurse III       Nurse Designate         5. Client will be prescribed medicines or will be given health education.       5.1 If needed, client/patient will be prescribed with medicines or will be given health education.       None       30 mins.       Nurse III         5.2. Client/Patient is instructed when to return for follow-up       None       10 mins.       Nurse III		requested to pay to City Treasurer's Office (CTO) for	P50.00	2 mins	Treasurer's
4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patientNone5 minsCity Health Physicians Nurse III5 . Client will be prescribed medicines or will be given health education.5.1 If needed, client/patient will be prescribed with medicines or will be given healthNone30 mins.Nurse III		is instructed when to return for follow-up			Nurse III
4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the patientNone5 minsCity Health PhysiciansNurse III Nurse Designate	medicines or will be given health	client/patient will be prescribed with medicines or will be given health	None	30 mins.	Nurse III
treatment plan		and nutrition. 4.5 Client/Patient is asked for the chest x-ray result and CHO evaluates the x- ray result of the	None	5 mins	Physicians Nurse III Nurse

NOTICE: The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.



FEEDBACK AND COMPLAINT MECHANISM					
How to send a feedback:	1. By Serving feedback form or				
	2. Thru the following cellphone numbers:				
	09771833638 - Dr. Fulbert Alec R. Gillego				
	09177237060 - Cristina P. de Leon				
How feedbacks are processed?	1. By asking short and simple questions.				
	2. Think of the experience it will give to the client.				
	3. Pay attention to the feedback.				
	4. Turn feedback into action.				
	5. Share the feedback to all members of the office.				
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)				
	2. Write your complaint in the form and include the following:				
	A. Complete name of the person you are com-				
	Plaining				
	B. Date				
	C. Time				
	3. Drop the filled-up complaint form in the dropbox				
	located at PACD or				
	4. Thru cellphone numbers above.				
How complaints are processed?	1. Get The reason of complaints.				
	2. Listen to the complainant.				
	3. Acknowledge the problem.				
	4. Get the facts.				
	5. Offerr a solution.				
	6. Talk to the concerned employee, and give a disciplinary action, if needed contact information of: 09771833638 - Dr. Fulbert Alec R. Gillego				
	09177237060 - Cristina P. de Leon				



# **CITY HEALTH OFFICE**

X-ray Unit



#### **X-RAY SERVICES**

Office or Division:	X-RAY UNIT					
Classification:	Simple					
Type of Transaction:	G2C					
Who may avail:	General Public					
		WI	HERE TO SEC	URE:		
Official Receipt (OR)		City Treasure	r's Office (CTO)			
Philhealth ID/MDR of LGU paid (renewed, r						
Examination Request		City Health Of	ffice Doctor			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Client proceeds to X- ray Unit, present examination request.	1. Receives accomplish-ec request.	None I	2 mins	Radiologic Technologist Clerk RadTech		
<ul> <li>2.Client proceeds for pay-ment of the procedure and pays the fee</li> <li>OR</li> <li>Client presents Phil-Health Number.</li> </ul>	<ul> <li>2. Gives <ul> <li>payment slip</li> <li>to client and</li> <li>ins-tructs</li> <li>client to pay</li> <li>the fee</li> </ul> </li> <li>OR <ul> <li>Receives and</li> <li>record the</li> <li>Phil-health</li> <li>Number.</li> </ul> </li> </ul>	X-Ray: P120.00 Ultrasound: P900.00	4 mins.	City Treasurer's Office (CTO)		



					CIAL	
3.	Client/Patient	3. Give verbal		3 mins.	Radiologic	
	presents proof of	ins-truction for	None		Technologist	
	payment and	prepa-ration	None		Clerk	
	proceeds to	prior to pro-			Radiologic	
	Radiology room on	cedure			Technician	
	scheduled date					
	4.Client Patient	4.1 Registers		2 hours	Contractual	
	return on the	patient's name			Sonologist	
	scheduled date for	and prepares				
	re-lease of result	for the x-ray or				
		ultra-sound				
		procedure				
		4.2 Instructs	None	2 mins.	Radiologic	
		client/patient			Technologist	
		when to return			Clerk	
		for the result.			Radiologic	
					Technician	
		Total:		2 hours and		
				11 mins		
Qu	Queeing/Waiting time is not included.					
Fo	For any inquiries/comment/complaint, please contact: Guadalyn D. Nuyda-09982199815					
I						

#### NOTICE:

The number of minutes per service may vary depending on the level of care needed to be given to a patient/client and depending on the requirements presented.



FEEDBACK AND COMPLAINT MECHANISM				
How to send a feedback:	1. By Serving feedback form or			
	2. Thru the following cellphone number:			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09982199815 - Guadalyn G. Nuyda			
How feedbacks are processed?	1. By asking short and simple questions.			
	2. Think of the experience it will give to the client.			
	3. Pay attention to the feedback.			
	4. Turn feedback into action.			
	5. Share the feedback to all members of the office.			
How to file a complaint?	1. Secure a Form 3 (Complaint Form) from the Public Assistance and Complaint Desk (PACD)			
	2. Write your complaint in the form and include the following:			
	A. Complete name of the person you are com-			
	Plaining			
	B. Date			
	C. Time			
	3. Drop the filled-up complaint form in the dropbox located at PACD or			
	4. Thru celphone numbers above			
How complaints are processed?	1. Get The reason of complaints.			
	2. Listen to the complainant.			
	3. Acknowledge the problem.			
	4. Get the facts.			
	5. Offerr a solution.			
	<ol> <li>Talk to the concerned employee, and give a disciplinary action, if needed contact information of:</li> </ol>			
	09771833638 – Dr. Fulbert Alec R. Gillego			
	09982199815 - Guadalyn G. Nuyda			



# City Human Resource & Management Office (CHRMO)

**External Services** 



• External Services

#### 1. Recruitment, Selection and Placement

The RSP System is based on Qualification Standards (QS).

Office or Division:	Recruitment, Selection and Placement (RSP) Division					
Classification:	Highly Technical		<b>`</b>	,		
Type of	Government to Client (G2C), Government to Government					
Transaction:	(G2G)					
Who may avail:	City Employees ar	nd other a				
CHECKLIST OF R			WHERE TO S	ECURE		
<ul> <li>Fully accomplishe Sheet (PDS) with size picture (CS F Rev. 2017) and W Sheet</li> <li>Performance Ratin position for 1 year</li> <li>Copy of Certificate Eligibility/Rating/L applicable</li> <li>Copy of Transcrip</li> </ul>	recent passport- form No. 212, /ork Experience ng in the present f (if applicable) e of icense (if	Office w	ownloadable via o here he/she is as f the CSC or PRC where graduated	signed		
		FEES		DEDOON		
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit application via	1.1. Accepts the application	None	15 mins.	Officer of the Day		
email or by approaching the Officer of the	1.2. Evaluates the application	None	2 hrs.	Chief, RSP Division		
Day				Administrative Officer V		
	1.3. Conducts interview	None30 minsChief, RSPDivision				
				Administrative Officer V		
				CGDH I/CHRMO		
	1.4. Undergoes selection	None	10 days	Chief, RSP Division		



	processes			
	together			CGDH I/CHRMO
	with the other applicants			HRMPSB
<ol> <li>If selected, comply with the requirements</li> </ol>	2.1 If selected by appointing authority,	None	15 days	Chief, RSP Division Administrative
	appointment will be issued			Officer V CGDH I/CHRMO
				Appointing Authority
	2.2 Sends letters to the applicants	None	5 days	Chief RSP
	who did not qualify and			CGDH I/CHRMO
	are not selected			
	TOTAL:	None	30 days,2 hrs. & 45 mins	

#### Notes:

- Applications with incomplete documents shall not be processed or evaluated.
- Applications submitted before the publication and after the deadline (as stated in the publication of vacant positions in the CSC website) shall no longer be entertained.
- The specific position applied for must be indicated in the application/s including the item number and place of assignment. Without such specifications, applications shall be disregarded.
- The City Government of Legazpi strictly implements the so-called "Equal Opportunity Principle". As such, all qualified applicants will receive consideration for employment regardless of age, sex, sexual orientation, gender identity and gender expression (SOGIE), civil status, religion, ethnicity, political affiliation, disability and work-related injuries.

#### 2. Work Immersion/ On-the-Job Trainees (WI/OJT) Deployment

The City Human Resource Management Office facilitates the deployment of Work Immersion/On-the-Job Trainees.



Office or Division:	Learning and Development (L&D) Division					
Classification:	Highly Technical					
Type of	Government to Business Entity (G2B), Government to					
Transaction:	Government (G2G)					
Who may avail:	Schools					
CHECKLIST OF R	REQUIREMENTS		WHERE TO S	SECURE		
	proved by the City school year starts	Chief,	Concerned L&D Division			
		FEES	<b>BBBBBBBB</b>	DEDOON		
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submits requirements	1.1. Receives requirements	None	5 mins.	Officer of the Day		
	1.2. Prepares and reviews Memorandum	None	1 day	Chief, L&D Division		
	of Agreement (MOA)			CGDH I/ CHRMO		
	1.3. Processes MOA	None	15 days	Chief, L&D Division		
				CGDH I/ CHRMO		
				SP		
				City Mayor		
	1.4. Conducts orientation	None	1 hr. & 30 Minutes	Chief, L&D Division		
	1.5. Deploys the students to concerned	None 1 hr. Administrative Officer II				
	offices			Chief, L&D Division		
<ol> <li>Approach the Officer of the Day and</li> </ol>	2.1. Prepares and review the requested	None	10 minutes	Administrative Officer II,		
request for issuance of	document			Chief, L&D Division		



Certificate of Completion	2.2. Signs the document	None	5 Minutes	Chief, L&D Division
	2.3. Records and releases the requested documents	None	5 Minutes	Administrative Officer II Chief, L&D
	TOTAL:	None	16 days, 2 hrs. & 52 minutes	Division



# **City Human Resource & Management Office**

## **Internal Services**



#### • Internal Services

#### 1. Preparation of Contract of Services or Appointments of Job Orders

CHRMO, upon receipt of the complete requirements, prepares, reviews and forwards the contract and appointment to concerned heads of offices for signature.

Office or Division:	Recruitment, Selection	and Plac	cement (RSP) Div	vision
Classification:	Complex			
Type of Transaction:	Government to Client (C			vernment (G2G)
Who may avail:	City Employees and oth	er appli	cants	
CHECKLIST O	F REQUIREMENTS		WHERE TO S	ECURE
Endorsement Lo     Chief of Office	etter from concerned	Office	Concerned	
Sheet (PDS) wi	hed Personal Data th recent passport- S Form No. 212, Rev.	Client Drug T	est Clinic	
Recent Drug Te	est Result			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requirements	1.1. Receives requirements if complete	None	20 mins.	Officer of the Day
	1.2. Prepares and signs contract/ appointment	None	2 hrs.	Administrative Aide I
				Administrative Officer V
				CGDH I/CHRMO



		1.3. Transmits to concerned offices for approval/signature of concerned chiefs of offices	None	5 days	Administrative Aide I Administrative Officer V
2.	Sign the contract/ appointment In the case of the contract, client should cause it to be notarized.	<ol> <li>Records and releases a certified true copy of contract/ appointment</li> </ol>	None	40 mins.	Officer of the Day
		TOTAL:	None	5 days & 3 hrs.	

# 2. Preparation of Service Records, Certificate of Employment and Other Certifications

CHRMO updates, prepares, reviews and releases service record, certificate of employment and other certifications, upon receipt of request/instruction.

Office or Division:	Records Management Division (RMD)				
Classification:		Simple			
Type of Transaction:	Government to Government (G2G)				
Who may avail:	City Employees				
CHECKLIST OF R	EQUIREMENTS		WHERE TO S	SECURE	
None		None			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Approach the Officer of the Day and request	1.1. Records the request in the logbook	None	10 minutes	Officer of the Day	
for Service Record, Certificate of	1.2. Prepares and reviews the	None	1 day	Administrative Officer IV	
Employment and Compensation, Certificate of	requested document/s			Chief, RMD Division CGDH I/CHRMO	



Good Moral	1.3. Signs the	None	10 minutes	Chief, RMD
Character	document/s			Division
and/or other				
Certifications				CGDH I/CHRMO
	1.4. Records and	None	10 minutes	
	releases the			Officer of the Day
	requested			,
	document/s			
	TOTAL:	None	1 day &	
			30 mins.	

#### 3. Preparation of Travel Orders of City Employees relative to Learning and Development (L&D) Interventions

Upon request/instruction, CHRMO prepares travel orders of City employees relative to L&D interventions.

Office or Division:	Learning and Devel	opment	(L&D) Division	
Classification:	Simple			
Type of Transaction:	Government to Government (G2G)			
Who may avail:	City Employees			
CHECKLIST OF F	REQUIREMENTS		WHERE TO S	SECURE
<ol> <li>Letter-invitation p L&amp;D/CPD</li> <li>Letter from the C recommending th seminar, training, summit</li> </ol>	hief of Office hie attendee/s to the	AO/PICAR of office/division where the employee is assigned, re-assigned or detailed the		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Submit the requirements at least 1 week</li> </ol>	1.1. Receives and checks the requirements	None	10 minutes	Officer of the Day
before the date of seminar, training,	1.2. Assesses and evaluates employees	None	10 minutes	Administrative Officer II
convention or summit	recommended	04.0		Chief, L&D Division



	by the Division Chief			CGDH I/CHRMO
				Concerned Division Chief
	1.3. Prepares and reviews the travel order	None	20 minutes	Administrative Office II
				Chief, L&D Division
				CGDH I/CHRMO
2. Retrieve the travel order, for approval of the Chief of Office concerned and	<ol> <li>Upon return, records and releases the travel order</li> </ol>	None	2 days	Officer of the Day
the City Mayor				
	TOTAL:	None	2 days & 1 hr.	

#### 4. Processing Application for Leave

Submitted applications for leave are processed, with leave credits computed, reviewed and certified.

Office or Division:	Records Managen	nent Division				
Classification:	Complex	Complex				
Type of Transaction:	Government to Go	vernment (G2G)				
Who may avail:	City Employees					
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE				
included in forced leav CHRMO	pies) e prced Leave are the schedule of e submitted to the	AO/PICAR of office/division where the employee is assigned, re-assigned or detailed				
<ol> <li>Special Leave</li> <li>Sick Leave</li> </ol>	Privileges (SLP)					



		-		CIAL SY
exceeds 5 5. Maternity/Pate 6. Monetization c - If monetiza 10 days ➤ Letter o by the 0 the reas	ernity Leave of Leave Credits ition is more than of Intent approved City Mayor, citing son for availment Form/s signed by plantilla ee/s			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Prepare and submit properly filled up Application for Leave and other</li> </ol>	1.1. Receives application and other requirements (if complete)	None	15 mins.	Officer of the Day
requirements	1.2. Prepares, reviews and certifies number of leave credits	None	1 hour	Focal Person, Leave Administration Administrative Officer IV Chief, RMD Division CGDH I/ CHRMO
	1.3. Returns the application to be approved by the Chief of Office	None	15 mins.	Officer of the Day
2. Upon approval, return the application for leave	2.1. Receives and records the application	None	15 mins.	Officer of the Day



2.2. Releases the 2 copies and retains 1 copy for filing	None	15 mins.	Officer of the Day
2.3. If the monetization is allowed and requirements are complete, prepares the necessary financial documents, for processing and release of concerned offices (City Budget Office, City Accountant's Office and City Treasurer's Office)	None	5 days	Focal Person, Leave Administration Administrative Officer IV Chief, RMD Division CGDH I/CHRMO
TOTAL:	None	5 days & 2 hrs.	

#### 5. Processing Retirement

CHRMO facilitates the documents needed for retirement of retiring employees.



Office or Division:	ision: Records Management Division			
Classification:	Highly Technical			
Type of				
Transaction:	Government to Go	overnmen	it (G2G)	
Who may avail:	Retiring City Empl	oyees		
CHECKLIST OF RI	EQUIREMENTS		WHERE TO S	
<ul> <li>Optional Retirement         <ul> <li>Letter of Intent to Retire with the approval of the City Mayor</li> </ul> </li> <li>Mandatory Retirement         <ul> <li>No requirements</li> </ul> </li> </ul>		where the assigned	or AO/PICAR of c ne employee is as d or detailed	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. If it is Optional Retirement,	1.1. Receives requirement	None	10 minutes	Officer of the Day
submit the requirement. If it is mandatory, no action needed.	<ul> <li>1.2. Updates/re- computes/ reviews number of leave credits earned starting from the date of employment</li> <li>1.3. Prepares and reviews</li> </ul>	None	5 days 1 day	Focal Person, Leave Administration Administrative Officer IV Chief, RMD Division CGDH I/CHRMO Focal Person, Leave
	the retirement and financial documents 1.4. Transmits	None	5 days	Administration Administrative Officer IV Chief, RMD Division CGDH I/CHRMO Officer of the Day
	the retirement and financial documents, for processing,			Focal Person, Leave Administration



approval			Administrative
and release by			Officer IV
concerned offices			Chief, RMD Division
			CGDH I/CHRMO
TOTAL:	None	10 days &	
		10 mins.	

FEEDBACK A	ND COMPLAINTS MECHANISM
How to send feedback?	Answer the Feedback Form located in the Frontline Desk of the CHRMO, then place it inside the drop box or personally hand it over to the Officer of the Day (OD). CHRMO Contact Numbers: (052) 431-3454 0912-158-3909
How feedback is processed?	The L&D Division verifies the nature of the queries and feedback within one (1) working day. The same shall be referred to the concerned Division. Upon receipt of reply from the concerned Division, the Client will be informed via email, text or phone call. For follow-ups or inquiries, the contact information are as follows: <u>chrmo.legazpicity@gmail.com</u> (052) 431-3454 0912-158-3909
How to file complaint?	<ul> <li>To file a complaint against the CHRMO, provide the following details through writing on the Complaint Form (CSC Form #3), or via e-mail:</li> <li>Full name, address and contact information of the Complainant</li> <li>Narrative of the Complaint</li> <li>Evidences</li> <li>Name of the Person being Complained</li> </ul>



	CIAL 2
	Send all complaints against the CHRMO, through writing on the COMPLAINT FORM (CSC Form #3) or to <u>chrmo.legazpicity@gmail.com</u>
	For follow-ups or inquiries, the contact information are as follows: (052) 431-3454 0912-158-3909
How complaints are processed?	All complaints received against the CHRMO will be processed by the L&D Division.
	The L&D reads (Complaint Form - CSC Form 3), browses, evaluates and determines the complaints received on a daily basis. The L&D shall coordinate with the concerned Division to answer the complaint and shall investigate, if necessary. After the concern has been addressed or after conduct of investigation, the L&D shall prepare an Incident Report and refer it to the Legal Office, for further review. Then the Legal Office shall forward its findings to the City Mayor, copy furnished the CHRMO, for appropriate action &/or final decision. The L&D shall give the feedback to the clients via email, or through writing.
Contact Information of CITY	MR. DARLITO A. PEREZ, JR.
HUMAN RESOURCE MANAGEMENT OFFICE	CGDH I/ City Human Resource Mgt. Officer
(CHRMO)	DR. MARITES V. TAGLE-PASA
	Supervising Administrative Officer
	Chief, Learning & Development (L&D) Division
	Office Number: (052) 431-3454
	Cellphone Number: 0912-158-3909
	Email Address: chrmo.legazpicity@gmail.com



# **CITY LEGAL OFFICE**

# Services



#### Legal Advice

Office or Division:	City Legal Offic	се			
Classification:	Government				
Type of Transaction:	Advice or Inqu	iry			
Who may avail:	Residents of the	ne City of Lega			
CHECKLIST OF REQUIREM	IENTS		WHERE TO SEC	CURE	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Client's request and queries initially determined within 5 minutes upon approval</li> </ol>	Client is referred to the City Legal Office within 5 minutes upon arrival	None	10 mins.	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV	
2. Client's request for documentary legal service referred to the Legal Officer	advice/couns	None	1 hour	Atty. Marietta Belgica-Cledera City Legal Officer	
TOTAL:		None	1 hour and 10 mins		

## Documentary Legal Services

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Documentary Se	rvices		
Who may avail:	Residents of the	City of Lega	zpi	
CHECKLIST OF REQU	IREMENTS		WHERE TO SE	CURE
	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEPS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
1. File a request for documentary legal services with all the pertinent files necessary	Documentary legal services prepared to clients within 10 days upon receipt of request together with all the necessary papers	None	10 days	Atty. Marietta Belgica-Cledera City Legal Officer
TOTAL:		None	10 days	



## Legal Opinion

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Legal Inquiry/Aid			
Who may avail:	Residents of the Cit	y of Legazpi		
CHECKLIST OF REC	QUIREMENTS		WHERE TO SE	CURE
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Request for legal opinions received and referred to the Legal Officer</li> </ol>	Legal opinion rendered within 30 days upon receipt of request/instruction together with the necessary documents.	None	30 days	Atty. Marietta Belgica-Cledera City Legal Officer
	Legal opinion filed within the day after rendition by the legal officer	None	10 mins.	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL:		None	30 days and 10 mins	

## Litigation

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Legal Aid			
Who may avail:	Residents of the	he City of Lega	zpi	
CHECKLIST OF REQUIREM	MENTS WHERE TO SECURE			URE
	AGENCY FEES TO PROCESSING PERSON			



CLIENT STEPS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
1. Pleadings/motions/M emoranda for all active cases received and referred to the Legal Officer	Necessary pleadings/ Motions/me- moranda for all active cases prepared before the deadline with no omission	None	1 hour	Maricris Mendina Administrative Aide VI
<ol> <li>Necessary pleadings/ Motions/memoranda for all active cases prepared before the deadline with no omission</li> </ol>	Scheduled hearing of all active cases attended to	None		Atty. Marietta Belgica-Cledera City Legal Officer Atty. Raphaela Albor Attorney IV
TOTAL:		None	1 hour	

### Preliminary Investigation on Complaints against City Employees

Office or Division:	City Legal Office				
Classification:	Government				
Type of Transaction:	Legal Aid				
Who may avail:	Residents of the Cit	y of Legazpi			
CHECKLIST OF REC	QUIREMENTS		WHERE TO SE	CURE	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	Preliminary Investigation on complaints against City Employees commenced within 15 days from receipt of Local Chief Executive's instruction and terminated within 20 days therefrom	None	15 days	Atty. Marieta Belgica- Cledera City Legal Officer Atty. Raphaela Albor Attorney IV	
<ol> <li>Preliminary Investigation on complaints against City Employees</li> </ol>	Minutes of Preliminary Investigation recorded and transcribed within 3 days after each proceeding	None	3 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV	



	Preliminary Investigation report prepared within 5 days from the termination of the Preliminary Investigation	None	5 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL:		None	23 days	

### Formal Investigation on Complaints against City Employees

Office or Division:	City Legal Office					
Classification:	Government					
Type of Transaction:	Legal Aid					
Who may avail:	Residents of the Cit	ty of Legazpi				
CHECKLIST OF REC	QUIREMENTS		WHERE TO SE	ECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
<ol> <li>Formal Investigation on complaints against City Employees</li> </ol>	Formal Investigation on complaints against City Employees commenced within 15 days from receipt of Local Chief Executive's instruction and terminated within 30 days therefrom	None	15 days	Atty. Marieta Belgica- Cledera City Legal Officer		
	Minutes of Formal Investigation recorded and transcribed within 3 days after each proceeding	None	3 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV		



	Formal Investigation report prepared within 15 days from the termination of the Preliminary Investigation	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL:		None	33 days	

# Show Cause Orders/Closure/Lift of Closure Orders of Business Establishments

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Public/Administra	tive Transac	tion	
Who may avail:	Residents of the (	City of Legaz	zpi	
CHECKLIST OF REQU	JIREMENTS		WHERE TO SI	ECURE
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Show cause orders/closure orders/lift of closure orders of business establishments received and referred to the Legal Officer upon receipt of endorsement from Permits and Licenses Division/Mayor's Office/ City Health Office with no omission	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
1. Show cause orders/closure orders/lift of closure orders of business	Show cause orders/closure orders/lift of closure orders			Mariaria I. Mandina
establishments	of business establishments prepared, recorded, filed within 15 days	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay



	upon receipt of the endorsement			Administrative Aide IV
	Show cause orders/closure orders/lift of closure orders of business establishments released within 15 days to task force	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL:		None	45 days	

#### **Demand Letters / Notice to Vacate**

Office or Division:	City Legal Office				
Classification:	Government				
Type of Transaction:	Public/Administrative Transaction				
Who may avail:	Residents of the (	City of Legaz	pi		
CHECKLIST OF REQU		, ,	WHERE TO S	ECURE	
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON	
	ACTIONS	BE PAID	TIME	RESPONSIBLE	
	Demand letters/notice to vacate received and referred to the Legal Officer	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T.	
	the Legal Officer			Baccay Administrative Aide IV	
1. Demand Letters/Notice to Vacate	Demand letters/notice to vacate prepared, recorded, and filed within 15 days from receipt of endorsements from the CTO/Mayor's Office with no omission	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV Atty. Marietta Belgica- Cledera City Legal Officer Atty. Raphaela Albor Attorney IV	



	Demand letters/notice to vacate released to task force/concerned offices within 15 days from receipt of endorsements from the CTO, Mayor's Office with no omission	None	15 days	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL		None	45 days	

### Review of MOAs/MOUs/Contracts/Draft Ordinances

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Public/Administrative Transaction			
Who may avail:	Residents of the City of Le	egazpi		
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide a copy of	MOAs/MOUs/Contracts/ Draft Ordinances reviewed received within 5 minutes and referred to the Legal Officer	None	5 mins	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
the MOAs/MOUs/Contra cts/Draft Ordinances as necessary documents in the request for review	MOAs/MOUs/Contracts/ Draft Ordinances reviewed within 7 working days upon receipt of request/instruction and referred to the appropriate office within the day	None	7 day	Atty. Marietta Belgica-Cledera City Legal Officer Atty. Raphaela Albor Attorney IV
	Reviewed			



	MOAs/MOUs/Cor Draft Ordi referred to appropriate office the day	inances the	None	1 day	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
TOTAL			None	8 days and 5 mins	

### Preparation / Submission of Unit Work Plan/ IPCR/ DPCR/ Targets

Office or Division:	City Legal Office			
Classification:	Government			
Type of Transaction:	Public/Administrative Transaction			
Who may avail:	Residents of the City of Le	egazpi		
CHECKLIST OF	<b>REQUIREMENTS</b>		WHERE TO SE	CURE
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Preparation/ Submission of Unit Work Plan/IPCR/DPCR/ Targets	Unit/Office work plan prepared, reviewed, discussed, finalized and submitted 15 days before due date with no omissions	None	15 days before due date	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV Atty. Marietta Belgica-Cledera City Legal Officer Atty. Raphaela Albor Attorney IV
	IPCR/DPCR prepared, reviewed, finalized and submitted 15 days before due date with no omission	None	15 days before due date	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV



TOTAL	None	30 days	Albor Attorney IV
			Atty. Raphaela Albor
			Atty. Marietta Belgica-Cledera City Legal Officer

#### Incoming and Outgoing Communications/ Request/ Legal Opinion/ Motions/ Orders/ Pleadings/ MOA, etc.

Office or Division:	City Legal Office			
Classification:	Government			
Type of	Public/Administrative Trar	nsaction		
Transaction:				
Who may avail:	Residents of the City of Le	egazpi		
CHECKLIST OI	F REQUIREMENTS		WHERE TO SE	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Incoming and outgoing communications/Req uest for legal opinion/ motions/orders/Plead ings/MOAs, etc.	Incoming documents/ communications recorded, filed and forwarded/acted upon within 2 hours upon receipt of request/instruction with no omission	None	2 hours	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV
	Outgoing documents/ communications dispatched/ recorded/ filed within 8 hours upon instruction	None	8 hours	Maricris L. Mendina Administrative Aide VI Shienna Mae T. Baccay Administrative Aide IV



TOTAL		10 hours	

FEEDBACK AND COM	PLAINTS MECHANISM		
How to send feedback	Through the client's form		
How feedbacks are processed	Through the client's form		
How to file a complaint	Submission of Letter Complaint from clients		
How complaints are processed	The Officer-in-charge evaluates each complaint. Upon evaluation, the said officer shall forward the complaint to the City Legal Officer for their action. Thereafter, the Officer-in-Charge will give feedback to the client.		
Contact Information of CCB, PCC, ARTA	Brgy. 13 – Ilawod West, Rizal Street 2 <sup>nd</sup> floor,City Hall Compound, Albay, Philippines Contact Number: 09603518400		
	ATTY. MARIETTA M. BELGICA- CLEDERA City Legal Officer ATTY. RAPHAELA G. ALBOR Attorney IV		

Office	Address	Contact Information
City Legal Office	City Hall Compound, Old Albay District, Legazpi City	legazpicitylegaloffice@gmail.com 0960 351 8400



**Administrative Division** 



### 1 Incoming Communications

Receiving of incoming communications and documents.

Office or Division:	ADMINISTRATIVE DIVISION	
Classification:	Simple	
Type of Transaction:	Backline Service	
Who may avail:	Clients, Other Offices/Agencies	

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE		
Letters, transmittals, memos, etc.	Client, Other offices/agencies		
Documents, attachments, etc.	Client, Other offices/agencies		

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Client submits communication at the Office, or sends e-file copy of communication to CPDO email address or Facebook page.	AD Staff acknowledges receipt and records communication in logbook then, forwards to Office Head/Assistant/OIC for appropriate action.		2 minutes	Admin Division Staff
	Office Head/Assistant/OIC acts on communication or refers to Concerned Personnel.		2 minutes	Office Head/ Assistant/OIC
	Concerned Personnel acts upon communication.		10 minutes	Concerned Personnel
		Total	14 mins.	



### 2 Outgoing Communications

Releasing of outgoing communications and documents.

Office or Division:	ADMINISTRATIVE DIVISION	
Classification:	Simple	
Type of Transaction:	Backline Service	
Who may avail:	Clients, Other Offices/Agencies	

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Letters, transmittals, memos, etc.	CPDO
Documents, attachments, etc.	CPDO

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
	AD Staff receives outgoing communication and records in logbook		2 minutes	Admin Division Staff
	AD forwards to Driver/Concerned Personnel for immediate dispatch, or sends communication to addressee's email address.		10 minutes	Driver/ Concerned Personnel
	Addressee acknowledges receipt of communication from Driver/Concerned Personnel or from email.		2 minutes	Driver/ Concerned Personnel
		Total	14 mins	



### HOUSING AND HOMESITE REGULATION DIVISION



### 1 Simple Subdivision Approval (SSA)

Approval of lot/land partition/segregation and development, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION		
Classification:	Highly Complex		
Type of Transaction:	Frontline Service		
Who may avail:	Any person with the intent to subdivide their lot/land		

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Six (6) sets of the following:	
Documents duly signed and sealed by a	Licensed Geodetic Engineer
licensed Geodetic Engineer	
a. Subdivision Plan (schematic plan)	
showing the proposed layout.	
b. Vicinity Map	
<ul> <li>c. Survey Plans of Lot as described in TCT.</li> </ul>	
Other reference approved lot plans if	DENR-LMS
necessary.	
Certified true copies of Title/s (TCT)	LRA-Registry of Deeds
Certified true copies of Tax Declaration	City Assessor's Office
Deed of Sale/Deed of Donation, Deed of	
Extrajudicial Settlement/Deed of Self-	
adjudication, Memorandum of Agreement,	
Subdivision Agreement	
Right to use of right-of-way for access road	
when applicable	
Special Power of Attorney or Corporate	Corporate Secretary, for corporations
Secretary Certificate	
Real Property Tax Clearance	City Treasurer's Office
Site Zoning/Land Use Classification	CPDO-Zoning Division
Certification	
Barangay Resolution/Certification supporting	Concerned Barangay
the proposed project	
Other pertinent legal/technical documents	
that may be required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant sends an electronic file copy/picture of documentary requirements to	HHRD Staff acknowledges receipt and evaluates submitted application		30 minutes	HHRD Staff



HHRD's email address or CPDO       If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant's email address or CPDO revelution to HHRD's email address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application is address or CPDO recember of the submitted application.       Processing recember of the submitted application is address or CPDO recember of the submitted application.       HHRD Staff         HHRD Staff officially receives the application.       HHRD Staff officie and forwards endorsement/ transmittal letter to crite or orments/ recommentations.       So minutes       HHRD Staff         HHRD Staff conducts coular inspection/on-site investigation with corresponding report/ documentation.       30 minutes       HHRD Staff         Applicant receives and endorses findings and period application the re-submitted application the resubmitted application then, representations to applicant.       30 minutes       HHRD Staff         Applicant receives and endorses findings and representations to applicant.       HRRD Staff receives the re-submitted application then, represent and complies with findings and period transmitted application t					CIALS
Facebook Page.If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.5 minutesHHRD StaffIf the submitted application is notice of Deficiency to Applicant's email address or CPDO Facebook Page.Processing Fee - Php 2,800.00 per ha2 minutesHHRD StaffIf the submitted application.Processing Fee - Php 1,500.00 per ha2 minutesHHRD StaffIf the submitted application.Processing Fee - Php 2,800.00 per ha30 minutesHHRD StaffIf the Subfit prepares and forwards recommendations.Sol minutesHHRD StaffHHRD StaffIf HHRD Staff prepares recommendations.Sol minutesHHRD StaffHHRD StaffIf HHRD Staff receives recommendations.30 minutesHHRD StaffApplicant receives recommendations.30 minutesHHRD StaffApplicant receives and complies with the re-submitted applicant neceives the re-submitted applicant nether,30 minutesHHRD StaffApplicant receives and complies with the re-submitted applicant nether,HRRD Staff receives the re-submitted applicant nether,30 minutesHHRD StaffApplicant receives and complies with the re-submitted the re-submitted the re-submitted30 minutesHHRD StaffApplicant receives and complies with the re-submitted the re-submitted<	HHRD's email				
If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.     5 minutes     HHRD Staff       If the submitted application is COMPLETE, HHRD Staff officially receives the application.     Processing Fee - Php 2,800.00 per ha     2 minutes     HHRD Staff       If the submitted application.     Free - Php 2,800.00 per ha     2 minutes     HHRD Staff       If the submitted application.     Inspection Fee - Php 2,800.00 per ha     30 minutes     HHRD Staff       If the submitted application.     Tansmittal letter to City Legal Office and City Legan Office	address or CPDO				
If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.     5 minutes     HHRD Staff       If the submitted application is COMPLETE, HHRD Staff officially receives the application.     Processing Fee - Php 2,800.00 per ha     2 minutes     HHRD Staff       If the submitted application.     Free - Php 2,800.00 per ha     2 minutes     HHRD Staff       If the submitted application.     Inspection Fee - Php 2,800.00 per ha     30 minutes     HHRD Staff       If the submitted application.     Tansmittal letter to City Legal Office and City Legan Office	Facebook Page.				
application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.Processing Fee - Php 2.800.00 per haHHRD StaffIf the submitted application is complexes transmital letter to City Legal Office and City Legal Office and <td><u>y</u></td> <td>If submitted</td> <td></td> <td>5 minutes</td> <td>HHRD Staff</td>	<u>y</u>	If submitted		5 minutes	HHRD Staff
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	recommendations.	prepares an	<u> </u>		City Mayor
	and complies with	Applicant. HRRD Staff receives the re-submitted		30 minutes	ACPDC
		•••			



		Total	3 hours & 35 mins.	
Applicant receives SSA documents at the Office, or via email.	HHRD Staff records Official Receipt.		2 minutes	HHRD Staff
Applicant pays fees at the City Treasurer's Office or through Legazpi City's Online Services.			10 minutes	City Treasurer's Office
	HHRD Staff issues Order of Payment.		2 minutes	HHRD Staff
	HHRD Staff prepares SP approved application.		30 minutes	HHRD Staff
	endorsement, and forwards the application to Mayor for endorsement to Sangguniang Panlungsod. HHRD Staff prepares SP approved applications.			



#### 2 Preliminary Approval and Locational Clearance (PALC) Application for Residential, Commercial & Industrial Subdivision

Approval of lot/land partition/segregation, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION
Classification:	Highly Complex
Type of Transaction:	Frontline Service
Who may avail:	Any person with the intent to develop their lot/land

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Six (6) sets of the following:	
Documents duly signed and sealed by a licensed Civil Engineer/Architect/Geodetic Engineer/Environmental Planner: a. Subdivision Plan (schematic plan) showing the proposed layout. b. Vicinity Map c. Survey Plans of Lot as described in TCT, signed and sealed by a licensed	Licensed Civil Engineer/Architect Geodetic Engineer/Environmental Planner
Geodetic Engineer Certified true copies of Title/s (TCT)	LRA-Registry of Deeds
Certified true copies of Tax Declaration	City Assessor's Office
Certification of non-tenancy or an affidavit of waiver of tenant if the land is agricultural/pasture land planted to rice and corn	Department of Agrarian Reform
Sangunian Panlungsod (Legazpi) Resolution on re-classification, if existing land use classification is agricultural	Sanggunian Panlungsod (SP)
Right to use or Deed of Sale of right-of-way for access road and other utilities when applicable	
Sworn statement as to the minimum selling price per unit (For BP 220 projects only)	
Deed of Sale/Contract to Sell	
Special Power of Attorney or Corporate Secretary Certificate	Corporate Secretary, for corporations
Real Property Tax Clearance	City Treasurer's Office
Site Zoning/Land Use Classification Certification	CPDO-Zoning Division
Barangay Resolution/Certification supporting the proposed project Other pertinent legal/technical documents	Concerned Barangay
that may be required	



CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
CLIENT STEFS	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
A number of a submatter		DEFAID	-	
Applicant submits application	HHRD Staff		30 minutes	HHRD Staff
documents at the	acknowledges receipt and			
Office, or sends an	evaluates submitted			
electronic file	application			
copy/picture of				
documentary				
requirements to				
HHRD's email				
address or CPDO				
Facebook Page.				
	If submitted	Inspection	5 minutes	HHRD Staff
	application is	Fee - Php		
	INCOMPLETE, or	1,500.00		
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	HHRD Staff issues	Zoning		
	Notice of Deficiency	Certification		
	to Applicant's email	Fee – Php		
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	Official Receipt then,	for Economic		
	prepares and	Housing		
	forwards endorsement/	riousing		
	transmittal letter to	Commercial		
	City Legal Office and	Industrial		
	City Engineering	Subdivision		
	Office for comments/	processing		
	recommendations.	Fee- Php		
		432.00/ha		
	HHRD Staff		4.5 hours to	HHRD Staff
	thoroughly evaluates		5 days	



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	plans and documents			
	HHRD Staff conducts ocular inspection/on-site investigation with corresponding report/ documentation.		1 hour	HHRD Staff
	HHRD prepares and endorses findings/ recommendations to Applicant.		30 minutes	HHRD Staff
Applicant receives and complies with findings and recommendations.	HRRD Staff receives re-submitted application then, prepares endorsement and forwards application to Mayor for endorsement to Sangguniang Panlungsod.		30 minutes	HHRD Staff ACPDC CPDC City Mayor
	HHRD Staff prepares SP approved application.		30 minutes	HHRD Staff
	HHRD Staff issues Order of Payment.		2 minutes	HHRD Staff
Applicant pays fees at the City Treasurer's Office or through Legazpi City's Online Services.			10 minutes	City Treasurer's Office
Applicant receives PALC documents at the Office, or via email.	HHRD Staff records Official Receipt.		2 minutes	HHRD Staff
		Total	5 days 3 hours & 51 mins	



# 3 Development Permit (DP) Application for Residential, Commercial & Industrial Subdivision

Approval of lot/land development, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION
Classification:	Highly Complex
Type of Transaction:	Frontline Service
Who may avail:	Any person with the intent to develop their lot/land

CHECI	KLIST OF REQUIREMENTS	WHERE TO SECURE
	s of the following:	
Documents licensed Ci	s duly signed and sealed by a ivil Engineer/ Architect/ Geodetic Environmental Planner:	Licensed Civil Engineer/Architect Geodetic Engineer/Environmental Planner
b. Site	Profile showing the vertical control designed grade, curve elements and all information needed for construction.	
iii.	Typical roadway section showing relative dimensions and slopes of pavement, gutters, sidewalks, shoulders, benching and others. Details of road showing the required thickness of pavement, sub-grade treatment and sub- base course on the design analysis.	
iv.	Details of roadway miscellaneous structures such as curb and gutter (barrier, mountable and drop slope protection wall and retaining wall) if any.	
d. Sto i.	rm Drainage and Sewer System Profile showing the hydraulic gradient and properties of the main lines including structures in relation with the road grade line	
ii.	Details of drainage and miscellaneous structures such	



as various types of manholes, catch basins, inlets (curb, gutter	
and drop). e. Water System Layout and details &	
Water Tank Plan;	
f. Site Grading Plans with the finished	
contour linen super-imposed on the	
existing ground the limits of earth	
works, embankment slopes, cut	
slopes, surface drainage, outfalls and	
others.	
g. Power Distribution Plan and details.	
Project feasibility study	
Certification/Application for Water Supply	LCWD/NWRC
System from the following:	
a. Local Water works Utilities	
Administration and/or LCWD.	
b. National Water Resources Council	
(NWRC) if deep well will be used	
Certification/Application for power supply	Albay Power and Electric Corporation
from ALECO or local franchised holder	
Specification, bill of materials and cost	Licensed Civil Engineer/Architect
estimate	Geodetic Engineer/Environmental Planner
Conversion Order	Department of Agrarian Reform
Environmental Compliance Certificate (ECC)	Department of Environment and Natural
	Resources
Other pertinent legal/technical documents	
that may be required	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant submits application documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO Facebook Page.	HHRD Staff acknowledges receipt and evaluates submitted application		30 minutes	HHRD Staff
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency		5 minutes	HHRD Staff



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to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.			
If the submitted application is COMPLETE, HHRD Staff officially receives the applications.	Inspection Fee - Php 1,500.00 per ha Zoning	2 minutes	HHRD Staff
HHRD Staff records Official Receipt then, prepares and forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office for comments/ recommendations.	Certification Fee - Php 720.00/ha PD 957 Processing Fee - Php 2,880.00/ha BP 220	30 minutes	HHRD Staff
HHRD Staff thoroughly evaluates plans and documents	Processing Fee - Php 600.00/ha for	2.5 to 5 days	HHRD Staff
HHRD Staff conducts ocular inspection/on-site investigation with corresponding report/ documentation.	Socialized Housing and 1,440.00/ha for Economic Housing Commercial Industrial Subdivision Processing	1 hour	HHRD Staff
HHRD prepares and	Fee - Php 720.00/ha	30 minutes	HHRD Staff
endorses findings/ recommendations to Applicant.			



				CIAL
Applicant receives	HRRD Staff receives		30 minutes	HHRD Staff
and complies with	re-submitted			ACPDC
findings and	application then,			CPDC
recommendations.	prepares			City Mayor
	endorsement and			
	forwards application			
	to Mayor for			
	endorsement to			
	Sangguniang			
	Panlungsod.			
	HHRD Staff		30 minutes	HHRD Staff
	prepares SP			
	approved			
	application.			
	HHRD Staff issues		2 minutes	HHRD Staff
	Order of Payment.			
Applicant pays fees			10 minutes	City Treasurer's
at the City				Office
Treasurer's Office or				
through Legazpi				
City's Online				
Services.				
Applicant receives			2 minutes	HHRD Staff
DP documents at the				
Office, or via email.				
		Total	5 days	
			3 hours &	
			51 mins	



# 4 Preliminary Approval and Locational Clearance (PALC) Application for Memorial Park/Cemetery

Approval of lot/land partition/segregation, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION		
Classification:	Highly Complex		
Type of Transaction:	Frontline Service		
Who may avail:	Any person with the intent to develop a memorial		
	park/cemetery		

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Six (6) sets of the following:	
<ul> <li>Documents duly signed and sealed by a licensed Civil Engineer/Architect/Geodetic Engineer/Environmental Planner: <ul> <li>a. Subdivision Plan (schematic plan) showing the proposed layout.</li> <li>b. Vicinity Map</li> <li>c. Survey Plans of Lot as described in TCT</li> <li>d. Topographic Plan to include existing conditions</li> </ul> </li> </ul>	Licensed Civil Engineer/Architect Geodetic Engineer/Environmental Planner
Certified true copies of Title/s (TCT)	LRA-Registry of Deeds
Certified true copies of Tax Declaration	City Assessor's Office
Certification of non-tenancy or an affidavit of waiver of tenant if the land is agricultural/pasture land planted to rice and corn	Department of Agrarian Reform
Sangunian Panlungsod (Legazpi) Resolution on re-classification, if existing land use classification is agricultural	Sanggunian Panlungsod (SP)
Sanguniang Panlungsod (Legazpi) Resolution stating the necessity of the project in relation to the needs of the locality	Sanggunian Panlungsod (SP)
Right to use or Deed of Sale of right-of-way for access road and other utilities when applicable	
Clearance from the Department of Health	Department of Health
Deed of Sale/Contract to Sell	
Certification from NWRC that the proposed site is on ground where water table is not higher than 4.25 meters below the ground surface	National Water Resources Council



Certified true copy of Environmental Compliance Certificate (ECC) or Certificate of	Department of Environment and Natural Resources (DENR)
Non Coverage (CNC)	
Certified true copy of conversion order or	Department of Agrarian Reform (DAR)
exemption clearance	
Special Power of Attorney or Corporate	Corporate Secretary, for corporations
Secretary Certificate	
Real Property Tax Clearance	City Treasurer's Office
Site Zoning/Land Use Classification	CPDO-Zoning Division
Certification	
Barangay Resolution/Certification supporting	Concerned Barangay
the proposed project	
Other pertinent legal/technical documents	
that may be required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	<b>BE PAID</b>	ING TIME	RESPONSIBLE
Applicant submits application documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO Facebook Page.	HHRD Staff acknowledges receipt and evaluates submitted application		30 minutes	HHRD Staff
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.		5 minutes	HHRD Staff
	If the submitted application is COMPLETE, HHRD	Inspection Fee - Php	2 minutes	HHRD Staff



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	Staff officially	1,500.00 per		
	receives the	ha		
	applications.			
	HHRD Staff records	Zoning	30 minutes	HHRD Staff
	Official Receipt	Certification		
	then, prepares and	Fee – Php		
	forwards	720.00/ha		
	endorsement/			
	transmittal letter to	Processing		
	City Legal Office	Fee - Php		
	and City			
	Engineering Office	Memorial		
	for comments/	Park		
	recommendations.	720.00/ha		
		Cemetery		
		288.00/ha		
		Columbarium		
		3,600.00/ha		
	HHRD Staff	2,220.00/110	2.5 to 5	HHRD Staff
	thoroughly		days	
	evaluates plans and			
	documents			
	HHRD Staff		1 hour	HHRD Staff
	conducts ocular			
	inspection/on-site			
	investigation with			
	corresponding			
	report/			
	documentation.			
	HHRD prepares		30 minutes	HHRD Staff
	and endorses			
	findings/			
	recommendations			
	to Applicant.			
Applicant receives	HRRD Staff		30 minutes	HHRD Staff
and complies with	receives re-			ACPDC
findings and	submitted			CPDC
recommendations.	application then,			City Mayor
	prepares			
	endorsement and			
	forwards application			
	to Mayor for			
	endorsement to			
	Sangguniang			
	Panlungsod.			
	HHRD Staff		30 minutes	HHRD Staff
	prepares SP		50 minutes	
	piepaies or			



	approved application. HHRD Staff issues Order of Payment.		2 minutes	HHRD Staff
Applicant pays fees at the City Treasurer's Office or through Legazpi City's Online Services.			10 minutes	City Treasurer's Office
Applicant receives PALC documents at the Office, or via email.			2 minutes	HHRD Staff
		Total	5 days 3 hours & 51 mins	

#### **5 Development Permit (DP) Application for Memorial Park/Cemetery**

Approval of lot/land development, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION		
Classification:	Highly Complex		
Type of Transaction:	Frontline Service		
Who may avail:	Any person with the intent to develop a memorial		
	park/cemetery		

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Five (5) sets of the following:	
Documents duly signed and sealed by a licensed Civil Engineer/ Architect/ Geodetic Engineer/ Environmental Planner;	Licensed Civil Engineer/Architect Geodetic Engineer/Environmental Planner
<ul> <li>a. Topographic map</li> <li>b. Site Development Plan (schematic plan) showing the proposed layout: <ol> <li>Road layout and utilities plan</li> <li>Water sewerage and drainage plan</li> <li>Site grading plan</li> <li>Electrical plan and specifications</li> <li>Landscaping plan indicating plant/tree species and other natural/manmade landscaping features</li> </ol> </li> </ul>	



vi. Perimeter fence plan	
Project feasibility study	
Clearances/permits/certifications from other agencies applicable to the project	Department of Health, LCWD/Local supplier franchisee, National Water Resource Council (NWRC) Clearance, Environmental Compliance Certificate (ECC) or Certificate of Non Coverage (CNC) duly issued by the Department of Environment and Natural Resources (DENR) clearance when there is a danger or pollution due to the project
Other pertinent legal/technical documents that may be required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	<b>BE PAID</b>	ING TIME	RESPONSIBLE
Applicant submits application documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO	HHRD Staff acknowledges receipt and evaluates submitted application		30 minutes	HHRD Staff
Facebook Page.	If submitted application is	Inspection Fee - Php 1,500.00 per	5 minutes	HHRD Staff
	INCOMPLETE, or with	ha		
	DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email	Zoning Certification Fee – Php 720.00/ha		
	address. Applicant complies with documentary	Processing Fee - Php		
	requirements then, re-submits for re- evaluation to	Memorial Park 3.00/ha		
	HHRD's email address or CPDO Facebook Page.	Cemetery 1.50/ha 7.20/sq.m.		
	If the submitted application is COMPLETE, HHRD	3.00/floor Columbarium	2 minutes	HHRD Staff



Staff officially       3.00/sq.m. of         receives the       Gross Floor         applications.       Area         HHRD Staff records       30 minutes         Official Receipt       then, prepares and         forwards       endorsement/         transmittal letter to       City Legal Office         and City       Engineering Office         for comments/       For comments/	
receives the applications.       Gross Floor Area         HHRD Staff records Official Receipt then, prepares and forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office       30 minutes	
applications.       Area         HHRD Staff records       30 minutes         Official Receipt       30 minutes         then, prepares and       forwards         endorsement/       endorsement/         transmittal letter to       City Legal Office         and City       Engineering Office	
HHRD Staff records       30 minutes       HHRD Staff         Official Receipt       then, prepares and       30 minutes       HHRD Staff         forwards       endorsement/       ransmittal letter to       City Legal Office       and City         Engineering Office       Office       Image: Comparison of the second se	
Official Receipt then, prepares and forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office	
then, prepares and forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office	
forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office	
endorsement/ transmittal letter to City Legal Office and City Engineering Office	
transmittal letter to City Legal Office and City Engineering Office	
transmittal letter to City Legal Office and City Engineering Office	
City Legal Office and City Engineering Office	
and City Engineering Office	
Engineering Office	
for comments/	
recommendations.	
HHRD Staff 2.5 to 5 HHRD Staff	
thoroughly days	
evaluates plans and	
documents	
HHRD Staff 1 hour HHRD Staff	
conducts ocular	
inspection/on-site	
investigation with	
corresponding	
report/	
documentation.	
HHRD prepares 30 minutes HHRD Staff	
and endorses	
findings/	
recommendations	
to Applicant.	
Applicant receives HRRD Staff 30 minutes HHRD Staff	
and complies with receives re- ACPDC	
findings and submitted CPDC	
recommendations. application then, City Mayor	
prepares	
endorsement and	
forwards application	
to Mayor for	
endorsement to	
Sangguniang	
Panlungsod.	
HHRD Staff 30 minutes HHRD Staff	
prepares SP	
approved	
application.	
HHRD Staff issues 2 minutes HHRD Staff	
Order of Payment.	,
Applicant pays fees 10 minutes City Treasur	erís
at the City Office	



Treasurer's Office or through Legazpi City's Online Services.			
Applicant receives DP documents at the Office, or via email.		2 minutes	HHRD Staff
	Total	5 days 3 hours &	
		51 mins	

### 6 Application for Alteration of Plan (AP)

Approval of lot/land development, in accordance to the applicable laws, land use, and other development plans within the territory of Legazpi City.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION		
Classification:	Highly Complex		
Type of Transaction:	Frontline Service		
Who may avail:	Any person with the intent to alter their approved		
	development plan		

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Five (5) sets of the following:	
Subdivision lot plan showing the purpose of	Licensed Civil Engineer/Architect
alteration signed and sealed by a licensed	Geodetic Engineer/Environmental Planner
Civil Engineer/Architect/ Geodetic Engineer/	
Environmental Planner	
Letter stating the purpose/reason for the	
alteration /conversion	
Sworn statement that the affected lots/units	
for alteration have not been sold	
Written conformity of the duly organized	
homeowners association or in the absence	
thereof, majority of the lot/unit buyers	
Certified true copy of the title/s of the affected	LRA-Registry of Deeds
lots/units if the said lots/units have been titled	
Other pertinent legal/technical documents	
that may be required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant submits application	HHRD Staff acknowledges		30 minutes	HHRD Staff



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documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO	receipt and evaluates submitted application			
Facebook Page.				
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, HHRD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to HHRD's email address or CPDO Facebook Page.	For affected areas only Inspection Fee - Php 1,500.00 per ha Zoning Certification Fee - Php 720.00/ha	5 minutes	HHRD Staff
	If the submitted application is COMPLETE, HHRD Staff officially receives the applications.	PD 957 Processing Fee - Php 2,880.00/ha BP 220	2 minutes	HHRD Staff
	HHRD Staff records Official Receipt then, prepares and forwards endorsement/ transmittal letter to City Legal Office and City Engineering Office for comments/ recommendations.	Processing Fee - Php 600.00/ha for Socialized Housing and 1,440.00/ha for Economic Housing Commercial Industrial	30 minutes	HHRD Staff
	HHRD Staff thoroughly evaluates plans and documents	Subdivision Processing Fee - Php 720.00/ha	4 hours to 2.5 days	HHRD Staff



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	HHRD Staff conducts ocular inspection/on-site investigation with corresponding report/ documentation.	Memorial Park 3.00/ha Cemetery 1.50/ha 7.20/sq.m. 3.00/floor	1 hour	HHRD Staff
	HHRD prepares and endorses findings/ recommendations to Applicant.	Columbarium 3.00/sq.m. of Gross Floor Area	30 minutes	HHRD Staff
Applicant receives and complies with findings and recommendations.	HRRD Staff receives re- submitted application then, prepares endorsement and forwards application to Mayor for endorsement to Sangguniang Panlungsod		30 minutes	HHRD Staff ACPDC CPDC City Mayor
	HHRD Staff prepares SP approved application.		30 minutes	HHRD Staff
	HHRD Staff issues Order of Payment.		2 minutes	HHRD Staff
Applicant pays fees at the City Treasurer's Office or through Legazpi City's Online Services.			10 minutes	City Treasurer's Office
Applicant receives AP documents at the Office, or via email.			2 minutes	HHRD Staff
		Total	2 days 7 hours & 51 mins.	



### 7 Miscellaneous Sales/Lease Application/Residential Free Patent

Certification of lot/land status for any particular application/s, for titling/rights of public land.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION
Classification:	Simple
Type of Transaction:	Frontline Service
Who may avail:	Any person applying for MSA, MLA, and Residential Free
	Patent

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
	Letter-request with reference documents	Applicant/PENRO	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant submits application documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO Facebook Page.	HHRD Staff acknowledges receipt of application then, refers for site inspection/ investigation.		5 minutes	HHRD Staff
	HHRD Staff conducts ocular inspection/on- site investigation with corresponding report/ documentation.		1 hour, every Friday 1 day	HHRD Staff
	HHRD prepares endorsement to CENRO for review and signature of CPDC.		30 minutes	HHRD Staff CPDC



		CIAD
Total	1 day	
	1 hour &	
	35 mins.	

#### 8 Request for Certified True Copy of SSA, Development Permit & Other Housing and Homesite Documents

Certification of records and status for any particular purpose/s particularly right-of-way or other road and lot/land related concerns, and certified copy/ies for reference, subdivision approval and titling purposes.

Office or Division:	HOUSING AND HOMESITE REGULATION DIVISION
Classification:	Simple
Type of Transaction:	Frontline Service
Who may avail:	Land/Lot Owners

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Letter-request with reference documents	Applicant

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant submits application documents at the Office, or sends an electronic file copy/picture of documentary requirements to HHRD's email address or CPDO Facebook Page.	HHRD Staff acknowledges receipt of request		5 minutes	HHRD Staff
	HHRD Staff issues Order of Payment of fees to Applicant	Php 50.00 Per sheet	2 minutes	HHRD Staff
Applicant pays fees to the City Treasurer's Office or through Legazpi City's Online Services			2 minutes	City Treasurer's Office



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	HHRD Staff records, retrieves, stamps "Certified True Copy" and forwards request to CPDC for review and signature		5 minutes	HHRD Staff CPDC
Applicant receives certified true copy of document/s.			2 minutes	HHRD Staff
		Total	16 mins.	

### PLANS AND PROGRAMS DIVISION



### 1 Assistance to Barangay Development Planning Documents

Office or Division:	PLANS AND PROGRAMS DIVISION	
Classification:	Simple	
Type of Transaction:	Government to Barangay	
Who may avail:	Barangay Officials	

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Pro-forma Barangay Development	CPDO
Investment Program (BDIP), Annual	
Investment Program (AIP), list of PPAs to be	
implemented under 20% Development Fund,	
Barangay Development Council (BDC)	Barangay Development Council/
Resolution and Sanggunian Barangay (SB)	Sangguniang Barangay
Resolution	
Gender & Development Plan, Budget &	Client/Barangay Officials
Accomplishment	
List of Implemented Projects	Client/Barangay Officials
Certification of IRA	Client/Barangay Officials
Barangay Development Plan	Client/Barangay Officials
Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Client submits request letter at the Office, or sends an electronic file copy/picture of documentary requirements to PPD email address	PPD Staff acknowledges receipt and evaluates request		30 minutes	PPD Staff/ Concerned Technical Staff in-charge
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, PPD/Technical Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to PPD's		5 minutes	PPD Staff/ Concerned Technical Staff in-charge



	email address or CPDO Facebook Page.			
	If submitted application is COMPLETE, PPD/Technical Staff forwards documents for review and approval/ signature of ACPDC and CPDC.		20 minutes	PPD Staff ACPDC CPDC
Client receives reviewed/approved documents			5 minutes	Concerned Technical Staff- in-charge
	Documents received and acknowledged by barangay concerned, and advised to submit copy upon approval by the Sangguniang Panlungsod			Concerned Barangay
		Total	1 hour	



### RESEARCH, EVALUATION AND STATISTICS DIVISON



### 1 Civil Society Organization (CSO) Accreditation/Re-Accreditation

Civil Service Organization requests for accreditation/re-accreditation.

Office or Division:	RESEARCH, EVALUATION AND STATISTICS DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Civil Society Organizations

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
People's Council Membership Form	CSO/Applicant
Letter of Intent to be included as a member of	CSO/Applicant
the People's Council	
Copy of Certificated of Accreditation	For accredited CSOs only
Proof of existence and operation in the city for	SEC, CDA, SEC, DOLE, DSWD, HLURB,
at least one (1) year prior to the date of	BIR
application for registration	Concerned Barangay
Proof of activities held in pursuit of	CSO/Applicant
development objectives or organizational	
activities conducted	
Program of activities planned for the year	CSO/Applicant
following the date of application for	
membership	
Copies of its Constitution, By-laws and/or	CSO/Applicant
Articles of Incorporation	
List of its officers and members of good	CSO/Applicant
standing and their respective addresses	
Financial Statement and Declaration of	CSO/Applicant
Assets and Liabilities, if applicable; and	
certificate of Registration or Certificate of	
Accreditation, if applicable	
Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant submits documentary requirements at the Office, or sends an electronic file copy/picture of application documents to RESD email address	RESD Staff acknowledges receipt and evaluates submitted application.		2 minutes	RESD Staff Project Evaluation Officer



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If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, RESD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re- submits for re- evaluation to RESD's email address or CPDO Facebook Page.		5 minutes	RESD Staff Project Evaluation Officer
If submitted application is COMPLETE, RESD Staff transmits application to Sangguniang Panlungsod for appropriate action and committee hearing schedule		30 minutes	Project Evaluation Officer ACPDC CPDC
	Total	37 mins.	

# 2 Request for Issuance of Certification re: location stated on Birth Certificate

Issuance of certification on the location as stated on Birth Certificate, as a requirement in the processing of passport and other related requirements.

Office or Division:	RESEARCH, EVALUATION AND STATISTICS DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	All

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Request Letter	Client/Applicant
Other pertinent documents that may be	
required	

CLIENT STEPS AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
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Applicant submits request letter at the Office, or sends an electronic file copy/picture of request letter to RESD email address	RESD Staff acknowledges receipt and evaluates submitted request.		2 minutes	RESD Staff Project Evaluation Officer
	RESD Staff issues Order of Payment for fees to Applicant.	Php 50.00	2 minutes	RESD Staff Project Evaluation Officer
Applicant pays fees to the City Treasurer's Office or through Legazpi City's Online Services			2 minutes	City Treasurer's Office
	RESD Staff records Official Receipt		2 minutes	RESD Staff Project Evaluation Officer
	RESD prepares and processes certification for review and signature of ACPDC and CPDC.		30 minutes	RESD Staff ACPDC CPDC
Applicant receives requested certification at the Office, or via email.			2 minutes	RESD Staff Project Evaluation Officer
		Total	40 mins.	

#### 3 Data Request/Assistance to Researchers (Socio-Economic Profile, Planning Documents, Project Proposals, Map Reproduction, and Other Data Requests, Interviews, etc.

Assistance to researchers on data requests.

Office or Division:	RESEARCH, EVALUATION AND STATISTICS DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Researchers, Students, All

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Request Letter specifying the reason thereat	



Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Client submits request letter at the Office, or sends an electronic file copy/picture of request letter to RESD email address	RESD Staff acknowledges receipt and evaluates submitted request.		2 minutes	RESD Staff Project Evaluation Officer
	RESD Staff issues Order of Payment for fees to Client.	Php 50.00 to 300.00 depending	2 minutes	RESD Staff Project Evaluation Officer
Client pays fees to the City Treasurer's Office or through Legazpi City's Online Services		on the request	2 minutes	City Treasurer's Office
	RESD Staff records Official Receipt		2 minutes	RESD Staff Project Evaluation Officer
	RESD retrieves/ prepares requested data or documents.		30 minutes	RESD Staff Concerned Technical Staff-in- Charge
Client receives requested data/ documents at the Office, or via email.			2 minutes	RESD Staff Concerned Technical Staff-in- Charge
		Total	40 mins.	



### **SPECIAL PROJECTS DIVISON**



### **1** Assistance to Researchers/Request for Interview

Assistance to researchers on data requests.

Office or Division:	SPECIAL PROJECTS DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Researchers, Students, All

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Request Letter	
Other pertinent documents that may be required	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS -ING TIME	PERSON RESPONSIBLE
Client submits request letter at the Office, or sends an electronic file copy/picture of request letter to SPD email address	SPD Staff acknowledges receipt and evaluates submitted request.		2 minutes	SPD Staff Project Development Officer
	SPD Staff issues Order of Payment for fees to Applicant, if applicable.		2 minutes	SPD Staff Project Development Officer
Applicant pays fees to the City Treasurer's Office or through Legazpi City's Online Services			2 minutes	City Treasurer's Office
	SPD Staff records Official Receipt		2 minutes	SPD Staff Project Development Officer
	SPD retrieves/prepares requested data or documents.		1 hour	SPD Staff Project Development Officer
Client receives requested certification at the Office, or via email.			2 minutes	SPD Staff Project Development Officer
		Total	1 hour &	



10 mins.	 		CIAU
		10 mins.	

### CITY PLANNING AND DEVELOPMENT OFFICE

**ZONING DIVISION** 



### **1** Locational Clearance for New Business Permit Application

Issuance of locational clearance for new business permit applications, renewal of existing businesses with changes in business owner's name, business/trade name, location, line of business, etc.

Office or Division:	ZONING DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Business Owners/Applicants

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Properly filled-up Application Form for	Business Permits and Licensing Office
Business/Mayor's Permit	
Sketch of proposed business location	Applicant
Barangay Business Clearance (where	
business is located)	
If the property is not owned: Contract of Lease	Applicant/
or Letter of Authorization/Consent from the	Lessor/Building Owner/Administrator
owner/s/ Affidavit of Undertaking (Lot	
Ownership)/ Award Notice	
Copy of Occupancy Permit or Certification (for	City Engineer's Office
the building where business is located)	
Original copy of the previous Locational	Applicant
Clearance, for existing businesses with	
changes	
Copy of DTI/SEC Certificate/CDA Registration	DTI, SEC, CDA
Affidavit of Non-Objection, if applicable	
Deed of undertaking, sworn statement, or	
Written manifestation regarding business	
operation, if applicable	
Other pertinent documents that may be	
required after evaluation	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant submits application documents at the Business Center One-Stop Shop, or sends e-file copy of documentary requirements to CPDO email address or Facebook page.	ZD Staff acknowledges receipt of submitted application.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV



	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, ZD Staff issues Notice of Deficiency to		5 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to ZD's email address or Facebook page.			
	If submitted application is COMPLETE, ZD Staff issues Zoning Fee/Order of Payment for BPLO reference then, prepares/processes application for review and approval/ signature of Zoning Officer and Zoning Administrator/ CPDC.	Zoning Fee/ Locational Clearance Fee 100.00 for every 50,000.00 capital	10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV Zoning Administrator/ CPDC
Applicant pays Zoning Fee, which is included in the ONE- TIME ASSESSMENT OF FEES to be issued by BPLO, at the City Treasurer's Office or through Legazpi City's Online Services.			2 minutes	BPLO City Treasurer's Office
	ZD Staff prepares transmittal then, transmits approved locational clearances to BPLO.		15 minutes	Zoning Officer I Zoning Officer II Project Development Officer II
		Total	42 mins.	



# 2 Locational Clearance for Business Renewal (expired Locational Clearances, Businesses included in the Negative List/With Red Flags)

Re-issuance of locational clearances to existing businesses with expired locational clearances, and businesses included in the negative list/with red flags in the eTracs for business permits.

Office or Division:	ZONING DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Business Owners/Applicants

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Properly filled-up Application Form for	Business Permits and Licensing Office
Business/Mayor's Permit renewal with	
updated gross income/sales and number of	
employees	
Sketch of proposed business location	
Barangay Business Clearance (where	
business is located)	
If the property is not owned: Contract of Lease	
or Letter of Authorization/Consent from the	
owner/s/ Affidavit of Undertaking (Lot	
Ownership)/ Award Notice	
Affidavit of Non-Objection, if applicable	
Deed of undertaking, sworn statement, or	
Written manifestation regarding business	
operation, if applicable	
Other pertinent documents that may be	
required after evaluation	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant submits application documents at the Office, or sends e-file copy of documentary requirements to CPDO email address or Facebook page.	ZD Staff acknowledges receipt of submitted application.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	If submitted application is INCOMPLETE, or		5 minutes	Zoning Officer I Zoning Officer II



	with DEFICIENCIES to be complied, ZD Staff issues Notice of Deficiency to Applicant's email address. Applicant complies with documentary requirements then, re-submits for re- evaluation to ZD's email address or Facebook page.			Project Development Officer II Zoning Officer IV
	If submitted application is COMPLETE, ZD Staff resolves the red flag and updates locational clearance recurring fee in the eTracs for Business Permits then, prepares/processes application for review and approval/ signature of Zoning Officer and Zoning Administrator/ CPDC.	Zoning Fee/ Locational Clearance Fee 100.00 for every 50,000.00 capital	10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV Zoning Administrator/ CPDC
Applicant pays Zoning Fee, which is included in the ONE- TIME ASSESSMENT OF FEES to be issued by BPLO, at the City Treasurer's Office or through Legazpi City's Online Services.			2 minutes	BPLO City Treasurer's Office
	ZD Staff prepares transmittal then, transmits approved locational clearances to BPLO.		15 minutes	Zoning Officer I Zoning Officer II Project Development Officer II
		Total	42 mins.	



### **3 Locational Clearance for Building Permit**

Issuance of Locational Clearance for Building Permit for projects/developments to be located within the territory of Legazpi City. This service is included at the One-Stop Shop for Construction Permits at the City Engineer's Office – Office of the Local Building Official.

Office or Division:	ZONING DIVISION
Classification:	Simple/Complex
Type of Transaction:	Backline Service
Who may avail:	Building Permit Applicants/Developers

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Duly accomplished and notarized Unified	Generated through the Online Services of
Application Form for Building Permit	City Website
One (1) set of plans (signed & sealed by the	Applicant/Licensed Architects/Engineers
Architect/Engineers and the	
Owner/s/Applicant)	
Latest Certified True Copy of Land Title	LRA-Registry of Deeds
(TCT) from Registry of Deeds (Blue	
copy/Clear photocopy of Blue copy)	
Latest Certified True Copy of Tax Declaration	City Assessor's Office/
	Generated through the Online Services of
	City Website
Latest Realty Tax Clearance	City Treasurer's Office/
	Generated through the Online Services of
	City Website
One (1) copy of the Bill of Materials/Bill of	Applicant/Licensed Architects/Engineers
Quantities/Cost Estimate of the project	
(signed & sealed by the Architect/Engineer	
and signed by the Owner/s/Applicant)	
If the property is not owned, Contract of	
Lease, Certification or Letter of	
Authorization/Consent from the property	
owner/s or co-owner/s, or Award Notice	
If the property is transferred: Deed of Sale/	
Contract to Sell/ Extrajudicial Settlement	
If Applicant is represented, Authorization	
Letter or Special Power of Attorney (SPA)	Comparate Constant for comparations
For Corporations, Board Resolution or Secretary's Certificate for Authorized	Corporate Secretary, for corporations
<b>,</b>	
Signatory (to sign building permit application documents)	
Latest Certified True Copy of Tax Declaration	City Assessor's Office
of the existing building/structure to be	City Assessors Office
improved/repaired/altered/renovated, for	
alteration, improvement, repair or renovation	



	TAP
Latest Realty Tax Clearance of the	City Treasurer's Office
building/structure to be	
improved/repaired/altered/renovated, for	
alteration, improvement, repair or renovation	
Environmental Compliance Certificate (ECC),	DENR
if applicable	
Height Clearance/Certificate, if applicable	СААР
Affidavit of Non-Objection, if applicable	
Affidavit of Undertaking (on status of Lot	
Occupancy), if applicable	
Barangay Resolution/Endorsement	Concerned Barangay
interposing no objection on project, if	
applicable	
Simple Subdivision Approval/ Copy of	CPDO-Housing Division
Approved Subdivision Plan, if applicable	
Manifestation/Sworn Statement, if applicable	
Other pertinent documents that may be	
required after evaluation	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESS- ING TIME	PERSON RESPONSIBLE
Applicant creates new application in Legazpi City's website, under Online Services then, submits documentary requirements to the City Engineering Office – OBO.	OBO Staff evaluates then, forwards application to ZD- OBO Staff via etracs.			OBO-OSSCP Receiving Officer/Clerk
	ZD-OBO Staff acknowledges receipt and evaluates submitted application.		30 minutes	OBO-OSSCP
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, ZD- OBO Staff issues Notice of Deficiency to Applicant's email address, or inputs noted deficiencies of application in etracs.		5 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
Applicant receives Notice of Deficiency and application				



				CIAL 3
documents, complies noted deficiencies then, re-submits for re-evaluation.				
	If submitted application is COMPLETE, ZD- OBO assesses zoning fees to be included in OBO One-Time Assessment then, forwards application to ZD-CPDO Staff for review.	Zoning/ Locational Clearance Fees UPLR Fees	2 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	ZD-OBO Staff forwards application to ZD-CPDO Staff for review. ZD-CPDO Staff reviews application then, forwards to Zoning Administrator for approval.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV Zoning Administrator
Applicant pays zoning fees at the City Treasurer's Office or through Legazpi City's Online Services then, receives e-file copy of approved Locational Clearance via email, through OBO-OSSCP etracs.			2 minutes	City Treasurer's Office OBO-OSSCP Staff/Clerk
		Total	49 mins.	

### 4 Request for Land Use Reclassification/Rezoning

Requests for land use reclassification from agricultural land use to non-agricultural land use, and land use rezoning to a different land use.

Office or Division:	ZONING DIVISION
Classification:	Complex
Type of Transaction:	Backline Service



CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Copy of request/letter of intent for land- use reclassification specifying justification thereat	Applicant/Proponent
Narrative description of the development plan describing in detail the reason for reclassification	Applicant/Proponent
5R size photographs of all corners of the landholdings	Applicant/Proponent
Certification from the Department of Agriculture that the subject landholdings are marginally suitable and not economically viable for agriculture	Department of Agriculture
Certification from Municipal Agrarian Reform Officer (MARO) that there is or no agrarian reform beneficiaries, tenants and/or occupants or protest	Department of Agrarian Reform
Certification from the Philippine Coconut Authority if the area is presently planted with coconut	Philippine Coconut Authority
Certification from National Irrigation Authority whether or not the area is/are will be covered by any irrigation facility/ies	National Irrigation Authority
1 Blueprint/ Copy of Lot Plan with vicinity/location map, signed/sealed/certified by the Geodetic Engineer	Licensed Geodetic Engineer
If property not owned, Contract of lease, deed of sale, deed of assignment or authority/ Special Power of Attorney from property owner	
Latest certified copy of Transfer Certificate of Title (TCT) or certification from Land Registration Authority (Register of Deeds) if no record of TCT	Land Registration Authority (Register of Deeds)
Latest certified tax declaration (TD) from the City Assessor's Office or certification if no record of TD	City Assessor's Office
Latest realty tax clearance from the City Treasurer's Office	City Treasurer's Office
Barangay resolution interposing no objection to land-use reclassification	Concerned Barangay
Other pertinent documents that may be required	



CLIENT STEPS	ACENCY	FEES TO	PROCESS-	PERSON
CLIENT STEPS	AGENCY			
Applicant submits documentary	ACTIONS ZD Staff acknowledges	BE PAID	ING TIME 20 minutes	RESPONSIBLE Zoning Officer I Zoning Officer II
requirements to the	receipt and			Project
Office, or sends an electronic file	evaluates submitted application			Development Officer II
copy/picture of	approation			Zoning Officer IV
documentary requirements to ZD's				
email address or				
Facebook page.	If submitted		5 minutes	Zoning Officer I
	application is INCOMPLETE, or			Zoning Officer II Project
	with DEFICIENCIES			Development
	to be complied, ZD Staff issues Notice of			Officer II Zoning Officer IV
	Deficiency to Applicant's email			
	address.			
Applicant complies with documentary				
requirements then,				
re-submits for re- evaluation.				
	If submitted	Certification	2 minutes	Zoning Officer I
	application is COMPLETE, ZD	Fee		Zoning Officer II Project
	Staff issues Order of Payment for	720.00 per hectare		Development Officer II
	certification fee to	nootaro		Zoning Officer IV
	Applicant ZD Staff prepares		15 minutes	Zoning Officer I
	endorsement of			Zoning Officer II
	request to Sangguniang			Project Development
	Panlungsod for review and signature			Officer II Zoning Officer IV
	of Zoning			Zoning Onicer IV
	Administrator. Zoning Administrator		5 minutes	Zoning
	reviews and signs		0 111110165	Administrator
	request endorsement, for			
	City Mayor's			
	signature. ZD Staff transmits		2 minutes	Zoning Officer I
	request/			Zoning Officer II



endorsement for land use reclassification to Sangguniang Panlungsod.			Project Development Officer II
	Total	49 mins.	

### **5 Request for Land-Use Certifications/Site Zoning Certification**

Issuance of certifications on the land use classification of particular lot/land/area, located within the boundaries of Legazpi City.

Office or Division:	ZONING DIVISION
Classification:	Simple
Type of Transaction:	Backline Service
Who may avail:	Lot/Land Owners, Researchers

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1 copy of request/letter of intent for land-	
use certification specifying the reason	
thereat	
1 Blueprint/ Copy of Lot Plan with vicinity/location map, signed/sealed/certified	Licensed Geodetic Engineer
by the Geodetic Engineer	
Latest certified copy of Transfer Certificate of Title (TCT) or certification from Land Registration Authority (Register of Deeds) if no record of TCT	Land Registration Authority (Register of Deeds)
Latest certified tax declaration (TD) from the City Assessor's Office or certification if no record of TD	City Assessor's Office
Latest realty tax clearance from the City Treasurer's Office	City Treasurer's Office
Brief summary of the project (signed by the proponent/owner (for ECC/CNC applications only)	
Other pertinent documents that may be required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant submits documentary requirements at the Office, or sends an electronic file	ZD Staff acknowledges receipt and evaluates submitted application.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II



				CIALS
copy/picture of documentary requirements to ZD's email address or Facebook page.				Zoning Officer IV
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, ZD Staff issues Notice of Deficiency to Applicant's email address.		5 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
Applicant complies with documentary requirements then, re-submits for re- evaluation.				
	If submitted application is COMPLETE, ZD Staff issues Order of Payment for certification fee to Applicant	Certification Fee 720.00 per hectare	2 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	ZD Staff prepares land use certification for review and signature of Zoning Administrator		15 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	Zoning Administrator reviews and signs land use certification and request endorsement.		5 minutes	Zoning Administrator
Applicant pays certification fee at the City Treasurer's Office or through Legazpi City's Online Services	ZD Staff records Official Receipt.		2 minutes	City Treasurer's Office Zoning Officer I Zoning Officer II Project Development Officer II
Applicant receives e- file copy of land use/site zoning certification via email.			2 minutes	Zoning Officer I Zoning Officer II Project Development Officer II



			CIAU	
	Total	11 mine		
	TOLAT	41 111115.		

### 6 Request for LGU Endorsement and Other Certifications

Application/requests for LGU endorsement for Environmental Compliance Certificate/Certificate of Non-Coverage or for Quarry Permit, and for other purposes.

Office or Division:	ZONING DIVISION	
Classification:	Simple	
Type of Transaction:	Backline Service	
Who may avail:	Lot/Land Owners, Developers	

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1 copy of request/letter of intent for land-use	
certification specifying the reason thereat	
Notarized application for quarry permit from	
the Provincial Environment & Natural	
Resources Office (for quarry permit)	
1 Blueprint/ Copy of Lot Plan with	Licensed Geodetic Engineer
vicinity/location map, signed/sealed/certified	
by the Geodetic Engineer	
If property not owned, Contract of lease,	
deed of sale, deed of assignment or authority	
from property owner	
Latest certified Transfer Certificate of Title	Land Registration Authority (Register of
(TCT) or certification from Land Registration	Deeds)
Authority (Register of Deeds) if no record of	
TCT	
Latest certified tax declaration (TD) from the	City Assessor's Office
City Assessor's Office or certification if no	
record of TD	
Latest realty tax clearance from the City	City Treasurer's Office
Treasurer's Office	
Brief summary of the project (signed by the	
proponent/owner (for ECC/CNC applications	
only)	O and a more di Danaga and
Barangay resolution/clearance interposing no	Concerned Barangay
objection to the proposed activity	
Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	<b>BE PAID</b>	ING TIME	RESPONSIBLE



			1	CIAL 3
Applicant submits documentary requirements at the Office, or sends an electronic file copy/picture of documentary requirements to ZD's email address or Facebook page.	ZD Staff acknowledges receipt and evaluates submitted application.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	If submitted application is INCOMPLETE, or with DEFICIENCIES to be complied, ZD Staff issues Notice of Deficiency to Applicant's email address.		5 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
Applicant complies with documentary requirements then, re-submits for re- evaluation.				
	If submitted application is COMPLETE, ZD Staff issues Order of Payment for certification fee to Applicant	Certification Fee 720.00 per hectare	2 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	ZD Staff prepares endorsement or certification for review and signature of Zoning Administrator		15 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
	Zoning Administrator reviews and signs endorsement or certification for City Mayor's signature.		5 minutes	Zoning Administrator
Applicant pays certification fee at the City Treasurer's Office or through Legazpi City's Online Services	ZD Staff records Official Receipt.		2 minutes	City Treasurer's Office Zoning Officer I Zoning Officer II Project Development Officer II



file copy of land use/site zoning certification via email.	Total	41 mins.	Zoning Officer II Project Development Officer II
	Iotai	41 mins.	

#### 7 Request for LGU Request for a Department of Agriculture (DA) Certification for Land Use Reclassification Application

Application for LGU Request for a DA Certification for land use reclassification application, pursuant to DA Memorandum Circular No. 26, Series of 2022

Office or Division:	ZONING DIVISION	
Classification:	Simple	
Type of Transaction:	Backline Service	
Who may avail:	Lot/Land Owners, Developers	

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1 copy of letter-request for an LGU	
application for a DA Certification	
1 Blueprint/ Copy of Lot Plan with	Licensed Geodetic Engineer
vicinity/location map, signed/sealed/certified	
by the Geodetic Engineer	
Latest certified Transfer Certificate of Title	Land Registration Authority (Register of
(TCT) or certification from Land Registration	Deeds)
Authority (Register of Deeds) if no record of	
ТСТ	
Latest certified tax declaration (TD) from the	City Assessor's Office
City Assessor's Office or certification if no	
record of TD	
Latest realty tax clearance from the City	City Treasurer's Office
Treasurer's Office	-
Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant submits documentary requirements at the Office, or sends an electronic file copy/picture of documentary requirements to ZD's	ZD Staff acknowledges receipt and evaluates submitted application.		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV



and all a datus as an				CIAC
email address or				
Facebook page.				
	If submitted		5 minutes	Zoning Officer I
	application is			Zoning Officer II
	INCOMPLETE, or			Project
	with DEFICIENCIES			Development
	to be complied, ZD			Officer II
	Staff issues Notice of			Zoning Officer IV
	Deficiency to			
	Applicant's email			
	address.			
Applicant complies				
with documentary				
requirements then,				
re-submits for re-				
evaluation.				
	ZD Staff prepares		15 minutes	Zoning Officer I
	request letter and			Zoning Officer II
	DA application form			Project
	for review and			Development
	signature of Zoning			Officer II
	Administrator			Zoning Officer IV
	Zoning Administrator		15 minutes	Zoning
	reviews and			Administrator
	forwards request			Administrator
	letter and DA			
	application form for			
	City Mayor's			
Annie ant reachurst	signature.			Zaning Officer I
Applicant receives e-			2 minutes	Zoning Officer I
file/physical copy of				Zoning Officer II
signed request letter				Project
addressed to DA				Development
		<b>T</b> ( )	47 .	Officer II
		Total	47 mins.	

# 8 Request for Certified True Copy of Locational Clearance, Land Use Certifications and Other Zoning Documents

Certification of records and status for any particular purpose/s particularly issued locational clearances, land use classification certifications, endorsements, and certified copy/ies for reference.

Office or Division:	ZONING DIVISION	
Classification:	Simple	
Type of Transaction:	Frontline Service	



Who may avail:	All
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CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1 copy of request/letter of intent	Applicant
specifying the reason thereat	
Other pertinent documents that may be	
required	

CLIENT STEPS	AGENCY	FEES TO	PROCESS-	PERSON
	ACTIONS	BE PAID	ING TIME	RESPONSIBLE
Applicant submits request letter at the Office, or sends an electronic file copy/picture of request to ZD's email address or Facebook page.	ZD Staff acknowledges receipt and evaluates submitted request, then issued Order of Payment		10 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV
Applicant pays fee to the City Treasurer's Office or through Legazpi City's Online Services		Certified True Copy Fee 100.00 per document	2 minutes	City Treasurer's Office
	ZD Staff records, retrieves, stamps "Certified True Copy" and forwards request to Zoning Administrator for review and signature.		5 minutes	Zoning Officer I Zoning Officer II Project Development Officer II Zoning Officer IV Zoning Administrator
Applicant receives certified true copy of document/s.			2 minutes	Zoning Officer I Zoning Officer II Project Development Officer II
		Total	19 mins.	

FEEDBACK AND COMPLAINTS MECHANISM				
How to send feedback	Through a customer feedback form,			
	letter, email, or electronic messaging.			
How feedbacks are processed	Forwarded to concerned unit, and acted upon within the prescribed period.			
How to file a complaint	Through a letter, email, or electronic messaging, addressed to:			



	ENGR. JOSEPH B. ESPLANA CPDC City Planning and Development Office, 2/F City Hall Building, Rizal Street, Legazpi City
How complaints are processed	Check on the details of the complaints, ask for the incident report by the concerned employee, with documentary attachment, then a letter-reply to the complainant.
Contact information of CCB, PCC, ARTA	CCB: 0908 881 6565 email@contactcenterngbayan.gov.ph PCC: 8888 pcc@malacanang.gov.ph ARTA: (02) 8478 5093 complaints@arta.gov.ph

Division	Email Address	Contact Information
Administrative Division	legazpicpdo@gmail.com	(052) 742-0821
Housing and Homesite	hd.cpdolegazpi@yahoo.com	(052) 742-0821
Regulation Division		
Plans and Programs Division	ppd.cpdolegazpi@gmail.com	(052) 742-0821
Research, Evaluation and	resdcpdolegazpi@gmail.com	(052) 742-0821
Statistics Division		
Special Projects Division	legazpicpdo@gmail.com	(052) 742-0821
Zoning Division	cpdozoning.legazpi@gmail.com	(052) 742-0821
	lcforbusiness.cpdoleg@gmail.com	
Ms. Grace R. Bachiller,	gracebachiller771@gmail.com	(052) 742-0821
ACPDC		
EnP Jocelyn M, Codorniz	jocelyncodorniz@gmail.com	(052) 742-0821
OIC, CPDO		



## CITY SOCIAL WELFARE AND DEVELOPMENT OFFICE

**External Services** 



## 1. Limited Financial Assistance / Assistance to Individuals in Crisis Situations (AICS)

This is limited cash extended to clients who are in crisis due to death, illness, calamity and other disasters that befell the family. It also includes assistance for transportation, education and even livelihood for those who cannot qualify under the Self-Employment Assistance Program.

Office or Division:	City Social Welfare	e and Develo	pment Office (CS)	NDO)		
Classification:	Simple					
Type of Transaction:	G2C – Government to Citizen					
Who may avail:	Residents only	Residents only				
CHECKLIST OF REC	QUIREMENTS	REMENTS WHERE TO SECURE				
Any document to prove ide				SS/LTO/Pag-ibig/ Post		
Voter's ID/certification, UN		Office/Philip	pine Statistics Au	thority/DSWD/Barangay		
license, 4Ps ID, barangay						
and any other ID with nam	he and picture and					
date of birth) -original						
Barangay Certification of I	ndigency/	Barangay H	lall			
Residency -original						
Medical Certificate/abstrac			Record division/Bil	ling Section/Attending		
Quatation/Laboratory Ord		physician				
medical assistance - origi		School Pog	istrar's Office			
			Istial's Office			
assistance -original Death Certificate for Burial Assistance –		Local Civil Registrar/National Statistics Office (NSO)				
original, to be presented o						
CSWDO's Certificate of E	•	CSWDO				
Authorization Letter (in ca		Client listed	in the CE			
representative will claim th						
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON RESPONSIBLE		
	ACTIONS	BE PAID	TIME	PERSON RESPONSIBLE		
1. Present any ID and	1. Assist client in	None	4 minutes	Doverin D.		
Register in Clients'	registering in			Quirante/Officer-of the -		
Logbook	Logbook			Day		
2. No Activity	2. Search for	None	4 minutes	Shane E. Toledo/		
	client's General			Maria Theresa A. Hamily/		
	Intake Sheet			Editha E. Toledo		
	(GIS) in					
	database & files					



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3. Submit for initial/basic interview *Make sure to answer the questions as honestly and accurately as possible	<ul> <li>3. Ask basic questions to determine appropriate CSWDO division/section in charge of the case</li> <li>3.1. Prepare Daily Route Slip</li> <li>3.2. Direct Client to CSWDO division/section</li> </ul>	None	10 minutes	Reception Desk Depending on the schedule of staff (permanent, contract of service and job orders) prepared monthly by the Admin Division
<ul> <li>4. Proceed to section routed to and provide details re: requested service/ answer questions</li> <li>*Make sure to answer the questions honestly and accurately as possible</li> </ul>	4. Conduct detailed interview and assessment of case	None	45 minutes	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Cynthia L. Olimpo Jennifer M. Buendia Maricris B. Dagta Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Section Staff City Social Welfare and Development Office
5. Provide additional data and submit requested documents, if necessary *Make sure to correct erroneous/incomplete information provided earlier and be available during the visit	5. Gather collateral information through home visit/ telephone call/ texts *This step is omitted if client has an existing record with or has availed of CSWDO services in the last 6 months	None	2 days & 4 hours (paused clock)	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Maricris B. Dagta Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Section Staff City Social Welfare and Development Office



nt Receipt - EDASnt Receipt - EDASand Development Officer6. To wait for the worker's information of the schedule of release *Make sure to provide an active mobile/ telephone number6. Upon receipt of complete documents from the client, submit the same to Admin Division as basis for cash advanceNone30 minutes (paused-clock)Ayessa R. Guevara Social Welfare Officer I City Social Welfare and Development Office6.1 Submit a batch of CEs to the Head of Office and City Mayor's Office for signaturesNone1 day (paused-clock)Ruth C. Azupardo Admin Officer IV Jesusa A. Del Rosario Liaison Officer (Admin Aide II/ Editha E. Toledo Admin Aide III City Social Welfare and Development Office		1			CIAL
qualified, refer the case to Emergency //Disaster Assistance Section (EDAS) for assistance10 minutesJocelyn Caho Catlina Z. Maraña Cynthia L. Olimpo Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Section Staft City Social Welfare and Development Officer I Jean Clarisse N. Gallardo Section Staft5.3 Prepare Certificate of Eligibility (CE) for client to sign and issue Acknowledgeme nt Receipt - EDAS30 minutesAyessa R. Guevara Social Welfare Officer I Jean Clarisse N. Gallardo Section Staft Certificate of Eligibility (CE) for client to sign and issue Acknowledgeme nt Receipt - EDASNone the client, submit the same to Admin Division as basis for cash advance30 minutes (paused-clock)Ayessa R. Guevara Social Welfare Officer I Jean Clarisse N. Gallardo Section Staft Ceclia E. Arcilla Assistant City Social Welfare Officer I Jean Clarisse N. Gallardo Section Staft Ceclia E. Arcilla Assistant City Social Welfare Officer I Jean Clarisse N. Gallardo Social Welfare Officer I Usocial Welfare Officer IV Jesusa A. Del Rosario Liaison Officer (Admin Ade II/ City Social Welfare and Development Office6.1 Submit a batch of CEs to the Head of Office and City Mayor's Office for signaturesNone1 day (paused-clock)Ruth C. Azupardo Admin Adde III City Social Welfare and Development Officer (Admin Adde III City Social Welfare and Development Office		qualified, to inform him/her immediately			
Certificate of Eligibility (CE) for client to sign and issue Acknowledgeme nt Receipt - EDASNoneNone 		qualified, refer the case to Emergency /Disaster Assistance Section (EDAS)		10 minutes	Catalina Z. Maraña Cynthia L. Olimpo Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Section Staff City Social Welfare and
worker's information of the schedule of release *Make sure to provide an active mobile/ telephone numberof complete documents from the client, submit the same to Admin Division as basis for cash advance(paused-clock)Social Welfare Officer I City Social Welfare and Development Office6.1 Submit a batch of CEs to the Head of Office and City Mayor's Office for signaturesNone1 day (paused-clock)Ruth C. Azupardo Admin Officer IV Jesusa A. Del Rosario Liaison Officer (Admin Aide I)/ Editha E. Toledo Admin Aide III City Social Welfare and Development Office Mayor's Office for signatures		Certificate of Eligibility (CE) for client to sign and issue Acknowledgeme nt Receipt -			Social Welfare Officer I Jean Clarisse N. Gallardo Section Staff Cecilia E. Arcilla Assistant City Social Welfare and Development Officer
6.1 Submit a batch of CEs to the Head of Office and City Mayor's Office for signaturesNone1 day (paused-clock)Admin Officer IV Jesusa A. Del Rosario Liaison Officer (Admin Aide I)/ Editha E. Toledo Admin Aide III City Social Welfare and Development Office Maria Marlene G. Manaya	worker's information of the schedule of release *Make sure to provide an active mobile/	of complete documents from the client, submit the same to Admin Division as basis for cash	None		Social Welfare Officer I City Social Welfare and
Department Officer I City of Legazpi Carmen Geraldine B. Rosal City Mayor		batch of CEs to the Head of Office and City Mayor's Office	None		Admin Officer IV Jesusa A. Del Rosario Liaison Officer (Admin Aide I)/ Editha E. Toledo Admin Aide III City Social Welfare and Development Office Maria Marlene G. Manaya City Social Welfare Department Officer I City of Legazpi Carmen Geraldine B. Rosal



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	6.2 Upon receipt of signed CEs, prepare and process cash advance	None	1 day (paused-clock)	Ruth C. Azupardo Admin Officer IV Raymond Carl Dela Torre Admin Aide I Maria Marlene G. Manaya City Social Welfare Department Officer I City of Legazpi Carmen Geraldine B. Rosal City Mayor
	6.3 As soon as fund is available, inform Emergency /Disaster Assistance Section (EDAS) re: availability of such	None	30 minutes (paused-clock)	Ruth C. Azupardo Admin Officer IV City Social Welfare and Development Office
7. Proceed to CSWDO with your valid ID. *In case you are outside the City, inform CSWDO when you can go back to Legazpi to claim the assistance. If not, if you have an appointment outside the City, leave an authorization letter with your ID to a family member who will claim	7. Emergency /Disaster Assistance Section (EDAS) to inform all clients to claim their assistance and/ or coordinate with sections re: the same	None	1 day (paused-clock)	Ayessa R. Guevara Jean Clarisse N. Gallardo Section Staff Cecilia E. Arcilla Asst City Social Welfare and Development Officer City Social Welfare and Development Office
the cash	7.1. Release financial assistance to client	None	15 minutes per client (paused-clock)	Ruth C. Azupardo Admin Officer IV / Noli A. Perez Social Welfare Assistant City Social Welfare and Development Office
	TOTAL:	None	5 days and 6 hours and 28 minutes	



## 2. Issuance of Certificate of Indigency/Assessment Report/Social Case Study Report/Referral for external funding or services

With its limited resources, the greatest bulk of non-funded services of the CSWDO is on issuance of documents issued by registered social workers and other authorized social welfare and development staff to clients who will use these to explore resources of other agencies/institutions to meet their needs on education, Lingkod Bayan/burial assistance, medical, counseling, health/psychiatric assistance, shelter and livelihood, etc. Institutional agencies include: Simon of Cyrene, Provincial Social Welfare and Development Office, Department of Social Welfare and Development, Philippine Charity Sweepstake Office, and other hospitals/agencies/departments/foundations/ NGOs within and outside Legazpi City.

The extent and amount of assistance depends on the receiving party of the documents based on their respective mandates. Likewise, the receiving party has the option to provide or reject the requested service.

Since the CSWDO has to establish the greatest need of the client, its staff have to conduct collateral interview and home visit prior to the issuance of the document requested. In the event that CSWDO has already an updated record of the client, this procedure is omitted.

Office or Division:	City Social Welfare and Development Office (CSWDO)			
Classification:	Simple			
Type of Transaction:	G2C – Governmer	nt to Citizen		
Who may avail:	All			
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE		
Any document to prove i Voter's ID/certification, U license, 4Ps ID, baranga and any other ID with na and date of birth) -origina	IMID, driver's y ID, national ID, me and picture	Philhealth/COMELEC/GSIS/SSS/LTO/Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/Barangay		
Barangay Certification of Indigency /residency -original		Barangay Hall		
Death Certificate for Bur original	al Assistance -	Local Civil Registrar		
City Mayor's note for bur (original and 1 photocop without alteration)		City Mayor's Office (CMO)		
Medical Certificate/abstract/hospital bill for medical assistance -original		Hospital – Record division/Billing Section		
Certificate of Enrolment for educational assistance –original		School Registrar's Office		



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CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTIONS	BE PAID	TIME	RESPONSIBLE
1. Register in Clients' Logbook	1. Assist client in registering in Logbook	None	4 minutes	Doverin D. Quirante/ Officer-of the -Day
2. No Activity	2. Search for client's General Intake Sheet (GIS) in database & files	None	4 minutes	Shane E. Toledo/ Maria Theresa A. Hamily/ Editha E. Toledo
3. Submit for initial/basic interview *Make sure to answer the questions as honestly and accurately as possible	<ul> <li>3. Ask basic questions to determine appropriate CSWDO section in charge of the case</li> <li>3.1. Prepare Daily Route Slip</li> <li>3.2. Direct Client to CSWDO section</li> </ul>	None	10 minutes	Reception Desk Depending on the schedule of staff (permanent, contract of service and job orders) prepared monthly by the Admin Division
<ul> <li>4. Proceed to section routed and provide details of requested service/answer questions</li> <li>*Make sure to answer the questions honestly and accurately as possible and be specific on what help you need</li> </ul>	4. Conduct detailed interview and assessment of case	None	45 minutes	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Herlin A. Trilles Rose Ann G. Llandelar Section Staff City Social Welfare and Development Office



5. Provide additional data, if necessary *Make sure to correct erroneous/incomplete information provided earlier and be available during the visit	5. Gather collateral information thru home visits/ telephone calls/texts and prepare appropriate document for signatures of the section chief and Head of Office *This step is omitted if client has an existing record with or has availed of other services of CSWDO within the last 6 months	None	2 days (paused-clock) *Time is shortened incase of hospital cases when patient is to be discharged on the day client approached the office. All means are then taken to hasten gathering of collateral information in the short timespan	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Section Staff City Social Welfare and Development Office Maria Marlene G. Manaya City Social Welfare Department Officer I City of Legazpi
6. Receive requested document *Make sure to check the document is correct and ask questions on how to proceed	6. Issue Certificate of Indigency/ assessment report/ social case study report/ referral with instructions on how to proceed	None	10 minutes	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Herlin A. Trilles Rose Ann G. Llandelar Section Staff City Social Welfare and Development Office
	TOTAL:	None	2 working days and 1 hour and 9 minutes	



## 3. Issuance of Certificate of Indigency for Indigent Petitioner (Correction of Local Civil Registry Documents) and Legal Assistance

Errors in birth certificates and marriage contract are common and have cost clients their jobs, scholarships, marriage, and even their inheritance. The cost of of correcting the same, however, is way beyond the means of indigent clients, hence they ask for certificate of indigency as required by law to avail of a free/discounted cost for correcting the same.

Likewise, volunteer lawyers like IBP and Public Attorney's Office (PAO) require certificate of indigency to clients to avail of a full legal assistance.

Office or Division:	City Social Welfare and Development Office (CSWDO)			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Residents only			
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	ECURE
Any document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, barangay ID, national ID, and any other ID with name and picture and date of birth) -original		Philhealth/COMELEC/GSIS/SSS/LTO/Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/Barangay		
For legal assistance: any issue, if available	, C		secutor's Officer/I	3P
Barangay Certification or residency -original		Barangay H		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register in Clients' Logbook	1. Assist client in registering in Logbook	None	4 minutes	Doverin D. Quirante/ Officer-of the -Day
2. No Activity	2. Search for client's General Intake Sheet (GIS) in database & files	None	4 minutes	Shane E. Toledo/ Maria Theresa A. Hamily/ Editha E. Toledo
<ul> <li>3. Submit for initial/basic interview</li> <li>*Make sure to answer the questions as honestly and accurately as possible</li> </ul>	3. Ask basic questions to determine appropriate CSWDO section in charge of the case	None	10 minutes	Reception Desk Depending on the schedule of staff (permanent, contract of service and job orders) prepared monthly by the Admin Division



	2.4. Dress			-CIAL
	<ul><li>3.1. Prepare Daily Route Slip</li><li>3.2. Direct Client to CSWDO section</li></ul>			
<ul> <li>4. Proceed to section routed to and answer questions/provide details re: requested service</li> <li>*Make sure to answer the questions honestly and accurately as possible and be specific on what help you need</li> </ul>	4. Conduct detailed interview and assessment of case	None	45 minutes	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Section Staff City Social Welfare and Development Office
5. Provide additional data, if necessary *Make sure to correct erroneous/incomplete information provided earlier and be available during the visit	<ul> <li>5. Gather collateral information thru home visits, telephone calls and texts</li> <li>*This step is omitted if client has an existing record with or has availed of other CSWDO services in the last 6 months</li> <li>5.1 If client is not qualified, reason is explained immediately during the visit</li> </ul>	None	2 days & 4 hours (paused-clock)	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Section Staff City Social Welfare and Development Office



6. Receive requested certificate of indigency *Make sure to check the documents is correct and ask questions on how to proceed	<ul> <li>6. If client is qualified:</li> <li>6.1 Prepare Certificate of Indigency for signature of Head of Office</li> </ul>	None	10 minutes (paused-clock)	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Cynthia L. Olimpo Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo
	6.2 Issue Certificate of Indigency with instructions on how to proceed	None	5 minutes	Sende Via Paz Dinoy Section Staff City Social Welfare and Development Office Maria Marlene G. Manaya City Social Welfare Department Officer I City of Legazpi
	TOTAL:	None	2 working days and 5 hours and 14 minutes	

## 4. Philhealth Universal Health Care - Issuance of Certification of Financial Capability/Incapability of Clients

This is the enrolment of new members and renewal of old members, through a certification issued by a CSWDO Social Worker after a thorough assessment in accordance with DOH classification of indigence

For 13 years, the City Government has prioritized the enrolment of indigent families in Philhealth member. With the advent of the Universal Health Care in 2019, the LGU's coverage has expanded to most, if not all, qualified persons in the City, including college students.

Office or Division:	City Social Welfare and Development Office (CSWDO)	
Classification:	Simple	
Type of Transaction:	G2C – Government to Citizen	
Who may avail:	Residents only	
CHECKLIST OF REG	UIREMENTS WHERE TO SECURE	



Any doou mont to prove id	Dhilbeatth /O		CIAL <sup>3</sup>		
Any document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, barangay ID, national ID, and any other ID with name and picture and date of birth) -original		Post Office/F Authority/DS	OMELEC/GSIS/S Philippine Statistic WD/Barangay		
Barangay Certification of I -original	ndigency	Barangay Ha	all		
Marriage contract (if marri certificate updated -origina	,	Philippine St Registrar	atistics Authority (	PSA)/Local Civil	
For student: Enrollment For bring original) with schedu training		School			
Proof of confinement/avail care (photocopy, bring original care)		Hospital/Fac	ility		
Death Certificate (if spous deceased)	Death Certificate (if spouse is already deceased)		atistics Authority (	PSA)/Local Civil	
Certificate of separation from last employment		Previous Em	ployer		
	Notarized Affidavit of Income tax Declaration (if required by staff)		Public/Private Attorney's Office		
Authorization Letter (incase representative will claim the certification)		Philhealth Applicant			
For EKONSULTA Availme Philhealth Record (origina		Philhealth			
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON	
1. Register in Clients' Logbook	ACTIONS 1. Assist client in registering in Logbook	BE PAID None	<b>TIME</b> 4 minutes	RESPONSIBLE Doverin D. Quirante/ Officer-of the -Day	
2. No Activity	2. Search for client's General Intake Sheet (GIS) in database & files	None	4 minutes	Shane E. Toledo/ Maria Theresa A. Hamily/ Editha E. Toledo	
<ul> <li>3. Submit for initial/basic interview</li> <li>*Make sure to answer the questions as honestly and accurately as possible</li> </ul>	3. Ask basic questions to determine appropriate CSWDO	None	10 minutes	Reception Desk Depending on the schedule of staff (permanent, contract of service and job orders)	



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	section in charge of the case 3.1. Prepare Daily Route Slip 3.2. Direct client to CSWDO section			Prepared monthly by the Admin Division
<ul> <li>4. Proceed to section routed to and answer questions</li> <li>*Make sure to answer the questions honestly and accurately as possible</li> </ul>	4. Conduct detailed interview and assessment of case	None	45 minutes	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Rose Ann G. Llandelar Section Staff City Social Welfare and Development Office
5. Provide additional data, if necessary *Make sure to correct erroneous/incomplete information provided earlier and be available during the visit	<ul> <li>5. Gather collateral information thru home visits, telephone calls and texts</li> <li>*This step is omitted if client has an existing record within or has availed of other CSWDO services within the last 6 months</li> </ul>	None	2 days (paused-clock)	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Mila B. Abunda Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Rose Ann G. Llandelar Section Staff City Social Welfare and Development Office



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	<ul> <li>5.1 If client is not qualified, inform him/her immediately during the visit</li> <li>5.2 If client is qualified:</li> <li>5.2.1 Prepare Certificate of Financial Assessment for signature of Head of Office</li> </ul>	None	10 minutes (paused-clock)	Jocelyn Caño Ayessa R. Guevara Catalina Z. Maraña Jennifer M. Buendia Feoby Fynn F. Balete Mica Ella M. Necerio Sharmel M. Belaza Jean Clarisse N. Gallardo Sende Via Paz Dinoy Section Staff Maria Marlene G. Manaya CSWD Officer or Cecilia E. Arcilla Asst. CSWD Officer City Social Welfare and Development Office
6. If qualified, proceed to CSWDO to claim document	<ul> <li>6. Issue</li> <li>Certificate of</li> <li>Financial</li> <li>Assessment</li> <li>with instructions</li> <li>on how to</li> <li>proceed</li> </ul>	None	10 minutes (paused-clock)	Rose Ann G. Llandelar Herlin A. Trilles EDAS(Emergency/ Disaster Assistance Section) City Social Welfare and Development Office
	TOTAL:	None	2 days and 1 hour and 43 minutes	

5. Issuance of Persons with Disability (PWD) ID and Purchase Booklet



Republic Act 9442 and provides PWD with all the benefits and privileges including special discounts in medicines and basic necessities and prime commodities. To avail of the discounts, however, the PWD or the authorized representative must present the PWD ID and purchase booklet which are processed and issued by PDAO

Office or Division:	City Social Welfare and Development Office (CSWDO)			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Residents only			
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	CURE
Medical Certificate of No		Doctor		
Disability certified by doo				
Certificate of Apparent D		Processing	Officer	
picture showing disability	y if PWD cannot			
appear personally)				
PWD ID Application For			ersons with Disabil	ity Affairs Office
Download from DOH Ph		(PDAO)		
for Persons with Disabili		_		
Barangay Certificate of F	Residency	Barangay		
Birth Certificate			Civil Registrar	
Valid Government ID. Fo	••			SS/LTO/Pag-ibig/
school ID will be accepte	bd		Philippine Statistic	
			SWD/Barangay/So	chool/Local Civil
		Registrar		
Recent 1x1 ID picture (2	pcs); Recent ZXZ	Photo Center		
ID picture (2pcs) If representative or guard	dion	Cuardian/A	uthorized Boproce	untativo.
Guardian-Proof of guard		Guaruian/A	uthorized Represe	Indive
barangay				
Authorized Representati	ve-Notarized			
Authorization Letter				
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTIONS	BE PAID	TIME	RESPONSIBLE
1. Register in Clients'	1. Assist client in	None	4 minutes	Doverin D.
Logbook	registering in			Quirante/
	Logbook			Officer-of the –Day
2. Proceed to Persons	2. Review the	None	10 minutes	Catalina Z. Maraña
with Disabilities Affairs	application and			Social Worker I Nilo Mangampo/
Office(PDAO)/Women,	documents. In			Marilyn Gomez
Elderly, Livelihood and	case of			Section Staff
PWD Welfare Program Section(WELPS), and	discrepancy, the documents will			City Social Welfare
submit all documents	be returned. With			and Development
*Make sure documents	no discrepancy,			Office
are complete	the documents			



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	<ul><li>will be submitted to the encoder</li><li>2.1.Orient client</li></ul>		10 minutes	Catalina Z. Maraña Social Worker I
	about the law			Nilo Mangampo/ Marilyn Gomez Section Staff City Social Welfare and Development Office
3. Wait	3. Check and encode the application in the online Philippine Registry for Persons with Disabilities (PRPWD).	None	25 minutes (paused-clock)	Marytie E. Vargas JO-encoder City Social Welfare and Development Office
	3.1 With no discrepancy, the encoder to assign a PWD ID number.			Marytie E. Vargas JO-encoder City Social Welfare and Development Office
	3.2 If client has been found to be registered in other municipalities and ID is still valid, section staff to provide advice		5 minutes	Catalina Z. Maraña Social Worker I Nilo Mangampo/ Marilyn Gomez Section Staff City Social Welfare and Development Office
	3.3. Process the application and forward to City Mayor's Office the PWD ID and Purchase Booklets for signature		1 day (paused-clock)	Catalina Z. Maraña Social Worker I / Nilo Mangampo / Marilyn Gomez Section Staff City Social Welfare and Development Office Carmen Geraldine B. Rosal City Mayor



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4. Upon receipt of information to claim, proceed to PDAO with any valid ID	4. Upon receipt of the documents from City Mayor's Office, inform client to claim such	None	10 minutes	Nilo Mangampo / Marilyn Gomez Section Staff City Social Welfare and Development Office
<ul> <li>5. Ensure that the IDs and booklets are laminated after signature of PWD- owner or authorized representative *You have the option to have the documents laminated at the PDAO for a small fee or in another establishment</li> </ul>	5. Issue PWD ID and Purchase booklets to client or authorized representative	None	10 minutes	Nilo Mangampo / Marilyn Gomez Section Staff City Social Welfare and Development Office
	TOTAL:	None	1 day 1 hour and 14 minutes	



#### 6. Issuance of Solo Parents IDs

Classification:         Simple           Type of Transaction:         G2C - Government to Citizen           Who may avail:         Residents only           CHECKLIST OF REQUIREMENTS         WHERE TO SECURE           Any document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, Barangay ID, national ID, and any other ID with name and picture and date of birth) -original         Philhealth/COMELEC/GSIS/SSS/LTO/ Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/Barangay           General requirements for all categories of solo parents:         Philippine Statistics Authority(PSA)/Local Registrar (LCR)           Barangay Certificate of the child or children         Philippine Statistics Authority(PSA)/Local Registrar (LCR)           Barangay Certificate of residency applicant); Tax Exemption (for non- working applicant)         Barangay Photo Center           Depending on the categories of solo parents, additional requirements to be presented:         Bureau of Internal Revenue (BIR)           • Categories 2, 5, 6, 7, 8 & 9 • Marriage certificate         Philippine Statistics Authority(PSA)/Local Registrar (LCR)           • Categories 3 and 4 only • Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent         Public Attorney's Office(PAO)/Private Attorney's Office(PAO)/Private Attorney's Office(PAO)/Private Attorney's Office(PAO)/Private Attorney's Office(PAO)/Private Attorney's Office(PAO)/Private Attore	Office or Division:	City Social Welfare and Development Office (CSWDO)		
Type of Transaction:G2C – Government to CitizenWho may avail:Residents onlyCHECKLIST OF REQUIREMENTSWHERE TO SECUREAny document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, Barangay ID, national ID, and any other ID with name and picture and date of birth) -originalPhilhealth/COMELEC/GSIS/SSS/LTO/ Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/BarangayGeneral requirements for all categories of solo parents:Philhealth/CCMELEC/GSIS/SSS/LTO/ Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/BarangayBarangay Certificate of the child or childrenPhilippine Statistics Authority(PSA)/Local Registrar (LCR)Barangay Certificate of residency 2pcs 1x1 identical picturesBarangay Photo Center Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor barents, additional requirements to be parents, additional requirements to be presented:Image certificateFormet a resident of the barangay and that the childrenCategories 3 and 4 only Affidavit of CohabitationPhilippine Statistics Authority(PSA)/Local Registrar (LCR)Public Attorney's Office(PAO)/Private Attor public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private AttorCategories 3 and 4 only Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent				
Who may avail:       Residents only         CHECKLIST OF REQUIREMENTS       WHERE TO SECURE         Any document to prove identity (e.g. old       Philhealth/COMELEC/GSIS/SSS/LTO/         Voter's ID/Certification, UMID, driver's       Philhealth/COMELEC/GSIS/SSS/LTO/         and any other ID with name and picture       Authority/DSWD/Barangay         and any other ID with name and picture       Authority/DSWD/Barangay         and date of birth) -original       Philhealth/COMELEC/GSIS/SSS/LTO/         General requirements for all categories of solo parents:       Philhealth/COMELEC/GSIS/SSS/LTO/         Barangay Certificate of the child or children       Barangay         Barangay Certificate of residency       Barangay         Sworn affidavit declaring that the solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or children       Bureau of Internal Revenue (BIR)         Income tax return (for working applicant)       Bureau of Internal Revenue (BIR)         Depending on the categories of solo parents, additional requirements to be presented:       Categories 2, 5, 6, 7, 8 & 9         Categories 3 and 4 only       Affidavit of Cohabitation         Categories 10,11,12 & 13       Affidavit of chabitation         Categories 3 and 4 only       Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the			nt to Citizen	
CHECKLIST OF REQUIREMENTSWHERE TO SECUREAny document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, Barangay ID, national ID, and any other ID with name and picture and date of birth) -originalPhilhealth/COMELEC/GSIS/SSS/LTO/ Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/BarangayGeneral requirements for all categories of solo parents:Philippine Statistics Authority(PSA)/Local Registrar (LCR)Barangay Certificate of residency e. 2pcs 1x1 identical pictures Sworn affidavit declaring that the solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or childrenPhilippine Statistics Authority(PSA)/Local Registrar (LCR)Income tax return (for working applicant); Tax Exemption (for non- working applicant)Bureau of Internal Revenue (BIR)Depending on the categories of solo parents, additional requirements to be presented:Philippine Statistics Authority(PSA)/Local Registrar (LCR)Categories 2, 5, 6, 7, 8 & 9 - Marriage certificatePhilippine Statistics Authority(PSA)/Local Registrar (LCR)Categories 3 and 4 only - Affidavit of CohabitationPhilippine Statistics Authority(PSA)/Local Registrar (LCR)Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private AttorPublic Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor				
Any document to prove identity (e.g. old Voter's ID/certification, UMID, driver's license, 4Ps ID, Barangay ID, national ID, and any other ID with name and picture and date of birth) -originalPhilhealth/COMELEC/GSIS/SSS/LTO/ Pag-ibig/ Post Office/Philippine Statistics Authority/DSWD/BarangayGeneral requirements for all categories of solo parents: • Birth Certificate of the child or children • Barangay Certificate of residency • 2pcs 1x1 identical pictures • Sworn affidavit declaring that the solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or childrenPhilippine Statistics Authority(PSA)/Local Registrar (LCR)Bureau of Internal Revenue (BIR)Depending on the categories of solo parents, additional requirements to be presented: • Categories 2, 5, 6, 7, 8 & 9 • Marriage certificatePhilippine Statistics Authority(PSA)/Local Registrar (LCR)Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor Public Attorney's Office(PAO)/Private Attor			WHERE TO SECURE	
<ul> <li>solo parents:</li> <li>Birth Certificate of the child or children</li> <li>Barangay Certificate of residency</li> <li>2pcs 1x1 identical pictures</li> <li>Sworn affidavit declaring that the solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or children</li> <li>Income tax return (for working applicant); Tax Exemption (for nonworking applicant)</li> <li>Depending on the categories of solo parents, additional requirements to be presented:</li> <li>Categories 2, 5, 6, 7, 8 &amp; 9</li> <li>Marriage certificate</li> <li>Categories 3 and 4 only</li> <li>Affidavit of cohabitation</li> <li>Categories 10,11,12 &amp; 13</li> <li>Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent</li> </ul>	Voter's ID/certification, UMID, driver's license, 4Ps ID, Barangay ID, national ID, and any other ID with name and picture and date of birth) -original		Pag-ibig/ Post Office/Philippine Statistics	
<ul> <li>solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or children</li> <li>Income tax return (for working applicant); Tax Exemption (for nonworking applicant)</li> <li>Depending on the categories of solo parents, additional requirements to be presented:</li> <li>Categories 2, 5, 6, 7, 8 &amp; 9</li> <li>Marriage certificate</li> <li>Categories 3 and 4 only</li> <li>Affidavit of Cohabitation</li> <li>Categories 10,11,12 &amp; 13</li> <li>Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent</li> </ul>	<ul> <li>solo parents:</li> <li>Birth Certificate of t children</li> <li>Barangay Certificat</li> <li>2pcs 1x1 identical parantee</li> </ul>	he child or te of residency pictures	Barangay	
<ul> <li>parents, additional requirements to be presented:</li> <li>Categories 2, 5, 6, 7, 8 &amp; 9</li> <li>Marriage certificate</li> <li>Categories 3 and 4 only</li> <li>Affidavit of Cohabitation</li> <li>Categories 10,11,12 &amp; 13</li> <li>Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent</li> </ul>	<ul> <li>solo parent is not cohabiting with a partner or co-partner, and has sole parental care and support of the child or children</li> <li>Income tax return (for working applicant); Tax Exemption (for non-</li> </ul>			
Category 1:     Complaint affidavit     PNP/NBI	<ul> <li>Depending on the categories of solo parents, additional requirements to be presented:</li> <li>Categories 2, 5, 6, 7, 8 &amp; 9 <ul> <li>Marriage certificate</li> </ul> </li> <li>Categories 3 and 4 only <ul> <li>Affidavit of Cohabitation</li> <li>Categories 10,11,12 &amp; 13</li> <li>Affidavit of a barangay official attesting that the solo parent is a resident of the barangay and that the children are under the parental care and support of the applicant solo parent</li> <li>Category 1:</li> </ul> </li> </ul>		Public Attorney's Office(PAO)/Private Attorney Public Attorney's Office(PAO)/Private Attorney	



	CIAL S
<ul> <li>Category 2:</li> <li>Death Certificate of spouse</li> </ul>	Philippine Statistics Authority(PSA)/Local Civil Registrar (LCR)
<ul> <li>Category 3:</li> <li>Certificate of detention or a certificate that the spouse is serving sentence for at least three (3) months</li> </ul>	Bureau of Jail Management and Penology (BJMP)
<ul> <li>Category 4:</li> <li>Medical record or medical abstract evidencing the physical and mental state of the incapacitated spouse issued not more than three (3) months before the submission.</li> </ul>	Doctor/Specialist
<ul> <li>Category 5:</li> <li>Judicial decree of legal separation of the spouses or, in the case of de facto separation, an affidavit of two (2) disinterested persons attesting to the fact of separation of the spouses</li> </ul>	Court/ Public Attorney's Office(PAO)/Private Attorney
<ul> <li>Category 6:</li> <li>Judicial decree of nullity or annulment of marriage or judicial recognition of foreign divorce sole parental care and support of the child or children</li> </ul>	Court
Category 7:     Marriage contificate or affidavit of the	Philippine Statistics Authority(PSA)/Local Civil
<ul> <li>Marriage certificate or affidavit of the applicant solo parent</li> </ul>	Registrar (LCR)
<ul> <li>Affidavit of two (2) disinterested persons attesting to the abandonment of the spouse</li> </ul>	Public Attorney's Office(PAO)/Private Attorney
<ul> <li>Police or barangay record of the abandonment</li> </ul>	PNP/Barangay
Categories 8 & 9:	
<ul> <li>Overseas Employment Certificate (OEC) or its equivalent documents</li> <li>Copy of Passports stamps showing continuous twelve (12) months of overseas work</li> </ul>	Overseas Workers Welfare Administration (OWWA)
- Employment contract	Employer/OWWA



Category 10:				CIAL		
• •	- Certificate of No Marriage		Philippine Statistics Authority(PSA)/Local Civil			
(CENOMAR)		Registrar (LCR)				
Category 11:	Category 11:					
- Proof of guardiansh	nip, foster care or	-		and Development		
adoption		(DSWD)/Court				
Category 12:						
- Death certificate of	•		Statistics Authority	(PSA)/Local Civil		
legal guardian, or p		Registrar (LCR)/Barangay				
records evidencing						
disappearance or a parent or legal gua						
(6) months	Iulan, iul al least					
Category 13:						
- Medical record of h	er pregnancy	OB/Doctor				
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON		
	ACTIONS	BE PAID	TIME	RESPONSIBLE		
1. Register in Clients'	1. Assist client in	None	3 minutes	Doverin D. Quirante/ Officer-		
Logbook	registering in Logbook			of the -Day		
	1.2.Usher client					
	to Solo Parent					
2. Cubmit for	Unit	None	10 minuton	Jennifer M. Buendia		
2. Submit for interview/assessment	2. Ask questions to determine if	None	10 minutes	Social Welfare		
and orientation	qualified			Officer I		
				or Maricris B. Dagta		
				Social Welfare		
				Assistant		
				City Social Welfare and Development		
				Office		
	2.1 Conduct	None	8 minutes	Jennifer M. Buendia		
	orientation on	NONE	o minutes	Social Welfare		
	RA 11861			Officer I		
	(Expanded Solo			or Maricris B. Dagta		
	Parents Welfare Act)			Social Welfare		
				Assistant		
				City Social Welfare and Development		
				Office		



	2.2 Issuance of application and list of requirements	None	5 minutes	Maricris B. Dagta Social Welfare Assistant City Social Welfare and Development Office
3. Wait *Make sure to answer the questions and provide accurate information	<ul> <li>3. Conduct collateral information through home visits/telephone calls/texts</li> <li>3.1. If client is not qualified ,to inform him/her client immediately during the visit</li> </ul>	None	2 days (paused-clock)	Jennifer M. Buendia Social Welfare Officer I City Social Welfare and Development Office
4. Submission of application and requirements	4. If client is qualified: Receipt and review of application with requirements	None	5 minutes	Maricris B. Dagta Social Welfare Assistant City Social Welfare and Development Office Maria Marlene G.
	4.1. Processing of Solo Parent ID and submission to Head of Office and City Mayor for signatures	None	1 day (paused clock)	Manaya City Social Welfare Department Officer I City of Legazpi Carmen Geraldine B. Rosal City Mayor
5. Proceed to CSWDO upon receipt of notification	<ol> <li>5. Inform client to claim ID</li> <li>5.1. Issuance of Solo Parent ID</li> </ol>	None None	5 minutes 5 minutes	Maricris B. Dagta Social Welfare Assistant City Social Welfare and Development Office
	TOTAL:	None	3 days and 41 minutes	



	COMPLAINTS MECHANISM
How to send feedback	Answer the Customer Feedback Form and drop it at the Suggestion Box of CSWDO
How feedbacks are processed	Every 4:30pm, Info Desk Officer opens the drop box, compiles all forms and submit to AO IV. Feedbacks requiring answer are forwarded to the relevant Division/Section that will be required to answer within three (3) days of the receipt of the feedback. The answer of the office is then relayed to the client.
How to file a complaint	<ul> <li>Send text/email or call up CSWDO E-mail address: <u>cswdolegazpi@yahoo.com</u> Head of Office: 0939-2820158</li> <li>Secure, fill-out properly and sign Customer Feedback Form provided near the Suggestion Box of the Information Desk and drop the same</li> </ul>
How complaints are processed	<ul> <li>Complaints by phone/online messages: action to be taken by Admin Officer IV</li> <li>Acknowledge receipt and record/log the complaint</li> <li>Verify the existence and identity of the texter/caller/complainant</li> <li>Analyze complaint and take appropriate action</li> <li>Inform/notify the client of the action taken through text/email/letter</li> <li>If not within the level of authority, endorse/forward complaint to Head of Office for appropriate action</li> <li>Inform/notify the client of the action taken through text/email</li> </ul>



	CIAC
How complaints are processed	If in the Suggestion Box:
	Info Desk staff opens the Suggestion Box on a daily basis and evaluates each Customer Feedback Form.
	If a complaint is in the comments, Info Desk staff forwards the same to Admin Officer IV acting as the Complaints Officer
	Upon evaluation, the AO IV/ Complaints Officer shall start the investigation and forward the complaint to the relevant division/section for explanation.
	The AO IV will create a report and submit it to the Head of Office for appropriate action.
	The AO IV will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following number: 0939-2820158.
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> 1-ARTA (2782) PCC: 8888 CCB: 0908-881-6565 (SMS)

Office	Address	Contact Information
City Social Welfare and Development Office	Purok 3-Barriada, Barangay 38-Gogon, Legazpi City, Albay	E-mail address: <u>cswdolegazpi@yahoo.com</u> Head of Office:
		0939-2820158



### **CITY TREASURER'S OFFICE**

**External Services** 



#### **1. Request for Business Tax Quarterly Billing Statement**

The quarterly billing statement is issued to business taxpayers as order of payment is needed to pay their quarterly business tax

Office or Division:	Business Tax Division				
Classification:	Simple				
Type of Transaction:	G2B Government to Business Entity				
Who may avail:	Business Taxpayers				
CHECKLIST OF REQU	JIREMENTS		WHERE TO SE	ECURE	
Business/ Trade/ Owner's	Name				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Verbally requests for issuance of Business Tax Billing Statement	<ul> <li>1.1 Action officer encodes the pertinent data</li> <li>1.2 Ask the client to fill up the Feedback Form</li> <li>1.3 Prints the Business Tax Billing Statement</li> </ul>	None	5 minutes	Rowena Trinidad LTOO IV City Treasurer's Office (Priority Lane) Ria Alindogan Admin Asst VI City Treasurer's Office Jenifer Nocedo LRCO I City Treasurer's Office Marvin Dagta Admin Officer I	
<ul><li>2.1. Receives Business Tax Billing Statement</li><li>2.2. Submits the duly accomplished Feedback Form</li></ul>	<ul> <li>2.1. Action officer releases the Business Tax Billing Statement</li> <li>2.2. Action officer receives the duly accomplished Feedback Form</li> </ul>	None	2 minutes	City Treasurer's Office Client Asiado Admin Aide I City Treasurer's Office Rita Olimpo Admin Aide I City Treasurer's Office	
	TOTAL	None	7 minutes		

#### 2. Business Tax Assessment of Previous Year's Delinquency

Business Taxpayers who are delinquent in the payment of their business tax need to settle their delinquency before renewing their business permit.

Office or Division:	Business Tax Division	
Classification:	Simple	
Type of Transaction:	G2B Government to Business Entity	
Who may avail:	Business Taxpayers	



CHECKLIST OF REQU	WHERE TO SECURE			
1 Original Copy of Income Tax Return or				
Sworn Declaration of Gross/Receipts/Sales		Bureau of Internal Revenue		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits ITR for the computation of previous year's delinquency	1.1. Computes Business Tax Due	None	10 minutes	Rowena Trinidad LTOO IV City Treasurer's Office (Priority Lane)
	1.2. Ask the client to fill up the Feedback Form			Ria Alindogan Admin Asst VI City Treasurer's Office
2. Receives Tax Assessment and proceeds to the Cashier for payment	2. Print Tax Assessment	None	2 minutes	Jenifer Nocedo LRCO I City Treasurer's Office Marvin Dagta Admin Officer I City Treasurer's Office
3. Submit Feedback Form	3. Receive the duly accomplished Feedback Form	None	1 minutes	Client Asiado Admin Aide I City Treasurer's Office RIta Olimpo Admin Aide I City Treasurer's Office
	Total	None	13 Minutes	

## **3.** Retirement of Business Operation and Issuance of Business Retirement Certificate.

Businesses that have ceased to operate must file an Application for Retirement of Business. This should be done to update the City Government's Record and avoid accumulation of tax payments and penalties.

Office or Division:	Business Tax	Division		
Classification:	Simple	Simple		
Type of Transaction:	G2B Governm	nent to Business Entity		
Who may avail:	<b>Business</b> Tax	payers		
CHECKLIST OF REQU	JIREMENTS	ITS WHERE TO SECURE		
<ul> <li>1 Original Copy Lecting the following ( Sales/Reason)</li> <li>1 Original Copy of</li> </ul>	nal Copy of Mayor's Permit nal Copy Letter of Closure te following (Daye/gross Reason)- Business Owner- Business Tax Division, City Treasurer's Office 			



			-	CIAL
- 1 Original Copy of		<ul> <li>Property C</li> </ul>	Dwner	
from the lessor that the business				
establishment had been closed (if		- Barangay Hall where the business is located		
lessee) or - 1 Original Copy of	Certification	- Darangay		iness is localed
from the barangay		- Business	Owner	
the business is loca		Dusiness	owner	
the closure of the b				
- 1 Original Copy of				
resolution regarding				
corporation				-
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits the	1.1. Checks	Assessment		
requirements for	completeness	fees as		
business retirement	of	provided under	(Priority	Rowena
	form and	City Ordinance	Lane)	Trinidad
	requirements	No. 13-2007	3 minutes	LTOO IV
	1.2. Conducts	Note:		City Treasurer's
	assessment	Php 50.00 in		Office
	of	case there is		Ria Alindogan
	taxes and	no assessment		Admin Asst VI
	fees	to be paid		City Treasurer's
	due, if any			Office
	1.3. Ask the			
	client			
	to fill-up the			
	Feedback			lopifor Massala
	Form			Jenifer Nocedo LRCO I
	1.4. Prints			City Treasurer's
	Order			Office
	of Payment			
2. Receives order of	2.2. Releases		3 minutes	
payment.	Order of			
	Payment			Marvin Dagta
3. Pay the tax	3. Verify the		2 minutes	Admin Officer I
assessment	Official			City Treasurer's
	Receipt	Assessment		Office
4.1. Receives	4.1. Releases	fees as		Client Asiado
Business Retirement	the	provided under		Admin Aide I
Certificate	Business	City Ordinance		City Treasurer's
	Retirement	No.13-2007		Office
	Certificate		15 minutes	RIta Olimpo
4.2. Submit the duly	4.2. Receives			Admin Aide I
accomplished	the			City Treasurer's Office
Feedback Form	duly			Unice
	accomplished			
	Feedback			
	Form			
	Total		23 MINUTES	
		l		1



#### 4. Business Tax Assessment

The Tax Order of Payment is printed and issued at the Business Center.

#### 5. Inspection, Calibration and Sealing of Weighing Scale of Retailers

Office or Division:	Business Tax Division			
Classification:	Simple			
Type of		to Duckson F	- <b>1</b> : <b>1</b> .	
Transaction:	G2B Government	to Business El	ntity	
Who may avail: CHECKLIST OF R		V	VHERE TO SECL	IRF
None		•		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Presents weighing scale for testing and calibration	Inspects weighing scale and makes recommendation as to the condition of the instrument presented. a. If the device is found to be defective, the application for testing shall be disapproved and the weighing scale shall be confiscated b. If the device is in good condition, an order of payment shall be issued	Digital and Analog Php 120 (10- 30kgs) Php 70 above 30kgs (except for BASCULA)	5 minutes per device	Marvin Dagta Admin Officer I City Treasurer's Office Client Asiado Admin Aide I City Treasurer's Office
	Total:		5 minutes per device	



#### 6. Inspection, Calibration and Sealing of Gasoline Fuel Dispenser Pumps

Office or Division:	Business Tax	Division		
Classification:	Simple			
Type of Transaction:		ment to Business	Entity	
Who may avail:	Business Tax	kpayers		
CHECKLIST OF REQU			HERE TO SECU	RE
none				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Receives letter for scheduled inspection	Proceed to the gasoline station, as scheduled	* P200.00/ Dispenser Pump (payment included in the renewal of business permit) * P 50.00 Plastic Seal * P 20.00 Sticker	5 minutes per dispenser pump	Marvin Dagta Admin Officer I City Treasurer's Office Client Asiado Admin Aide I City Treasurer's Office
	Total		5 minutes	
			per	
			dispenser	
			pump	

#### 7. Posting of Pawa Grave Rental Payments

Office or Division:	Business Tax [	Division		
Classification:	Simple			
Type of Transaction:	G2B Governme	ent to Business	Entity	
Who may avail:	<b>Business Taxp</b>	ayers		
		W	HERE TO SECU	RE
<ul> <li>1 Original Copy of Official Receipt</li> <li>1 Original Copy of Death Certificate</li> </ul>		- Ca	ash Receipts Div Treasurer's C istrar's Office	-
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



<ul> <li>1.Presents <ul> <li>Official Receipt for grave rental renewal</li> </ul> </li> <li>Official Receipt and Death Certificate for new rental</li> </ul>	<ul> <li>1.1. Receives Official Receipt</li> <li>1.2. Records and posts payment in the PAWA Cemetery Grave Rental Database</li> </ul>	P 1, 500.00 for every 5 years	8 minutes	Marvin Dagta Admin Officer I City Treasurer's Office (Priority Lane) Client Asiado Admin Aide I City Treasurer's Office
	1.3. Ask the client to fill-up the Feedback Form			Rita Olimpo Admin Aide I City Treasurer's
2. Submits the duly accomplished Feedback Form	2. Receives the duly accomplished Feedback Form		2 minutes	Office
	Total		10 minutes	

#### 8. Issuance of Order of Payment and Posting of Ibalong and PBN Housing Monthly Amortization Payments

Office or Division:	Business Tax [	Division		
Classification:	Simple			
Type of Transaction:	G2B Governme	ent to Business	Entity	
Who may avail:	<b>Business Taxp</b>	ayers		
	·	W	HERE TO SECU	RE
1 Original Copy Receipt	of Official	Cash Receipts Office	Division, City Tr	easurer's
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Requests order of payment	1.1. Issues order of payment	None	5 minutes	Ria Alindogan Admin Asst. VI City Treasurer's Office (Priority Lane)



2. Presents Official Receipt for posting	<ul> <li>1.2. Ask the client to fill up the Feedback Form</li> <li>2. Records and posts payment in the Ibalong and PBN Housing Awardee's Ledgers</li> </ul>	5 minutes	Marvin Dagta Admin Officer I City Treasurer's Office Rita Olimpo Admin Aide I City Treasurer's Office
2.1. Submits the duly accomplished Feedback Form	2.1. Receive the duly accomplished Feedback Form		
	Total	10 minutes	

# 9. Preparation of Pertinent Documents for Transfer of Ownership (Pabahay)

Office or Division:	Business Tax	Division		
Classification:	Simple			
Type of Transaction:	G2B Governn	nent to Business	Entity	
Who may avail:	<b>Business Tax</b>	payers		
		W	HERE TO SECU	RE
1 Original Copy of Offic	ial Receipt	Cash Receipts	Division, City Tr	easurer's Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Upon full payment, presents last Official Receipt to the person- in-charge	1.1 Records and posts payment in the Ibalong and PBN Housing Awardees' Ledgers	None	3 minutes	Ria Alindogan Admin. Asst. VI City Treasurer's Office (Priority Lane)



				CIAL
	1.2. Ask the client to fill up the Feedback Form	None		
2. Requests for pertinent documents for	2.1 Receives request for pertinent documents for Transfer of Ownership and informs client to wait for availability of Deed of Absolute Sale (DOAS) and Deed of Restrictions (DOR)	None	2 minutes	Rita Olimpo Admin Aide I City Treasurer's Office
Transfer of Ownership	2.3 Prepares DOAS and DOR, Certificate of Full Payment, letter-request to GSO Head for the original TCT and letter- request to City Assessor for the tax declaration/s.	None	1.5 hours	
3. Waits for advice from person-in-charge that DOAS and DOR are	3.1 Informs client that DOAS and DOR are now ready for signature by the awardee and spouse, if applicable	None	5 minutes	
ready for signature	3.2 Releases DOAS and DOR to client for signature by awardee and spouse, if applicable	None	5 minutes	



				CIAL
	4.1 Receives signed DOAS and DOR and informs client to wait for advice on the availability of complete documents	None	5 minutes	
	4.2 Requests the City Treasurer to sign on the DOAS, DOR and letter- requests	None	30 minutes	
4. Signs and returns signed DOAS and DOR and waits for advice on the availability of complete documents	4.3 Requests the Urban Poor Affairs Office (UPAO) Head to sign on the DOAS and DOR	None	30 minutes	
	4.4 Requests the City Mayor to sign on the DOAS and DOR	None	30 minutes	
	4.5 Submits letter- requests to GSO and CAO and waits for the release of the documents	None	30 minutes	
	4.6 Waits for the release of the TCTs and Tax Declaration/s	None	24 hours	
5. Receives advice from person-in-charge that the requested documents are now ready for release.	5 Once all documents are received, informs client of the availability of the documents.	None	5 minutes	



6.1. Receives all documents from person-in-charge	6.1 Releases all documents to client	None	E minutos	
6.2. Submits the duly accomplished Feedback form	6.2. Receives the duly accomplished Feedback form	None	5 minutes	
	Total:		3 Working Days and 4 hours	

**10. Issuance of Realty Tax Billing / Statement of Account** The Realty Tax Billing/Statement of Account is issued to individuals who want to update their realty tax delinguencies.

	nei realty tax deinquencies.			
Office or Division:	Land Tax Divis	ion		
Classification:	Simple			
Type of Transaction:	G2C;G2B;G2G	Government –	transacting publ	ic/business
	entity/othergov	ernment agency	y	
Who may avail:	Realty Taxpaye	ers		
	•	W	HERE TO SECU	RE
<ul> <li>1 Original Copy Official Receipt</li> <li>1 Original Copy declaration or the details of the pr</li> </ul>	of Latest tax		operty owner essor's Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill up the request form	1. Advise client to fill-up request form together with the Feedback Form	none	2 minutes	Amelia Punzalan LRCO III City Treasurer's Office Maria Vanessa
2. For tax billing, present copy of latest RPT Official Receipt or latest tax declaration or the complete details of the property.	2. Verify and prints Realty Tax Billing/ Statement of Account	none	8 minutes/ Tax declaration	Dordas RCC II City Treasurer's Office (Priority Lane)



3. Receive RPT Statement of Account	3. Issue RPT Statement of Account	none		Lani Esplana Admin Aide I City Treasurer's Office
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished Feedback form	none		Venus Balladolid Admin Aide VI City Treasurer's Office
	Total		10 minutes	

#### **11. Realty Property Tax Clearance**

The Realty Property Tax Clearance is issued to validate if the payments were updated. It is a requirement for transfer purposes, titling, building permit, business permit, zoning, fencing and other purposes.

Office or Division:	Land Tax Divis	ion
Classification:	Simple	
Type of Transaction:	G2C;G2B;G2G	Government – transacting public/business
	entity/othergov	ernment agency
Who may avail:	Realty Taxpaye	
		WHERE TO SECURE
One (1) Photocopy of t A. For Transfer Pu - Mode of Transfe Sale / Donation Extra Judicial Settlement/Affic Consolidation) - SPA - ID B. For Titling Purpo - 1 Copy of Tax D - 1 Valid ID C. Transfer of Tax - 1 Copy of Title - Mode of transfe - 1 Valid ID D. Other Purpose of Reference) - 1 Valid ID	rposes er (Deed of / Assignment / avit of Declaration Declaration	<ul> <li>Owner of the Property</li> <li>City Assessor's Office</li> </ul>



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill up the request form	1. Advise client to fill-up request form together with the Feedback Form	None	2 minutes	Amelia Punzalan LRCO III City Treasurer's
2. Submit the complete details of the Real Property including its purpose	2. Verify Realty Tax Payment/ Validate if payment is updated	None	8 minutes/ Tax declaration	Office Maria Vanessa Dordas RCC II City Treasurer's Office (Priority Lane)
3. Proceed to the Cashier for Payment	3. Issue Order of Payment	None		
4. Present Official Receipt for Tax Clearance	4. Prepare Land Tax Clearance	None		Venus Balladolid Admin Aide VI City Treasurer's Office Lani Esplana
5. Receive Tax Clearance	5. Issue Tax Clearance	None	5 minutes	
6. Submits the duly accomplished Feedback Form	6. Receives the duly accomplished Feedback Form	None		Admin Aide I City Treasurer's Office
	Total		15 minutes	

#### **12. Transfer Tax Assessment**

Transfer of ownership of real property units due to execution of deed of sale / donation, transfer by succession or by any other means of transfer is subject to payment of Transfer Tax.



Office or Division:	Land Tax Division			
Classification:	Simple			
Type of Transaction:	G2C;G2B;G2G	Government - tra	nsacting publ	lic/business
	entity/other gov	ernment agency		
Who may avail:	Realty Taxpaye			
		WH	ERE TO SECU	JRE
<ul> <li>One (1) Photocopy of the following <ul> <li>Deed of Sale / Donation /</li> <li>Assignment / Conveyance/ Extra</li> <li>Judicial Settlement/ Affidavit of</li> <li>Consolidation</li> <li>Latest Tax Declaration</li> <li>Tax Clearance - Realty taxes</li> <li>paid up to current year</li> <li>Certification of No Improvement</li> <li>(If No Building)</li> </ul> </li> </ul>		- City Asses - Land Tax [	he Property sor's Office Division, City T essor's Office	reasurer's Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Fill up he request form	1. Advise client to fill-up request form together with the Feedback Form	None	2 minutes	Maria Vanessa Dordas RCC II City Treasurer's Office Lani Esplana Admin Aide I
	2.1. Check the completeness of the requirements	None	5 minutes	City Treasurer's Office Amelia Punzalan LRCO III City Treasurer's Office
2. Submit the photocopy of all the required documents	<ul><li>2.2. Compute Amount of Transfer tax to be paid</li><li>2.3. Ask the</li></ul>	Assessment fees as provided under City Ordinance	6 minutes	Vilma Pujol LRCO IV City Treasurer's Office Danilo Almilla Admin Officer V City Treasurer's Office
	client to fill up the Feedback Form	No. 13-2007		Maria Vanessa Dordas RCC II City Treasurer's Office
3. Proceed to the Cashier for Payment	3. Issue Transfer Tax Assessment	none	2 minutos	Lani Esplana Admin Aide I City Treasurer's Office
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished	none	2 minutes	Venus Balladolid Admin Aide VI City Treasurer's Office



Feedback			Amelia
Form			Punzalan LRCO
			111
			City Treasurer's Office
Total	15	5 minutes	

#### 13. Payment in Cash

Disbursement by cash shall be made from cash advance drawn and maintained in accordance with COA rules and regulation. Cash payments shall be made only on duly approved payrolls /disbursement voucher.

Office or Division:	Cash Disbursen	nent Division			
Classification:	Simple	Simple			
Type of Transaction:	G2G Governme	G2G Government- Government Officials and Employees			
	Government Ag	Government Agency			
Who may avail:	LGU-Legazpi E	mployees, and Ot			
CHECKLIST OF REC		WH	ERE TO SECU	JRE	
<ul> <li>1 Copy of Valid</li> <li>1 Original Copy Authorization</li> </ul>		- Governme - Claimant	ent Agency/ S	School/Bus Est.	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Verify at the posted listing the name of the payee, payroll number & CT number	1.1. Advise client to verify his/her name at the posted listing	None	2 minutes	Imelda Mayor	
Note: Senior Citizen, PWD, Pregnant, Nursing Mothers; Please proceed to the designated courtesy lane	1.2. Ask the client to fill up the Feedback Form	None	2 minutes	City Treasurer's Office Lani Agarin Admin Asst. II City Treasurer's Office Aileen Agripa Admin Aide I	
2. Proceed at the designated Windows and ask for the payroll	2. Checked the name of the payee in the approved payroll	None	2 minutes	City Treasurer's Office <b>Alma Santillan</b> Admin Aide I City Treasurer's Office	
3. Present a valid ID, SPA/ Authorization and Claimants affix	3. Issue cash payment	None	5 minutes		



signature or thumbmark to acknowledge receipt of payments				
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished Feedback Form	None		
	Total		9 minutes	

#### 14. Payment and Release of Checks

Payments by checks shall be drawn only on duly approved disbursement voucher signed by the City Treasurer and countersigned by the City Administrator / Vice Mayor. Checks shall be release only to the payee or his duly authorized representative and is required to acknowledged receipt thereof.

Office or Division:	Cash Disbursen	nent Division			
Classification:	Simple				
Type of Transaction:	G2B G2G ; G2C	G2B G2G ; G2C Government to transacting public/business			
	entity/other gove	entity/other government agency			
Who may avail:		mployees/ Official	s, Creditors		
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECL	JRE	
<ul> <li>1 Copy of Valid</li> <li>1 Original Copy Authorization</li> <li>1 Original Copy Receipt/ Sales</li> </ul>	of SPA / v of Official	- Claimant Official - Claimant			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Inquire at the Cash Disbursement personnel if check id available for release <b>Note:</b> Senior Citizen, PWD, Pregnant, Nursing Mothers;	1.1. Verify the name of the concern office or individual in the list of prepared checks	None	5 minutes	Constance Oliveros SAO City Treasurer's Office Teresita Ariola Admin Asst. VI City Treasurer's Office Elena Macinas	
Please proceed to the designated courtesy lane	1.2. Ask the client to fill up	None		RCC III City Treasurer's Office <b>Ferl Yamat</b>	

				OF THE LAL SET
	the Feedback Form			RCC II City Treasurer's Office
2.1 Present valid ID and Issue Official Receipt/ Sales Invoice		None		
2.2. Sign voucher and check register	2. Release Check	None		
2.3. Receive check		None		
3. Submits the duly accomplished Feedback Form	3.Receives the duly accomplished Feedback Form	None		
	Total		5 minutes	

#### **15. Issuance of Community Tax Certificate or CTC**

A Community Tax Certificate (CTC) is proof that an individual is a resident of the city and that she/he has paid the necessary dues arising from the income derived from business, exercise of profession and/or ownership of real properties in the area. Profit and non-profit organizations and other entities operating in the city must also secure a CTC.

Office or Division:	Cash Receipts Division			
Classification:	Simple			
Type of Transaction:	G2B G2G ; G2C	C Government to t	ransacting pu	Iblic/business
	entity/other gove	ernment agency		
Who may avail:	LGU-Legazpi Ei	mployees/ Official	s, Creditors	
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECL	JRE
<ul> <li>Properly filled-u</li> <li>1 Copy of Valid</li> <li>1 Original Copy Authorization</li> <li>1 Original Copy Receipt/ Sales</li> </ul>	iD v of SPA/ v of Official	<ul> <li>Cash Rece Office</li> <li>Taxpayer/</li> <li>Taxpayer/</li> <li>Taxpayer/</li> </ul>	Client Client	City Treasurer's
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE



	Total		5 minutes	
5. Submits the duly accomplished Feedback Form	5. Receives the duly accomplished Feedback form			
4. Receive the CTC	4. Issue / Release the original copy of CTC and secure duplicate and triplicate copies of cedula.		3 minutes	Luzviminda Montealegre Admin Aide I City Treasurer's Office Jeric Bueza Admin Aide I City Treasurer's Office Marilou Jadie Admin Aide VI City Treasurer's Office
3. Pay the amount due, then affix signature and thumb mark	3. Receive payment and request the client to affix his/her signature and thumb mark on the original, duplicate and triplicate copies of the CTC	Assessment fees as provided under City ordinance No. 13-2007		Senior Admin Asst. II City Treasurer's Office Julie Miras Senior Admin Asst. II City Treasurer's Office Verna Serrano RCC II City Treasurer's Office Gina Austero RCC II City Treasurer's Office
<ol> <li>Proceed to the Queuing Personnel, get a transaction number and fill-up the Personal Data Form (Individual)</li> <li>Wait for your number to be flashed on the Queuing Monitor and Submit Accomplished Personal Data Form for individual; Present ITR for Corporations</li> </ol>	Client together with the Feedback Form 2. Receive the Accomplished Personal Data Form for Individual and ITR for Corporations		2 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane) Benjamin Gile
Individual or Corporation	1. Give a Transaction number to			



#### **16. Issuance of Official Receipt for Professional Tax Payment.**

Professional taxes are imposed upon any and all individual engaged in the practice of their professions. Professionals employed in the government are exempted in the payment of the professional tax.

The professional tax shall be payable annually, on or before the thirty-first (31st) of January of every year.

Office or Division:	Cash Receipts Division				
Classification:	Simple				
Type of Transaction:	G2C Governme	G2C Government to transacting public			
Who may avail:		ngaged in the prac			
CHECKLIST OF REC					
- 1 Original Copy PTR Form	of Filled-up	- Cash Rece Office	eipts Division, (	City Treasurer's	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Proceed to the Queuing Personnel, get a transaction number and accomplish the PTR Form	1. Give a Transaction number and PTR Form together with the Feedback Form	None	2 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane)	
2. Wait for your number to be flashed on the Queuing Monitor and Present your ITR	2. Receive the PTR Form and ITR	None	2 minutes	Constancia Ate	
<ul><li>3. Pay the amount due</li><li>4. Submits the duly accomplished Feedback form</li></ul>	<ul> <li>3. Issue Official Receipt</li> <li>4. Receives the duly accomplished Feedback Form</li> </ul>	Assessment fees as provided under City Ordinance No. 13-2007	2 minutes	City Treasurer's Office Verna Serrano RCC II City Treasurer's Office Gina Austero RCC II	



		CIAL
		City Treasurer's Office
		Luzviminda Montealegre <i>Admin Aide I</i> City Treasurer's Office
		Jeric Bueza Admin Aide I City Treasurer's Office
Total	6 Minutes	

# 17. Issuance of Official Receipt for Burial / Transfer of Cadaver / Exhumation

Office or Division:	Cash Receipts Division			
Classification:	Simple			
Type of Transaction:	G2C Governme	nt to transacting p	oublic	
Who may avail:	All			
CHECKLIST OF REC		WH	ERE TO SECL	JRE
For Burial- 1 Copy of I Certificate	Death			
For Exhumation/ Transfer of Cadaver- order of Payment		<ul> <li>Cash Receipts Division, City Treasurer's Office</li> </ul>		ı, City
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
<ol> <li>Proceed to the Queuing Personnel, get a transaction number and Wait for your number to be flashed on the Queuing Monitor</li> <li>Present the Order of Payment/ Death Certificate</li> </ol>	<ol> <li>Give a Transaction number to the client together with the Feedback Form</li> <li>Receive the Order of Payment/ Death Certificate</li> <li>Issues</li> </ol>	Assessment fees as provided under City Ordinance No. 13-2007	5 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane) Constancia Ate Admin Asst. III City Treasurer's Office Verna Serrano
3. Pay the amount due	3. Issues Official Receipt			RCC II City Treasurer's Office



4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished		Gina Austero RCC II City Treasurer's Office
	Feedback Form		Luzviminda Montealegre Admin Aide I City Treasurer's Office
			Jeric Bueza Admin Aide I City Treasurer's Office
	Total	5 minutes	
	10(01	5 minutes	

# 18. Issuance of Official Receipt for payment of Business Tax and other fees and charges.

Office or Division:	Cash Receipts	Cash Receipts Division			
Classification:	Simple				
Type of Transaction:	G2C Governme	nt to transacting p	oublic		
Who may avail:	All				
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECL	JRE	
<ul> <li>1 Original Copy Payment for Business and Charges</li> </ul>	of Tax order of , Other Fees	-	Permit and Li cern office	icensing Office/	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
<ol> <li>Proceed to the Queuing Personnel, get a transaction number and Wait for your number to be flashed on the Queuing Monitor</li> <li>Submit the Order of Payment</li> <li>Pay the amount due</li> </ol>	<ol> <li>Give a Transaction number to the client together with the Feedback Form</li> <li>Receive the Order of Payment</li> <li>Issue Official Receipt</li> </ol>	Assessment fees as provided under City Ordinance No. 13-2007	5 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane) Benjamin Gile Senior Admin Asst. II City Treasurer's Office Julie Miras Senior Admin Asst. II City Treasurer's Office	

			FICIAL SU
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished Feedback Form		Constancia Ate Admin Asst. III City Treasurer's Office Verna Serrano RCC II City Treasurer's Office Gina Austero RCC II City Treasurer's Office Luzviminda Montealegre Admin Aide I City Treasurer's Office Jeric Bueza Admin Aide City Treasurer's Office
	Total	5 minutes	

### **19. Issuance of Official Receipt for payment of Real Property Tax.**

Office or Division:	Cash Receipts	Division		
Classification:	Simple			
Type of Transaction:	G2C G2B G2G	; Government to t	ransacting pu	Iblic/business
	entity/other gov	ernment agency		
Who may avail:	Real Property T	ax Owners		
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECL	JRE
- 1 Original Copy	✓ of Real	- Realty Ta	x Division, Ci	ty Treasurer's
Property		Office		-
Tax Statement of Acc	ount			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAIDPROCESSI NG TIMEPERSON RESPONSIBLI		
<ol> <li>Proceed to the Queuing Personnel, get a transaction number and Wait for your number to be flashed on the Queuing Monitor</li> <li>Submit the Statement of Account</li> </ol>	1. Give a Transaction number to the client together with the Feedback Form	Assessment fees as provided under City Ordinance No. 13-2007	5 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane)



Feeuback FOIIII	accomplished Feedback Form Total:	5 minutes	RCC II City Treasurer's Office Luzviminda Montealegre Admin Aide I City Treasurer's Office
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished		Verna Serrano RCC II City Treasurer's Office
3. Pay the amount due	3. Issue Official Receipt		Constancia Ate Admin Asst. III City Treasurer's Office
	2. Receive the Statement of Account		Benjamin Gile Senior Admin Asst. II City Treasurer's Office

#### **20.** Issuance of Official Receipt for payment of Transfer Tax.

Payment of Transfer tax shall be made within sixty 60 days from the date of notary services.

Office or Division:	Cash Receipts	Division		
Classification:	Simple			
Type of Transaction:	G2C G2B G2G	; Government to t	ransacting pu	Iblic/business
	entity/other government agency			
Who may avail:	Real Property T	ax Owners		
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECL	JRE
- 1 Original Copy Tax Assessment	of Transfer	- Land Tax Office	Division, City	<sup>,</sup> Treasurer's
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Proceed to the Queuing Personnel, get a transaction number and Wait for your number to be flashed on the Queuing Monitor	1. Give a Transaction number to the client together with Feedback Form	Assessment fees as provided under City Ordinance No. 13-2007	5 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II City Treasurer's Office (Priority Lane)
2. Submit the Transfer Tax Assessment	2. Receive and Check the date of the Assessment	13-2007		Benjamin Gile Senior Admin Asst. II City Treasurer's Office

			PARICIAL SEF
3. Pay the amount due	3. Issue Official Receipt		Constancia Ate Admin Asst. III City Treasurer's Office Verna Serrano
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished Feedback Form		RCC II City Treasurer's Office Gina Austero RCC II City Treasurer's Office Luzviminda Montealegre Admin Aide I City Treasurer's Office Jeric Bueza Admin Aide I City Treasurer's Office
	Total:	5 minutes	

# 21. Issuance of Official Receipt for Certifications, Clearances, and Other Miscellaneous and Violation fees

Office or Division:	Cash Receipts	Division		
Classification:	Simple			
Type of Transaction:	G2C G2B G2G	; Government to t	ransacting pul	olic/business
	entity/other gov	entity/other government agency		
Who may avail:	Real Property T	ax Owners		
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECU	RE
- 1 Original Copy Payment	of Order of	- City Assessor's Office, City Health Office /Other Office Concern		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBL E
1.Proceed to the Queuing Personnel, get a transaction number and Wait for your number to be flashed on the Queuing Monitor	1. Give a Transaction number to the client together with the Feedback Form	Assessment fees as provided under City Ordinance No.	5 minutes	Rafael Briones Admin Aide I City Treasurer's Office (Queuing Personnel) Reggie Parinas RCC II
2. Submit the Order of Payment	2. Receive the Order of Payment	13-2007		City Treasurer's Office <b>(Priority Lane)</b>
3. Pay the amount due	3. Issue Official Receipt			Benjamin Gile

			FICIAL SET
4. Submits the duly accomplished Feedback Form	4. Receives the duly accomplished		Senior Admin Asst. II City Treasurer's Office
	Feedback Form		Julie Miras Senior Admin Asst. II City Treasurer's Office
			Constancia Ate Admin Asst. III City Treasurer's Office
			Verna Serrano RCC II City Treasurer's Office
			Gina Austero RCC II City Treasurer's Office
			Luzviminda Montealegre Admin Aide I City Treasurer's Office
			Jeric Bueza Admin Aide I City Treasurer's Office
	Total:	5 minutes	

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#### 22. Requisition of Accountable Forms

Office or Division: Classification:	Administrative Division			
Type of Transaction:	Simple	nt to Covernment		orpmont
Type of fransaction.		nt to Government	Agency, Gov	emment
Who may avail:	Official, Employee			
Who may avail.	Brgy Treasurers, SK Treasurers, City Treasurer's Office Collectors, PNP-Legazpi City Central Police Station, Public Safety Officers			
CHECKLIST OF REC	QUIREMENTS WHERE TO SECURE			
<ul> <li>4 Original Copie accomplished F Voucher Form</li> <li>4 Original Copie accomplished I Receipt of Acco</li> </ul>	Requisition and es of Duly nvoice and	- Administr Treasurer	ative Division, 's	, City
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBL E



Accountant's Office for Certification of Remittances of previous requisition       1.2. Ask the client to fill up the Feedback       None       Coffice         2. From Accounting Office, return to City Treasurer's for approval of requisition       2. Check/ Verify and Approve application and advise client to proceed to the cashier       Php 110.00/ pad (with surcharge)       5 minutes       Rosalina Pasa ISA III City Treasurer's Office         3. After payment, return to the issuing officer, present the Official Receipt and accomplished form then Proceed to the City Auditor's Office       3. Record the Official Receipt Serial Numbers of Accountable       none       Carita P. De Guzman City Treasurer/SAO         4. From City Auditor's Office, return to the City Treasurer's Office       4. Release Official Receipts and copy of Receipts and copy of Requisition       none       2 minutes         4. From City Auditor's Office Official Receipt and a copy of Requisition       2 minutes       Rosalina Rosalina Pasa ISA III City Treasurer'S Office Invoice and RIV.					
FormForm2. From Accounting Office, return to City Treasurer's for approval of requisition2. Check/ Verify and Approve application and advise client to proceed to the official Receipt/ Serial Official Receipt/ Serial Numbers of Accountable Form in the Invoice and Receipts and copy of Requisition5. minutes3. After payment, return to the issuing officer, present the Official Accountable Form in the Invoice and RIV.noneCarlita P. De Guzman City Treasurer's Office4. From City Auditor's Office, return to the City Treasurer's Official Receipts and a copy of Requisition and Invoice3. Receives the duly accomplished S. Receives the duly accomplishednone4. From City Auditor's Office074. From City Auditor's Office014. From City Auditor's Office015. Submits the duly accomplished5. Receives the duly accomplished25. Submits the duly accomplished5. Receives the duly accomplished16. Submits the duly accomplished5. Receives the duly accomplished17. Submits the duly accomplished5. Receives the duly accomplished06. Submits the duly accomplished5. Receives the duly accomplished07. Submits the duly accomplished5. Receives the duly accomplished07. Submits the duly accomplished5. Receives the duly accomplished07. Submits the duly accomplished5. Receives the duly <td>be filled-up and proceed to City Accountant's Office for Certification of Remittances of</td> <td>Forms 1.2. Ask the client to fill up</td> <td>None</td> <td>2 minutes</td> <td>Pasano ISA III City Treasurer's Office Luisa Malate Admin Aide I</td>	be filled-up and proceed to City Accountant's Office for Certification of Remittances of	Forms 1.2. Ask the client to fill up	None	2 minutes	Pasano ISA III City Treasurer's Office Luisa Malate Admin Aide I
Office, return to City Treasurer's for approval of requisitionVerify and Approve application and advise client to proceed to the cashierpad (with surcharge)Rosalina Pasa (SA III) City Treasurer's Office3. After payment, return to the issuing officer, present the Official Receipt and accomplished form Hen Proceed to the City Auditor's OfficeNoneCarita P. De Guzman City Treasurer's Official Accountable4. From City Auditor's Office, return to the City Treasurer's Office8. Release Porm in the Invoice and Receipt and Accountablenone4. From City Auditor's Office, return to the City Treasurer's Official Receipt and a copy of Requisition and Invoice4. Release Invoice and 		Form			
3. After payment, return to the issuing officer, present the Official Receipt and accomplished form then Proceed to the City Auditor's Office       3. Record the Official Receipt/ Serial Numbers of Accountable Form in the Invoice and RIV.       Constance Oliveros Acting Asst. City Treasurer/SAO         4. From City Auditor's Office, return to the City Treasurer's Office       4. Release Official Receipts and copy of Issue Voucher and Invoice       none         4. From City Auditor's Office, return to the City Treasurer's Official Receipts and copy of of the release of Official Receipt and a copy of Requisition and Invoice       4. Release Official Requisition Issue Voucher and Invoice       none         5. Submits the duly accomplished Feedback Form       5. Receives the duly accomplished Feedback       5. Receives the duly accomplished Feedback       5. Receives the duly       6. Receives the duly accomplished Feedback	Office, return to City Treasurer's for approval of	Verify and Approve application and advise client to proceed to the	pad (with	5 minutes	City Treasurer's Office Luisa Malate Admin Aide I City Treasurer's
4. From City Auditor's Office, return to the City Treasurer's Office for the release of a copy of Requisition and InvoiceOfficial Receipts and copy of Issue Voucher and Invoice2 minutesRosalina Pasano/SA /// City Treasurer's Official City Treasurer's Office5. Submits the duly accomplished Feedback5. Receives the duly accomplished Feedback5. Receives the duly6. Receives office	return to the issuing officer, present the Official Receipt and accomplished form then Proceed to the	3. Record the Official Receipt/ Serial Numbers of Accountable Form in the Invoice and	none		Guzman City Treasurer Constance Oliveros Acting Asst. City
accomplishedthe dulyOfficeFeedback FormaccomplishedFeedback	Auditor's Office, return to the City Treasurer's Office for the release of Official Receipt and a copy of Requisition and Invoice	Official Receipts and copy of Requisition Issue Voucher and Invoice	none	2 minutes	Pasano <i>ISA III</i> City Treasurer's Office Luisa Malate Admin Aide I
Total: 14 minutes	accomplished	the duly accomplished Feedback Form		14 minutes	



### 23. Requisition of Community Tax Certificate (CTC)

Office or Division:	Administrative	Division		
Classification:	Simple			
Type of Transaction:		ent to Government	Agency . Gov	vernment
	Official, Employee			
Who may avail:	Brgy Treasurers, SK Treasurers, City Treasurer's Office			r's Office
-	Collectors			
CHECKLIST OF REC	QUIREMENTS	WH	ERE TO SECU	RE
<ul> <li>4 Original Copies of Duly accomplished Requisition and Voucher Form</li> <li>4 Original Copies of Duly accomplished Invoice and Receipt of Accountable Form</li> </ul>		- Administr Treasurer	ative Division	, City
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBL E
1. Ask for forms to be filled-up and proceed to City Accountant's Office for Certification of Remittances of previous requisition	1.1. Issue Forms 1.2. Ask the client to fill up Feedback Form	none	2 minutes	Rosalina Pasano ISA III City Treasurer's Office Luisa Malate Admin Aide I City Treasurer's Office
2. From Accounting Office, return to City Treasurer's for approval of requisition	2. Check/ Verify and Approve application	Php 110.00/ pad (with surcharge)	5 minutes	Rosalina Pasano ISA III City Treasurer's Office Luisa Malate Admin Aide I City Treasurer's Office Carlita P. De Guzman City Treasurer Constance Oliveros Acting Asst. City Treasurer/SAO



				CIAL
3. After payment, return to the issuing officer, present the Official Receipt and accomplished form then Proceed to the City Auditor's Office	3. Record the Official Receipt/ Serial Numbers of Accountable Form in the Invoice and RIV. Advise the client to proceed to the City Auditor's Office	None	5 minutes	Rosalina Pasano ISA III City Treasurer's Office Luisa Malate
4. From City Auditor's Office, return to the City Treasurer's Office for the release of Official Receipt and a copy of Requisition and Invoice	4. Release Official Receipts and copy of Requisition Issue Voucher and Invoice	None	2 minutes	Admin Aide I City Treasurer's Office
5. Submits the duly accomplished Feedback Form	5. Receives the duly accomplished Feedback Form			
	Total:		14 minutes	

### 24. Incoming Communication / Data Request

Office or Division:	Administrative Division			
Classification:	Simple			
Type of Transaction:	G2C G2B G2G Government to transacting public / business			
	entity Government Agency			
Who may avail:	All			
CHECKLIST OF REC	QUIREMENTS	WHERE TO SECURE		
1 Original Copy of Letter / Data				
request				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBL E
1.Submit a Letter Request	1. Receive the letter and	None	2 minutes	Maria Lourian Opeda Admin Asst. I City Treasurer's Office



	stamp with the date. Give the receiving copy to the client 1.1 Forward the letter to the City Treasurer for appropriate action			Luisa Malate Admin Aide I City Treasurer's Office
2. Secure official receiving copy and wait for the feedback	2. Advise the client to wait for the reply within 2-3 days and ask to fill up a Feedback Form	None	5 minutes	
	Total:		7 minutes	



### **Procedure for Filing Complaint**

FEEDBACK AND COMPLAINTS MECHANISM		
How to send feedback	Accomplish the survey/feedback form and drop in designated drop box.	
	Email at: cto_leg@yahoo.com	
How feedbacks are processed	<ol> <li>Every Friday, the assigned personnel open the drop box and consolidate the feedback forms.</li> <li>The Chief of the Administrative Division verifies the nature of the queries &amp; feedbacks.</li> <li>It shall be referred to the Division concerned for proper immediate action.</li> <li>After determination of the proper action to be done, the Client will be informed in writing, email or thru phone of the necessary action, if any, until settled.</li> <li>All of the consolidated feedbacks will then be collated and averaged as to the rating each client gave per service availed.</li> <li>The collated rating per quarter are then presented under the Client Satisfaction Measurement (CSM) Report to get the office' rating.</li> <li>This report is then submitted to the City Human Resource Management Office (CHRMO) for the collation of the agency's rating to be presented under the Harmonized CSM Report which will be submitted to the ARTA Authority.</li> </ol>	
How to file a complaint	<ol> <li>Complaints may be filed through the following:         <ol> <li>In writing addressed to Carlita P. De Guzman,CGDH-1 CTO</li> <li>In person at Public Complaints Desk (PACD) of the City Treasurer's Office</li> <li>Via email at cto_leg@yahoo.com</li> <li>Assailing the incident being complained of, name of personnel</li> </ol> </li> </ol>	



	involved, essential evidence and other matters, if any.
How complaints are processed	<ol> <li>The Chief of the Administrative Division shall review and evaluate the complaints on a daily basis forwarded directly in the Office or via email.</li> <li>Upon review and evaluation, it shall be forwarded to the City Treasurer for proper action.</li> <li>The Office of the City Legal may be called upon in case the complaint involves controversy which requires legal opinion.</li> <li>If necessary, the client maybe informed through writing of the proper action to be taken.</li> </ol>
	For inquiries and follow-up, you may call at 2019487 or email at cto_leg@yahoo.com
Contact Information of CCB, PCC, ARTA	complaints@arta.gov.ph
	1-ARTA (2782)
	PCC:888
	CCB:0908-881-6565 (SMS)

Complaint/s may be filed in writing and addressed to:

Hon. Carmen Geraldine B. Rosal- City Mayor

Ms. Carlita P. De Guzman- City Treasurer

Clients are advised to follow –up the next working day, pending documents due to unusual circumstances beyond the control of the City Treasurer's Office.



Inquiries, Feedback Mechanism, Suggestions, Recommendations and/or complaints may be sent to:

Carlita P. De Guzman- City Treasurer Constance S. Oliveros – Acting Asst. City Treasurer / Cash Disbursement Division Raymund C. Arcos – Chief, Administrative Division Rowena M. Trinidad – Chief, Business Tax Division Vilma V. Pujol – Chief, Realty Tax Division Amada Esplana – OIC-Chief, Cash Receipts Division

Office Number: (052) 201-94-87 Email: cto\_leg@yahoo.com



# **CITY VETERINARY OFFICE**

### **Internal Services**



#### **INTERNAL SERVICES**

	_		•		
Office or Division	•	City veterinary Off	ice		
Classification:		Complex			
Type of Transacti	on:	Frontline Services			
Who may avail:		Walk- in Clients	1		
		REQUIREMENTS			RE TO SECURE
Veterinary Healt	h Ce	rtificate		City Veterin	ary Office
CLIENTS	AG	ENCY ACTIONS	FEES	PROCESSING	PERSON
STEPS			TO BE	TIME	RESPONSIBLE
VETERINARY THERTAPEUTIC SERVICES	For Clie	In–Patient ents	PAID		
1. Consults the status of the pet /		Records client and Patient	None	10-20 minutes	Administrative Aide I
livestock and other		information/ Data		5 - 10 minutes	City Veterinarian
related animals.		Interviews the clients /diagnose the patient/s			Administrative Aide I
		Prepares animal health card or certificate of registration		5- 10 minutes	Administrative Aide
		Signs the animal health card or certificate of registration and issues prescription, if needed		5 -10 minutes	City Veterinarian



	For Out- Patient			
2. Consultation/		None	10 -20 minutes	City Veterinarian
2. Consultation/ Request for treatment	Client 2.1 Interviews the client/refers the client to Livestock Inspector/ Technician in charge 2.2 Visit and diagnose the patient/s. Gives the necessary medication 2.3 Visits the patients for next follow – up treatment/ medication, if needed.	None	10 -20 minutes 10-20 minutes 30 minutes	City Veterinarian City Veterinarian Administrative Aide I Livestock Inspector I Administrative Aide I
	TOTAL		2 hours	

### **INTERNAL SERVICES**

Office or	City Veterinary Office
Division:	
Classification:	Complex
Type of	Frontline Services
Transaction:	
Who may avail:	Walk –in Clients



				CIAL SU		
	ST OF	WHERE TO SECURE				
Check -up of anim	nals	City Veterinary Office				
Veterinary Health		,	,			
CLIENTS STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
ISSUANCE OF VETERINARY HEALTH CERTIFICATE						
1. Client secure Veterinary Health Certificate (VHC) as per requisite from Bureau of Animal Industry	1.1 Interviews the Client on the date of animal to be transported, the date and destination		5-10 minutes	Senior Admin. Asst. II Administrative Aide I City Veterinarian		
	1.2 Inspect the animals; checks the animal health card or the vaccination certificate		5 -10 minutes	City Veterinarian		

1.3 If approved issues Referral slip for payment at the		5- 10 minutes	Administrative Aide I
City Treasurer's Office 1.4 Pays at the City	P 100.00	5 -10 minutes	Administrative Aide I



·			CIAL
Treasurer's			
Office			
and present the			
OR			
number			
		5 -10	Administrative Aide I
1.5 Prepares the		minutes	
Shipping Permit;			Senior Admin. Asst. II
records the OR			
Number in the			
logbook of			
payments;			
records data / info			
of the animal and			
client and			
releases the			
shipping permit.			
 TOTAL MINU	TES	50 minutes	

#### **INTERNAL SERVICES**

Office or Division	1:	City Veterinary Office				
Classification:		Complex				
Type of Transacti	ion:	Frontline Service	s			
Who may Avail:		Farmers/ Livestock and Poultry Raisers				
CHECKLIST	T OF REQUIREMENTS WHERE TO SECURE				SECURE	
Registration with C	Office	to avail PCIC			City Veterinary	Office / PCIC
insurance						
CLIENT STEPS	AGE	ENCY ACTIONS	FEE: BE F		PROCESSING TIME	PERSON RESPONSIBLE
ANIMAL PROPAGATION AND DEVELOPMENT					5-10 minutes	



1. Client informs	1.1 Refers the client			Administrative Aide
the office of the breeding stage of sow/s.	to the City Veterinarian.		5-10 minutes	Administrative Aide I
	1.2 Interviews the client.		5-10 minutes	Administrative Aide I
				City Veterinarian
	1.3 Assigns Livestock Inspector / Technician to diagnose the sow and conducts Artificial Insemination (AI), if application.		5-10 minutes	City Veterinarian Livestock Inspector I
	1.4 If applicable, conducts Artificial Insemination to the sow.		20-30 minutes	Livestock Inspector I
	TOTAL	•	1 hour	



### **CITY VETERINARY OFFICE**

### **External Services**



Office or Divisio	<b>D ·</b>	City Veterinary Office					
Classification:	<u>n.</u>	City Veterina					
Type of Transac	tion:	Frontline Ser	Nicoc				
Who may Avail:		Pet Owners	VICES				
	CHECKLIST OF REQUIREMENTS WHERE TO SECURE						
Veterinary Health			3				
Veterinary Health		;		City veter	rinary Office		
	Carus						
			FEES TO	PROCESSING	PERSON		
CLIENT STEPS	AGENC	ACTIONS	BE PAID	TIME	RESPONSIBLE		
Rabies Mass Vaccination 1. Client submits the Pre- registration survey on canine population for vaccination.	total n dogs s 1.2 Scheo mass and p letter Baran for the of mas vaccir 1.3 Revie	y and nines the number of surveyed. dules the vaccination. repares to the gay Captain e schedule ss nation.		5-10 minutes 3-5 minutes 3-5 minutes	Senior Admin. Asst. II Livestock Inspector I Livestock Inspector I Senior Admin. Asst. II City Veterinarian		
	to the	nation		20-30 minutes	Administrative Aide IV		



T				CIRE
	1.5 Immunize the Dog and records in the logbook		3-5 minutes per dog	Livestock Inspector I
	in the legeoort			Administrative Aide I
	1.6 Issues the Certificate of Registration duly		10-20 minutes	City Veterinarian
	signed by the Veterinarian and vaccinator as file copy of the			Livestock Inspector I
	Barangay.			
		TOTAL	75 Minutes	

Office or Division	on:	City Veterinary Office				
<b>Classification:</b>		Complex	Complex			
Type of Transa	ction:	Frontline Services				
Who may Avail:		Barangay	Rabies and C	ontrol	Committees	
CHECKI	LIST OF RE	EQUIREME	NTS		WHERE TO	) SECURE
Mandatory Regis	stration				City Veterir	nary Office
Request Slip – s	urrender or	for adoptio	n			
If claiming – orde	er of payme	ent				
CLIENT STEPS		INCY IONS	FEES TO PAID	BE	PROCESSING TIME	PERSON RESPONSIBLE
Stray Dog Elimination 1. Request from Barangay	1.1 Sched catchir	•			5-10 minutes	Administrative Aide I



				CIAL 9
Captain/Official to conduct stray dog elimination	coordination with requesting parties		30 mins –1	Administrative Aide
	1.2 Delivery of impounded dogs at the Dog Pound in Banquerohan		hour	IV
	Legazpi City.	₱1,000.00	10-20 minutes	Administrative Aide IV
	1.3 Impounding of stray dogs for 3 days; If claimed by the owner, the owner pays at the City Treasurers Office and the dog will be given medication, rabies vaccination before releasing to the owner.			Administrative Aide I
		TOTAL	60 Minutes	
I	1			

Office or Divisio	on: Cit	City Veterinary Office				
<b>Classification:</b>	Co	omplex				
Type of Transac	ction: Fro	ontline Services				
Who may Avail:	Me	eat Vendors – Dealers				
CHEC	CKLIST OF RE	QUIREMENTS		WHERE TO S	SECURE	
Ante and post me	Ante and post mortem form			Legazpi City Slaughterhouse		
Veterinary Health Certificate						
Payment of Slau	ghterhouse Ser	vices				
Meat Inspection	Certificate					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PROCESSING TIME	PERSON RESPONSIBLE	



MEAT INSPECTION SERVICES 1. Meat vendor delivers animals for slaughter at the City Abbatoir	1.1 Records the time and type of animals delivered in the	a.) Permit fee to Slaughter Large Cattle/ Carabao *Php. 2.00/kg. Hogs/Goats/Sheep/Deer *Php. 2.00/kg	5-10 minutes	Slaughterhouse Master II Meat Inspector II
	logbook per meat vendor.	Others *Php. 5.00/head b.) Slaughterhouse Service Fee 1. Slaughterhouse Service		Livestock Inspector II Admin. Aide IV Administrative
	1.2 Conducts ante mortem inspection	Fee : Large Cattle / Carabao *Php. 2.00/kg. Hogs/Goats/Sheep/Deer *Php. 1.50/kg Others *Php. 50.00/head	5-10 minutes	Aide III Meat Inspector I Administrative Aide I



	TOTAL	40 minutes	
purposes.			Administrative Aide I
Collection			Meat Inspector I
Treasurers Office for			Administrative Aide III
submitted to the City	*Php. 50.00/ head		Admin. Aide IV
Inspection Report to be	Each head of large cattle		Livestock Inspector II
animals in the Daily Meat	5. Livestock Development Fund:		Meat Inspector II
1.4 Records the slaughtered	Hogs/Goats/Sheep/Deer *Php. 10.00/heads	5-10 minutes	Slaughterhouse Master II
	*Php. 20.00/ head		
	Large Cattle/ Carabao		
	4. Ante Mortem Fee:		
	Meat of other animals *Php. 10.00/head		
	Hogs/Goats/Sheep/Deer *Php. 1.00/kg		
	Large Cattle / Carabao *Php. 1.00/kg.		Meat Inspector I Administrative Aide I
	3. Post Mortem Fee:		Administrative Aide III
	*Php. 10.00/head		
	Others		Admin. Aide IV
	Hogs/Goats/Sheep/Deer *Php. 10.00/heads		Livestock Inspector II
	*Php. 20.00/ head		Meat Inspector II
post mortem inspection	Large Cattle/ Carabao		Master II
1.3 Conducts	2. Corral Fee:	5-10 minutes	Slaughterhouse



Office or Divisio	on	City Veterinary O	ffice			
Classification		Complex				
Type of Transac	ction	Frontline Service	s			
Who may avail:		PWD's and differently abled, families directly impacted by food				
		crisis/pandemic	risis/pandemic			
CHECKLIS	CHECKLIST OF REQUIREMENTS				WHER	E TO SECURE
Letter request fo	r feed	ling program			Baranga	ys/Organization
Client Steps		Agency		ees To	Processing	Person
		Actions	В	e Paid	Time	Responsible
Government on Hunger/Mal- Nutrition Intervention and Expansion (GHIE) Food Program						
Client call in advance for egg reservation	the	Refers the client to Veterinarian			5-10 minutes	City Veterinarian Administrative Aide I
Egg Distribution	F a t	Ask for proof of Feeding Program and release egg he Feeding Program			5-10 minutes	City Veterinarian
Dispersal Progra for Pekin Duck and Range Chicken	1.3	If there is available stocks, asks for lis of recipients for dispersal and contract signing			5-10 minutes	City Veterinarian Administrative Aide I
			TO	<b>FAL</b>	30 minutes	



Complaints may be filed in writing or in person to:

HON. CARMEN GERALDINE B. ROSAL City Mayor – CP # 09209517266

**DR. EMMANUEL V. ESTIPONA** City Veterinarian – CP # 09615453386

#### SERVICE PLEDGE

We pledge to take necessary measures to eradicate, prevent or cure all forms of animal diseases to protect the public health and safety. We are also committed to perform our duties and responsibilities and treat our work with utmost honesty, competence and dedication. We adhere to the highest standards of veterinary services in the interest of public good.

#### Inquiries, Feedback Mechanisms, Suggestions, Recommendations, as well as Complaints may be send to:

#### DR. EMMANUEL V. ESTIPONA City Veterinarian



### **GENERAL SERVICES OFFICE**

### **Procurement Services**



#### 1. Purchase Request (PR), Certification of Mode of Procurement

The Purchase Request or PR is a document prepared by the client or end-user for the procurement of supplies, property, and equipment for official use. It serves as the basis for Canvass of items before preparation of Purchase Order (PO).

The Certification of Mode of Procurement is a document prepared and signed by the Bids and Awards Committee (BAC) Members when the PR is approved by the City Mayor.

Divisio		Administrative Division and Procurement Division				
Classif	fication:	Simple				
Type o Transa	action:		2B - Gov't to Business			
	CHECKLIS REQUIREM			WHERE TO	SECURE	
2. Appr 3. Appr End- Mayo	roved Purchas roved Obligatic roved Procure -User/Departm or er Supporting E	on Request ment Plan by ent Head/City	Provide	d-user)		
	ENT EPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E	
Purc Requ Oblig Requ	ent duly oved hase uest and gation uest and by End-	1. Check and receive the approved PR and OBR along with the supporting documents	None	5 minutes	<i>Administrative Aide I</i> Administrative Division	
User Depa Head Mayo attac supp	r/ artment d/ City or with	2. Prepare Certification for Mode of Procuremen t (to be signed by BAC members)	None	1 day	Administrative Aide I Procurement Division	

			FICIAL SU
TOTAL:	None	1 day 5 minutes	
		111110105	

# 2. Posting at Philippine Government Electronic Procurement System (PHILGEPS)

The Philippine Government Electronic Procurement System or PHILGEPS is the single, centralized electronic portal that serves as the primary and definitive source of information on government procurement in the Philippines. All Government Procurement Processes must be posted at this website.

Di	ivision:	Procurement [	Procurement Division			
С	lassification:	Simple	Simple			
-	/pe of ransaction:	G2G – Gov't to Gov't				
	CHECKL REQUIRE					
1.	and Obligation		Provided by Client (or end-user)			
2.	Certification		General Services Office			
	CLIENT STEPS	AGENCY ACTION	FEE S TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E	
1.	Present approved PR/OBR and Certification	1. Post details of the documents at PHILGEPS website (https://www. philgeps.gov . ph)	None	3 hours	<i>Computer Operator II</i> Procurement Division	
	·	TOTAL:	None	3 hours		

#### 3. Request for Quotation (RFQ), Abstract of Canvass and Award

The Request for Quotation or RFQ is a document prepared indicating the specification,



quantity of items from the Purchase Request for Canvass, Approved Budget for the Contract (ABC), and other terms and conditions of the item to be procured. It must also prescribe the manner by which price quotations shall be submitted within a specified period of time. The RFQ must be sent to at least three (3) qualified suppliers, contractors, or consultants. The Abstract on Canvass and Award is a document prepared, summarizing the RFQs submitted by suppliers, contractors, or consultants.

Division:	Procurement and Administrative Division			
Classification:	Simple			
Type of Transaction:	(1)G2C – Gov't to Citizen, (2)G2B - Gov't to Business and (3)G2G – Gov't to Gov't			
CHECKI REQUIRE	WHERE TO SECURE			
<ol> <li>Approved Documents for Procurement</li> <li>Other Supporting Documents</li> </ol>		Genera	I Services Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



1. Present	<ol> <li>Prepare and dispatch Request for Quotation to at least three (3) suppliers/ contractors/ or consultants of known qualifications</li> </ol>		1 day	Reproduction and Machine Operator I Procurement Division
approved Documents for Procurement and Supporting Documents	2. Prepare Abstract on Canvass and Award after receipt of dispatched RFQs from suppliers/ contractors/ or consultants of known qualification (for signature of BAC members)	None	1 day	<i>Admin. Aide I; Admin. Aide II</i> Administrative Division
	TOTAL:	None	2 days	

#### 4. Purchase Order

The Purchase Order or PO is a document prepared, addressed to the winning supplier/bidder, to deliver specific quantities of the requested supplies/goods/property subject to the terms and conditions.

Division:	Procurement Division			
Classification:	Simple			
Type of Transaction:	(2)G2B - Gov't to Business and (3)G2G – Gov't to Gov't			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ol> <li>Approved Abstract of Canvass and Award</li> <li>Approved Documents for Procurement</li> </ol>		General Services Office		



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present approved Abstract of Canvass and Award; and approved Documents for Procurement</li> </ol>	1. Prepare Purchase Order after completion of RFQs and Abstract of Canvass and Award	None	2 hours	Reproduction Machine Operator III; Admin. Aide IV Procurement Division
	TOTAL:	None	2 hours	

#### 5. Inspection and Acceptance Report (IAR)/ Requisition Issue Slip (RIS)/ Property Acknowledgment Receipt (PAR) and/or Inventory Custodian Slip (ICS) [if applicable]

The Inspection and Acceptance Report or IAR is a document prepared after inspection and acceptance of delivery of supplies and equipment based on the approved PO.

A Requisition Issue Slip or RIS is a document prepared for the issuance of items from stocks. Quantity, however, will be based on the PR submitted by the requesting party.

The Property Acknowledgement Receipt or PAR is a document prepared upon issuance of the property and/or equipment with a purchase amount of fifty thousand pesos (Php 50,000.00) and above and must be acknowledged by the accountable employee by signing on the space provided for. The Inventory Custodian Slip or ICS is a document prepared for the issuance of the requested supplies and/or equipment with a purchase amount of fourteen thousand and nine hundred ninety-nine pesos (Php14,999.00) or below and be acknowledged by the accountable employee by signing on the space provided for.

Division:	Procurement Division		
Classification:	Simple		
Type of Transaction:	G2G – Gov't to Gov't		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	



2. ( 3. (	<ul> <li>Invoice/ Statement of Account/ Sales Invoice/ Official Receipt (only if supplier has collection receipt)</li> <li>Complete Documents for Procurement</li> <li>Other Supporting Documents</li> </ul>			d by Winning bidde I Services Office	r
CLI	IENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
2.	Present Delivery Receipt/ Charge Invoice/ Statement of Account/ Sales Invoice/ Official Receipt (only if supplier has collection receipt) Complete documents for procurement; and Supporting Documents	<ol> <li>Inspection and Acceptance of delivered supplies and/or equipment</li> <li>Prepare Acceptance and Inspection Report</li> <li>Prepare Requisition Issue Slip</li> </ol>	None	3 hours	Admin. Aide II; Reproduction Machine Operator I Procurement Division
	Present roved RIS	4. Prepare PAR or ICS	None	1 hour	(CGDH-I) City General Services Officer Admin. Aide II Procurement Division Admin. Officer I Admin. Division



5. Releasing of supplies and/or equipment to client or end-user	None	2 days	Admin. Aide I; Admin Aide III; and Reproduction Mach. Operator I Procurement Division
TOTAL:	None	3 days and 4 hours	

#### 6. COA Receipt

The COA Receipt is a document prepared and submitted to the Commission on Audit or COA for updating and keeping track of the records of the Procurement Transactions undergone by the City Government of Legazpi.

Division:	Procurement Division				
Classification:	Simple				
Type of Transaction:					
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE				
<ol> <li>Approved Documents for Procurement</li> <li>Other Supporting Documents</li> </ol>	General Services Office				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	



<ol> <li>Present approved Documents for Procurement and Supporting Documents</li> </ol>	<ol> <li>Prepare COA Receipt upon receiving documents</li> <li>Submit COA Receipt to COA</li> </ol>	None	1 hour	<i>Admin. Aide I</i> Procurement Division
	TOTAL:	None	1	
			hour	

#### 7. Clearance

When the Procurement Process is completed, it is indicated that the documents have undergone the proper Procurement Procedure in accordance with Republic Act 9184.

Division:	Procurement D	ivision		
Classification:	Simple			
Type of Transaction:	G2G – Gov't to	o Gov't		
CHECKLIST OF REQUIREMENT		WHERE TO S	ECURE	
<ol> <li>Approved Documents f Procurement</li> <li>Other Supporting Docu</li> </ol>	General Services Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present approved Documents for Procurement and Supporting Documents</li> </ol>	1. Indicate on file documents that the transaction is completed	None	3 hours	Admin. Aide IV; Reproduction and Mach. Operator I; Admin. Aide I Procurement Division
	TOTAL:	None	3 hours	

#### 8. Letter of Intent

A Letter of Intent is a document that formally declares one party's intention to do any act that will require action or acknowledgement from another party. It usually precedes a binding document such as a contract.



Division:	Procurement Division			
Classification:	Simple			
Type of Transaction:	(1)G2C – Gov't to Citizen/(2)G2B - Gov't to Business and			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				ECURE
1. Letter of Intent Provided by Interested/prospective			pective bidder	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the Letter of Intent	1. Receive the Letter of Intent	None	30 minutes	Supervising Admin. Officer; Computer Operator II; Administrative Aide IV Procurement Division
	TOTAL:	None	30 minutes	

#### 9. Queries re: Bids and Awards Committee (BAC)

The Bids and Awards Committee or BAC have the following functions: advertise and/or post the Invitation to Bid, conduct pre-procurement and pre-bid conferences, determine the eligibility of prospective bidders, receive bids, conduct the evaluation of bids, undertake postqualification proceedings, recommend award of contracts to the Head of the Procuring Entity or his duly authorized representative, recommend the imposition of sanctions in accordance to RA 9184 Article XXIII, and perform such other related functions as may be necessary to assist in the Procurement Process.

Division:	Procurement Division			
Classification:	Simple			
Type of Transaction:	(1)G2C – Gov't to Citizen/(2)G2B - Gov't to Business and			
CHECKLIST OF REQUIREMENTS				
		WHERE TO SECURE		



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present queries re: BAC concerns	<ol> <li>Receive queries for immediate response</li> </ol>	None	4 hours	Supervising Admin. Officer; Computer Operator II; Administrative Aide IV Procurement Division
	TOTAL:	None	4 hours	

#### 10. City Mayor's Solicitation

A Solicitation Letter may contain the following: request for a donation, for business, or for presence on an occasion. Typically, the Office of the City Mayor receives a Solicitation Letter for donation. Upon receiving the letter, the City Mayor reviews then forwards the letter to the General Services Office for the Procurement Process.

Division:	Procurement Division				
Classification:	Highly Technical				
Type of Transaction:	(1)G2C – Gov't to Citizen/(2)G2B - Gov't to Business				
CHECKI REQUIRE		WHERE TO SECURE			
2. Approved Purcha	Purchase Request	Provided by Client General Service Office			

CLIENT STEPS	AGENCY ACTION	FEE S TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E
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1.	Present Letter- Request approved by the City Mayor with PR	<ol> <li>Receive Letter- Request for Procurement Process</li> </ol>	None	40 minutes	Reproduction and Machine Operator II/ Administrative Aide I Procurement Division
2.	Approve d PR PO/ RIS	<ol> <li>Provide Acknowledgemen t Receipt/ Purchase Order/Requisition Issue Slip for client and office record</li> <li>Release Solicited Items</li> </ol>	None	20 days	Reproduction and Machine Operator II Procurement Division
		TOTAL:	None	20 days 40 minutes	



## **GENERAL SERVICES OFFICE**

**Administrative Services** 



#### 1. Clearance for Retirees/ Resigned/ Transfer/ On Official Leave

Clearance is issued to an employee who is leaving office whether retiring, resigning, transferring to another office, on official leave of absence or travelling abroad while still in government service.

This Clearance is issued to clear an employee of all accountabilities under his responsibility. Before officially exiting the agency, either permanently or temporarily, the client must accomplish a Clearance Form for the accountabilities that must be transferred, returned, or condemned.

Di	<b>Division:</b> Administrative and Records Divisions				
	lassification:	Simple			
	ype of ransaction:	G2C – Gov't to Ci	itizen		
CHECKLIST OF REQUIREMENTS				WHERE TO SEC	URE
1.	Clearance Form Resignation/ Tr		City Hum	nan Resources Mana	igement Office
	CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Present Clearance for Retirement/ Resignation/ Transfer/ Leave	<ol> <li>Check accountabilities of availing client</li> <li>Recommend next steps to complete Clearance Form</li> </ol>	None	40 minutes	Supervising Admin. Officer; Administrative Officer I; Admin. Aide II; Admin. Aide I Administrative and
2.	Request for transfer, return or condemn of PPE [if applicable]	<ol> <li>Prepare PAR/ICS Form for Transfer</li> <li>Prepare Form for Return of ltems</li> <li>Prepare I &amp; I/ Report of Waste Materials of PPE</li> <li>Submit (with initial and date) to Department Head for final signature</li> </ol>	None	2 hours	Records Divisions



<ol> <li>Department Head signs document</li> <li>For release to availing client</li> </ol>		(CGDH-I) City General Services Officer
TOTAL:	3 hours 40 minutes	

### I. FEEDBACK AND COMPLAINTS

FEEDBACK AND COMPLAINT MECHANISM				
How to send feedback?	Answer the Client Satisfaction Measurement Survey located at the front desk of the office. E-mail Address:			
	lgu.legazpi.gso.786@gmail.com			
	Every Friday, the Officer-In-Charge compiles and records the feedback submitted.			
How feedback is processed?	Feedback requiring answers are forwarded to the relevant division and they are required to answer within two (2) days of receipt of the feedback. The answer of the office is then relayed to the client.			
How to file a complaint?	Answer the Client Satisfaction Measurement Survey located at the front desk of the office.			



How complaints are processed?	The Officer-In-Charge evaluates each complaint. Upon evaluation, the said Officer shall forward the complaint to the relevant division for their explanation. The Officer will create a report and shall submit to the Department Head for appropriate action. The Officer will give the feedback to the client.
Contact Information of General Services Office	Brgy. 13 – Ilawod West, Rizal Street Ground Floor, City Hall Compound, Albay, Philippines Contact Information: <u>Igu.legazpi.gso.786@gmail.com</u> <b>MARIA CHONA A. RIOCASA</b> <i>General Services Officer</i> <b>ROY E. DIMACULANGAN</b> <i>Assistant General Services Officer</i>



# **INTERNAL AUDIT SERVICE**



### **Internal Audit Service**

**External Services** 



### I. Technical Assistance to On-Site Researchers

Assistance is provided to assist students in the completion of academic requirements other researchers in the field of internal audit.

Office or Division:	Internal Audit Service			
Classification:	Highly Technical			
Type of Transaction:	G2G – Government to Citizen			
Who may avail:	All			
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE		
None		None		
CLIENT STEPS	IAS ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for interview/data	Grants request/schedules interview and provides data needed	+6	One (1) hour	Head of Internal Audit (HoIA) / Internal Auditor I / Internal Auditing Assistant/ In- charge of Information Technology Division/ In-Charge of Administrative Functions (ICAF)
	Total:	None	One (1) hour	

#### II. Technical Assistance to Online Researchers

Assistance is provided to online researchers in the field of internal audit.

Office or Division:	Internal Audit Service			
Classification:	Highly Technical			
Type of Transaction:	G2G – Government to Citizen			
Who may avail:	All			
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE		
None		None		
CLIENT STEPS	IAS ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for interview/ data	Grants request/ schedules interview and provides data needed.	None	One (1) hour	Head of Internal Audit (HoIA) / Internal Auditor I / Internal Auditing Assistant/ In- charge of Information Technology Division/ In-Charge of



			Administrative Functions (ICAF)
Total:	None	One (1) hour	



### **Internal Audit Service**

**Internal Services** 



# I. Technical Assistance to City Officials and Chiefs of Offices/Divisions/Sections

Assistance is provided to supervisors to help them carry out their office mandates in consonance with internal audit findings/recommendations.

Office or Division:	Internal Audit Service			
Classification:	Highly Technical			
Type of Transaction:	G2G – Government to G	overnmer	nt	
Who may avail:	City Officials/Chiefs of Of	ffices/Divi	sions/Sections	
CHECKLIST OF R	EQUIREMENTS		WHERE TO	SECURE
None	-	None		
CLIENT STEPS	IAS ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for data/ internal audit recommendations/advice	Grants request/analyzes given data and situationers/schedules meeting/provides information needed and/or makes appropriate recommendation/s	None	One(1) hour	Head of Internal Audit (HoIA) / Internal Auditor I / Internal Auditing Assistant/ In- charge of Information Technology Division/ In-Charge of Administrative Functions (ICAF)
	Total:	None	One (1) hour	

#### II. Technical Assistance to Rank-and-File Employees

Assistance/advice is provided to employees of the City Government of Legazpi to guide them in the performance of their duties

Office or Division:	Internal Audit Service		
Classification:	Highly Technical		
Type of Transaction:	G2G – Government to Government		
Who may avail:	Rank-and-File Employ	yees of the City Government of Legazpi	
CHECKLIST OF R	REQUIREMENTS WHERE TO SECURE		
None		None	



CLIENT STEPS	IAS ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for data internal audit recommendations/ advice	Grants request/ analyzes given data and situationers/ schedules meeting/ provides information needed and/or makes appropriate recommendations	None	One (1) hour	Head of Internal Audit (HoIA) / Internal Auditor I / Internal Auditing Assistant/ In- charge of Information Technology Division/ In-Charge of Administrative Functions (ICAF)
	Total:	None	One (1) hour	

FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback?	Answer the Client Feedback Form and drop it at the Feedbacks Drop Box located at the Public Assistance and Complaints Desk (PACD).
How feedbacks are processed?	Every Friday, the Officer monitoring the PACD opens the drop box, complies and records all feedback submitted.
	Feedback requiring answers are forwarded to the relevant offices and they are required to answer within three (3) days of the receipt of the feedback.
	The answers are then relayed to the citizens.
	For inquiries and follow-ups, clients may contact the telephone number: .:(052) 742-3484
How to file a complaint?	Answer the Client Complaint Form and drop it at the Complaints Drop Box located at the Public Assistance and Complaints Desk (PACD).
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident



v-ups, clients may contact .:(052) 742-3484
g the PACD opens the asis and evaluates each
officer shall start the ard the complaint to the explanation.
are a report after the I submit to the chief of ction.
e feedback to the client.
-ups, clients may contact .:(052) 742-3484
E. Jamisal ht Department Head I
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<u>ta.gov.ph</u> SMS)
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# Legazpi City Hospital ACCOUNTING SECTION

**Internal Services** 

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# 1. Cash Advance for Travel/Training

Service Information: May be availed of at least one week before the schedule of the approved official business to travel/ attend a seminar or workshop.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	LCH employees wit	h plantilla r	positions	
	REQUIREMENTS		WHERE TO SEC	CURE
Letter of invitation (		Organizer	rs of the seminar or	
Workshop)				
Approved Travel O	rder	CHRMO t	hru HR Section of L	_CH
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits documents related to the Official Travel	1.1 Receives documents and records in the logbook		2 minutes	Accountant
	1.2 Reviews the Letter of Invitation to have a basis of the amount of registration fee and the allowed Daily Travel Expenses (DTE) to be granted to the employee		5 minutes	Accountant
	1.3 Prepares the Itinerary for travel and forwards it to the Chief of Hospital		20 minutes	Accountant
	1.4 Reviews and signs the Itinerary for travel		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	1.5 Prepares the DV and ORS based on the Itinerary		10 minutes	Accountant



				CIAL .
	1.6 Reviews and signs the ORS		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	1.7 Submits the ORS, DV and supporting documents to the City Accounting Office for pre audit		30 minutes	Liaison Officer
	1.8 Submits the pre-audited documents to the City Budget Office for processing		10 minutes upon receipt of pre- audited documents	Liaison Officer
	1.9 Follows up the transaction until the check for the cash advance is available for encashment		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
2. Claims the check	2.1 Releases the check to the requesting personnel		3 minutes upon receipt of check/notice of claim	Accountant
		Total	2 hours in addition to processing time of City Budget, Accounting and Treasurer's Office	

### 2. Reimbursement of Expenses for Travel/Training

Service Information: May be availed of after the official business to attend a seminar or workshop.

Office or Division:	Accounting Section
Classification:	Simple
Type of Transaction:	Internal



Who may avail	LCH employees wit	th nlantilla	nositions	CIAL 2	
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC		
	Letter of invitation (Seminar/		Organizers of the seminar or workshop		
Approved Travel O	rder	CHRMO	thru HR Section of L	_CH	
Official Receipt (Re		Organize	rs of the seminar or	workshop	
Certificate of Appea	arance	Organize	rs of the seminar or	workshop	
Tickets (Bus, plane transportation)	, other mode of		ransportation		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submits documents related to the Official Travel	1.1 Receives documents and records in the logbook		2 minutes	Accountant	
	1.2 Reviews the Letter of Invitation to have a basis of the amount of registration fee and the allowed Daily Travel Expenses (DTE) to be granted to the employee		5 minutes	Accountant	
	<ul> <li>1.3 Prepares the</li> <li>1.3.1 Itinerary for travel</li> <li>1.3.2 Certificate of Travel Completed</li> <li>And forwards</li> <li>them to the Requesting Personnel and to</li> <li>the Chief of Hospital</li> </ul>		10 minutes	Accountant	
2. Signs the Itinerary and the Certificate of Travel Completed	2.1 Reviews and signs the Itinerary for travel		20 minutes (depending on the availability of the signatory)	Chief of Hospital	



	F			CIAL 2
	2.2 Prepares the DV and ORS based on the Itinerary		3 minutes	Accountant
	2.3 Reviews and signs the ORS		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	2.4 Photocopies and gathers the documents for submission		10 minutes	Accountant
	2.5 Submits the ORS, DV and supporting documents to the City Accounting Office for pre audit		30 minutes	Liaison Officer
	2.6 Submits the pre-audited documents to the City Budget Office for processing		10 minutes upon receipt of pre- audited documents	Liaison Officer
	2.7 Follows up the transaction until the check for the reimbursement becomes available		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
3. Claims the check	3.1 Releases the check		3 minutes upon receipt of check/notice of claim	Accountant
		Total	1 hour 53 minutes in addition to processing time of City Budget, Accounting and Treasurer's Office	



#### 3. Cash Advance for Meals to be Served to Patients

Service Information: May be availed in anticipation of possible expenses to be incurred for the preparation of meals to be served to the patients.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	Cashier			
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE
Fidelity Bond			City Treasurer's	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Requests for cash advance	1.1 Prepares the DV and ORS for the cash advance		10 minutes	Accountant
	1.2 Reviews and signs the ORS		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	1.3 Submits the documents to the City Budget Office for processing		10 minutes upon receipt of pre- audited documents	Liaison Officer
	1.4 Follows up the transaction until the check for the cash advance is available for encashment		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
2. Claims the check	2.1 Releases the check		3 minutes upon receipt of check/notice of claim	Accountant
		Total	43 minutes in addition to processing time of City Budget, Accounting and	



Treasurer's	
Office	

### 4. Establishment of Petty Cash Fund

Service Information: The petty cash fund is established in order to facilitate small expenses of the agency.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	Petty Cash Fund C	ustodian (P	PCFC)	
	REQUIREMENTS		WHERE TO SEC	URE
Fidelity Bond		Bureau of Office	Treasury thru the C	City Treasurer's
Authority of an Acc (AO) issued by the indicating the maxin and the purpose of	Head of Agency num accountability cash advance	City Mayo		
Certification that pro advance have been accounted for in the	n liquidated and	City Accountant's Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Requests for establishment of petty cash fund</li> </ol>	1.1 Prepares the DV and ORS for the cash advance		10 minutes	Accountant
	1.2 Reviews and signs the ORS		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	1.3 Submits the documents to the City Budget Office for processing		10 minutes upon receipt of pre- audited documents	Liaison Officer
	1.4 Follows up the transaction until the check for the cash advance		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer



is available for encashment			
1.5 Releases the check to the PCFC		3 minutes upon receipt	Accountant
1.6 Receives the approved check from the City Treasurer's Office for the establishment of PCF		3 minutes	Petty Cash Fund Custodian (PCFC)
1.7 Records in the Petty Cash Fund Record (PCFR) the date, particulars, reference and the amount of check in the 'Cash Advance' column		3 minutes	PCFC
1.8 Encashes the check and keeps cash in a safety vault		Depends on the bank processes	PCFC
	Total	49 minutes in addition to processing time of City Budget, Accounting,Trea surer's Office, and the bank	

### 5. Utilization of the Petty Cash Fund

Service Information: Availed by employees with petty expenses which are needed in the daily operations of the agency.

Office or	Accounting Section
Division:	
Classification:	Simple
Type of	Internal
Transaction:	
Who may avail:	All LCH Employees



C	HECKLIST OF	REQUIREMENTS		WHERE TO SEC	URE
	ty Cash Fund V		Petty Cash Fund Custodian		
CL	IENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Accomplishes Box I columns Particulars' and 'Amount' and Box A 'Requested by" portion of the PCV	1.1 Receives the PCF Voucher		3 minutes	Requesting Personnel
		1.2 Signs Box A "Approved by" portion of the PCV and returns to Requesting Personnel.		20 minutes (depends upon the availability of the supervisor	Immediate Supervisor of Requesting Personnel
	Submits the required documents to the PCFC for the release of fund	<ul> <li>2.1 Receives from the Requesting Personnel the PCV duly approved by the Immediate Head of the Requestor</li> <li>2.3 Releases requested fund</li> <li>2.4 Upon release of the petty cash, signs in Box B "Paid by" portion of the PCV</li> </ul>		10 minutes	Petty Cash Fund Custodian (PCFC)
	Receives petty cash and signs in Box B "Cash Received by" portion of the PCV	<ul> <li>3.1 Issues Copy 2 of the PCV to the Requesting Personnel</li> <li>3.2 Files the original of PCV awaiting liquidation</li> </ul>		2 minutes	PCFC



4.	Submits the official receipts and other supporting documents after the transaction	<ul> <li>4.1 Receives the ORs and supporting documents awaiting replenishment of the PCF</li> <li>4.2 Records the expenses</li> </ul>		3 minutes upon receipt	PCFC
			Total	38 minutes	

# 6. Replenishment of Petty Cash Fund

Service Information: Availed by the Petty Cash Custodian whenever the Petty Cash Fund is 75% utilized.

Office or	Accounting Section			
Division:	0			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	Petty Cash Fund C	ustodian		
	REQUIREMENTS		WHERE TO SEC	URE
Approved Petty Cas Form	sh Fund Voucher	From file		
Official Receipts		From mer	chants	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Submits from the file the original of the PCV together with the SDs</li> </ol>	1.1 Checks the completeness of all PCVs for the replenishment		3 minutes	Accountant
2. Based on the paid PCVs and SDs, prepares the RPPCVs in two copies and signs the "Certification"	2.1 Based on the RPPCVs, prepares Disbursement Voucher (DV) in four (4) copies and Obligation Request and		10 minutes	Accountant



	T			
portion of the RPPCV	Status (ORS) in three (3) copies.			
	2.2 Forwards		3 minutes	Accountant
	copies 1-4 of the DV, original of the			
	RPPCVs and			
	PCV, and SDs to			
	Authorized			
	Official for review			
	and signature			
	2.3 Signs in Box		20 minutes	Chief of Hospital
	A portion of the ORS		(depending on the availability of	
			the signatory)	
	2.4 Forwards		30 minutes	Liaison Officer
	copies 1-4 of the			
	DV, copies 1-3 of			
	ORS, originals of			
	RPPCVs to the City Budget Office			
	2.5 Follows up		Depends on the	Liaison Officer
	the transaction		processes in the	
	until the check for		City Budget,	
	the replenishment		Accounting and	
	of the PCF is		Treasurers Office	
	available for			
	encashment by the PCFC			
	2.6 Releases the		3 minutes upon	Accountant
	check to the		receipt of	
	PCFC		check/notice of	
		Total	claim 1 hour and 6	
		IUI	minutes in	
			addition to	
			processing time	
			of City Budget,	
			Accounting and	
			Treasurer's	
			Office	

# 7. Liquidation of Cash Advance for Travel



Service Information: This is the settlement of the cash advance previously availed by the employees, which must be done within 30 days upon return to their official station.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	LCH employees wit	th plantilla p	positions	
CHECKLIST OF	REQUIREMENTS WHERE TO SECURE			
Letter of invitation	(Seminar/	Organize	rs of the seminar or	workshop
Workshop)			-	-
Approved Travel C			hru HR Section of L	
Official Receipt (Re		-	rs of the seminar or	-
Certificate of Appe			rs of the seminar or	workshop
Tickets (Bus, plane transportation)	e, other mode of	Mode of t	ransportation	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits the ORs and Other supporting documents	1.1 Receives the documents and records them in the logbook		3 minutes	Accountant
	<ul> <li>1.2 Checks the completeness of the documents received</li> <li>1.3 Returns to the Requesting personnel, if incomplete</li> </ul>		10 minutes	Accountant
2. Returns the excess of cash advance, if there's any, to the Cashier	2.1 Issues an Official receipt for the cash return		10 minutes	Cashier
	2.2 Drafts the Certificate of Travel Completed (CTC) to be signed by the Requesting		10 minutes	Accountant



		Personnel and the Chief of Hospital			
3.	Signs the CTC	3.1 Signs the CTC		20 minutes (depending on the availability of the signatories)	Chief of Hospital
		3.2 Collects the documents and compiles them together for submission		30 minutes	Accountant
		3.3 Submits the documents to the City Accounting Office		30 minutes	Liaison Officer
			Total	1 hour 53 minutes	

# 8. Liquidation of Cash Advance for Meals Served to Patients

Service Information: This is the settlement of the cash advance previously availed by an Accountable Officer. The Accountable Officer must settle the cash advance when the amount is completely utilized or when its purpose is served.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	Head of the Dietary	Section/Ca	ashier	
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE
Letter of invitation (	Seminar/	Organizer	s of the seminar or	workshop
Workshop)				
Approved Travel O	rder	CHRMO t	hru HR Section of L	.CH
Official Receipt (Re	gistration fee)	Organizer	s of the seminar or	workshop
Certificate of Appea	Certificate of Appearance		s of the seminar or	workshop
Tickets (Bus, plane, other mode of		Mode of t	ransportation	
transportation)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits the ORs and	1.1 Receives the documents and		3 minutes	Accountant



			CIAL S
Other supporting documents	records them in the logbook		
	1.2 Checks the completeness of the documents received	2 hours	Accountant
	1.3 Returns to the Dietary Section Head, if incomplete		
	1.4 Records the expenses	1 hour	Accountant
	<ul> <li>1.5 Drafts the following:</li> <li>1.5.1 Report of Disbursement</li> <li>1.5.2 Certificatio n for the expenses incurred</li> <li>And forwards them to their respective signatories</li> <li>1.6 Signs the Certification for</li> </ul>	1 hour 20 minutes (depending on	Accountant Dietary Section Head
	the expenses Incurred	the availability of the signatory)	Cashier Chief of Hospital
	1.7 Signs the Report of Disbursements	10 minutes (depending on the availability of the signatory)	Cashier
	1.8 Collects the documents and compiles them together for submission	30 minutes	Accountant
	1.9 Submits the documents to the City Accounting Office	30 minutes	Liaison Officer



Total	5 hours and 33	
	minutes	
	minutes	

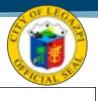
### 9. Liquidation of Petty Cash Fund

Service Information: Done by the employees who utilized the Petty Cash Fund

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	All LCH employees			
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE
Copy 2 of PCV		Requestir	ng personnel	
Supporting docume	ents			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits Copy 2 of the PCV and supporting documents	<ul> <li>1.1 Receives</li> <li>Copy 2 of the PCV together with Supporting</li> <li>Documents (SDs) and records them.</li> <li>1.2 Checks and reviews</li> <li>completeness of documents such as the date, amount and nature of expenses paid as shown in the SDs</li> <li>1.3 If incomplete, returns to the Requesting Personnel for completion of needed SDs</li> </ul>		3 minutes 5 minutes	Petty Cash Fund Custodian PCFC
	1.4 If complete, retrieves the		5 minutes	PCFC



			 	CIAL 3
		original of PCV from file and fills up Box II " Total Amount Granted", "Total Amount Paid per OR/Invoice No.", and "Amount Refunded/Reimbu rsed" portion of the original and Copy 2 of PCVs		
		1.5 Checks the appropriate boxes for "Received Refund" or "Reimbursement Paid" portion and signs Box C of the PCV	3 minutes	PCFC
2.	Checks and fills up the appropriate boxes for "Liquidation Submitted by" and "Reimburseme nt Received by" upon submission of necessary SDs and receipt or reimbursement of cash, if any, and signs Box D of the PCV	2.1 Returns Copy 2 of the PCV to the Requesting Personnel.	5 minutes	PCFC
		2.2 Retrieves PCFR and records paid PCVs	5 minutes	Accountant
		2.3 Files the original PCV together with the SDs	5 minutes	Accountant



#### 10. Payment of Salaries and Other Benefits for Employees with Plantilla Positions

Service Information:

Schedules of the benefits:

- 1. Salaries Twice a month, usually on the 8<sup>th</sup> and 21<sup>st</sup> day of the month but is subject to change without prior notice
- 2. PERA Once a month, usually during the 1<sup>st</sup> week
- 3. Mid-year Bonus Not earlier than May 15 of the current year
- 4. Year-end Bonus and Cash Gift Not earlier than Nov. 15 of the current year
- 5. PEI Not earlier than Dec. 15 of the current year

Office or	Accounting Section				
Division:					
Classification:	Simple				
Type of	Internal				
Transaction:					
Who may avail:	All LCH employees	with Planti	lla position		
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE	
DTR for the month		HR Section	n		
General Payroll		City Acco	untants Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>(For the salaries) Submits signed DTR for the current month</li> </ol>	1.1 Checks the DTRs for completeness		3 minutes upon receipt	Accountant	
	1.2 Summarizes the attendance of the employees		2 hours	Accountant	
(For the other benefits)	1.3 Prepares the 1.3.1 ORS for the payroll 1.3.2 Remittance statements		30 minutes	Accountant	



1.4 Reviews and sign the payroll, the ORS, and Remittance Statements		20 minutes (depends on the availability of the Chief)	Chief of Hospital II
1.5 Photocopies the ORS and Payroll		2 minutes	Accountant
<ul> <li>1.6 Submits</li> <li>DTRs to the City</li> <li>HRMO;</li> <li>1.7 Submits the payroll and ORS, and other supporting documents to the City Budget Office</li> </ul>		30 Minutes	Liaison Officer
1.8 Follows up the transaction until salary is uploaded to the ATM accounts of permanent employees		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
	Total	3 hours 25 minutes in addition to processing time of City Budget, Accounting and Treasurer's Office	

# 11. Payment of Salaries for Contract of Service Staff

Service Information: Salaries for contractual staff are given once a month, after the preparation of DTRs

Office or	Accounting Section
Division:	
Classification:	Simple



Type of Transaction:	Internal			CAL
Who may avail:	All LCH staff under	Contract o	f Service	
· · · · · · · · · · · · · · · · · · ·	REQUIREMENTS	WHERE TO SECURE		
Pag-IBIG MID num		HDMF (P		
TIN			f Internal Revenue	
Contract of Service	1	HR Section	on	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Submits Daily Time Record (DTR) for the current month, TIN and PagIBIG MID number</li> </ol>	1.1 Checks the DTRs for completeness		3 minutes upon receipt	Accountant
	1.2 Encode the names, monthly salary and deductions of every contractual staff in the payroll template		2 hours	Accountant
	1.3 Sends to City HRMO the copy of contracts to request for authentication		30 minutes upon receipt of the Appointments	Liaison Officer
	1.4 Retrieves from CHRMO the authenticated photocopy of contracts		Depends on the processes in the City HRMO	Liaison Officer
	1.5 Prints Remittance Statements of monthly deductions/contri butions to BIR, and PagIBIG		3 minutes	Accountant
	1.6 Encodes and prints work accomplishments		20 minutes	Accountant



		r	r	r	
		1.7 Prints the		10 minutes	Accountant
2.	Signs the work accomplishme nt	payroll and ORS 2.1 Reviews and sign the payroll, the ORS, remittance statements, and at the APPROVED portion of the work		20 minutes (depends on the availability of the Chief)	Chief of Hospital II
		accomplishments 2.2 Photocopies the signed ORS and payroll		2 minutes	Accountant II
		2.3 Submits the payroll and ORS, and other supporting documents to the City Budget Office		30 Minutes	Liaison Officer
		2.4 Follows up the transaction until salary is ready for distribution to the contractual staff		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
			Total	3 hours 50 minutes in addition to processing time of CHRMO, City Budget, Accounting and Treasurer's Office	

# 12. Payment of Wages to Job Order Staff

Service Information: Wages of the job order staff are given once a month, after the preparation of DTRs

Office or	Accounting Section
Division:	



Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	All LCH staff under	Job order		
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE
Pag-IBIG MID num	ber	HDMF (P	aglBlG)	
Appointment		HR Section	on	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Submits Daily Time Record (DTR) for the current month, PagIBIG MID number</li> </ol>	1.1 Checks the DTRs for completeness		3 minutes upon receipt	Accountant
	1.2 Encode the names, monthly salary and deductions of every job order staff in the payroll template		2 hours	Accountant
	1.3 Sends to City HRMO the copy of appointments to request for authentication		30 minutes upon receipt of the Appointments	Liaison Officer
	1.4 Retrieves from CHRMO the authenticated photocopy of appointments		Depends on the processes in the City HRMO	Liaison Officer
	1.5 Prints Remittance Statements of monthly deductions/contri butions to PagIBIG		3 minutes	Accountant
	1.6 Prints the payroll and ORS		10 minutes	Accountant
	1.7 Submits the payroll and ORS, and other		30 Minutes	Liaison Officer



supporting documents to the City Mayor's Office for signature			
1.8 Follows up the transaction until salary is ready for distribution to the job order staff		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
	Total	3 hours and 16 minutes in addition to processing time of CHRMO, City Budget, Accounting and Treasurer's Office	

#### 13. Payment of Hazard Pay, Subsistence and Laundry Allowance to Employees with Plantilla Position

Service Information: The hazard pay, subsistence and laundry allowance are given once a month, after the preparation of employee's DTRs.

Office or Division:	Accounting Section				
Classification:	Simple				
Type of	Internal				
Transaction:					
Who may avail:	All LCH employees with Plantilla position				
CHECKLIST OF	REQUIREMENTS WHERE TO SECURE				
DTR for the month		HR Section	on		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID FEES PROCESSING TIME RESPONSIBLE			
1. Submits signed DTR for the current month	1.1 Checks the DTRs for completeness		3 minutes upon receipt	Accountant	



 			CIAL .
1.2 Summarizes the attendance of the employees and prepares the payrolls		3 hours	Accountant
1.3 Prepares the ORS for the payroll		30 minutes	Accountant
1.4 Reviews and sign the payroll, the ORS		20 minutes (depends on the availability of the Chief)	Chief of Hospital II
1.5 Photocopies the ORS and Payroll		2 minutes	Accountant
1.6 Submits the payroll and ORS, and other supporting documents to the City Budget Office		30 Minutes	Liaison Officer
1.7 Follows up the transaction until the benefits are uploaded to the ATM accounts of employees		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
	Total	4 hours 25 minutes in addition to processing time of City Budget, Accounting and Treasurer's Office	

# 14. Payment of Philhealth Professional Fees to Consultants

Service Information: The payment of professional fees to consultants is done once a month.

Office or	Accounting Section
Division:	



Classification:	Simple			
Type of	Internal			
Transaction:				
Who may avail:	All LCH Consultant	S		
	REQUIREMENTS		WHERE TO SEC	URE
Auto Credit Payme	· · · · ·	Philhealth	NRO V	
Official Receipts for	r the ACPNs	Cashier	1	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Request for PF release for the month</li> </ol>	1.1 Checks ACPNs for the month for professional fees for distribution to consultants		4-8 hours depending on the number of ACPNs received for the month	Accountant
	1.2 Drafts DV		30 minutes	Accountant
	1.3 Photocopies ORs and ACPNs for attachment to DVs		1 hour	Accountant
	1.4 Sends the DVs to the City Accountant's Office for processing		30 Minutes	Liaison Officer
	1.5 Follows up the transaction until salary is ready for distribution to the contractual staff		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
		Total	10 hours in addition to processing time of City Budget, Accounting and Treasurer's Office	



# Legazpi City Hospital ACCOUNTING SECTION

**External Services** 



# 1. Payment of Obligations

Service Information: The payment of obligation is done as the need arises.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	External			
Transaction:				
Who may avail:	All agencies with tra	ansactions	with LCH	
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE
for license to	mited to: ment (Application Operate) f Account (Blood	<ul> <li>Sources of Obligations, which could be any of the following, but not limited to:</li> <li>1. Service provider of utilities (LCWD, APEC, DCTV)</li> <li>2. FDA, DOH, Philhealth, etc.</li> <li>3. DOH-CHD Bicol</li> </ul>		o: ities (LCWD,
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Delivers a bill or any evidence of obligation by the government</li> </ol>	1.1 Receives the documents and records them in the logbook		3 minutes	Accountant
	1.2 Reviews the document and drafts the ORS and DV		10 minutes	Accountant
	1.3 Reviews and signs the ORS		20 minutes (depending on the availability of the signatory)	Chief of Hospital
	1.4 Photocopies the ORS and files a copy of the ORS		3 minutes	Accountant
	1.5 Records the expenses		5 minutes	Accountant



		1.6 Submits the documents to the		30 minutes	Liaison Officer
		City Budget Office			
		1.7 Follows up the transaction until a check is available for payment of obligations		Depends on the processes in the City Budget, Accounting and Treasurers Office	Liaison Officer
2.	Claims the check	2.1 Releases the check		3 minutes upon receipt/notice of claim	Accountant
			Total	74 minutes/filled up documents in addition to processing time of City Budget, Accounting and Treasurer's Office	

### 2. Refund to Patients from Philhealth Package Used

Service Information: The refund to patients is allowed only if the Philhealth package exceeds the actual expenses incurred during his/her confinement.

Office or Division:	Accounting Section			
Classification:	Simple			
Type of	External			
Transaction:				
Who may avail:	All agencies with tra	ansactions	with LCH	
CHECKLIST OF	REQUIREMENTS		WHERE TO SEC	CURE
Official Receipt of n	nedicine or	Pharmacy	or Laboratory outs	ide LCH
laboratory services	(unavailable during			
his confinement) bo	ought from a third			
party				
Statement of Accou	int	Billing Se	ction	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAIDPROCESSING TIMEPERSON RESPONSIBLI		
1. Submits ORs, SOA	1.1 Receives the documents and		3 minutes	Accountant



	records them in			
	the logbook		10	
	1.2 Reviews the		10 minutes	Accountant
	documents, and			
	checks if the			
	claims for the			
	particular patient			
	is already			
	reimbursed by			
	Philhealth,			
	1.3 Return to the			
	patient if not yet			
	reimbursed by			
	Philhealth			
	1.4 Drafts the DV		20 minutes	Accountant
	for the			
	reimbursement			
	1.5 Submits the		30 minutes	Liaison Officer
	documents to the			
	City Accountants			
	Office			
	1.6 Follows up		Depends on the	Liaison Officer
	the transaction		processes in the	
	until a check is		City Accounting	
	available for		and Treasurer's	
	payment of		Office	
	obligations			
	1.7 Informs the		5 minutes upon	Accountant
	patient of the		receipt of check	
	availability of the			
	check			
2. Claims the	2.1 Releases the		3 minutes upon	Accountant
check	check		notice of claim	
		Total	71minutes/filled	
			up documents in	
			addition to	
			processing time	
			of City	
			Accounting and	
			Treasurer's	
			Office	1



FEEDBACK AND C	COMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in the Accounting Section
How feedbacks are processed	At the end of the month, the Accountant opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are given answers within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: 09481401478
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in the Accounting Section
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients may contact the following telephone
	may contact the following telephone number: 09481401478



FEEDBACK AND CO	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09958436010/ 09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

# LIST OF OFFICES

Office	Address	Contact Information
Accounting Section	LCH Zone 9 Brgy Bitano	09481401478
	Legazpi City	
Administrative Office	LCH Zone 9 Brgy Bitano	09611787866
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	
	Legazpi City	09175177178



# Legazpi City Hospital Administrative Office

**External Service** 

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Service Information: Approval of documents

The process covers the receiving, review, release and approval of documents.

Office or Division:	Administrative Office		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	All		
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE	
1. Documents		Requesting Organizational Group	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1 Submit Documents	Receive Documents	n/a	1 minutes	AO AA II
for approval	Record documents at logbook	n/a	5 minutes	AO AA II
	Forward documents to COH	n/a	2 minutes	AO AA II
	Review documents for approval	n/a	48 hrs.	сон
	Return to requesting organizational group	n/a	4 hrs.	AO AA II



Total	2 days 4 hours 8 minutes	

Answer the client feedback form and
drop it at the designated drop box in front of the clinical laboratory receiving area
Every Friday, the Chief Pharmacist opens the drop box and compiles and records all feedback submitted. Feedback requiring answers are forwarded to the pharmacy sections concerned and they are required to answer within (3) days of the receipt of the feedback
For inquiries and follow-ups clients may contact the following telephone number: 09489961375
Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the clinical laboratory receiving area Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being



- Incident
- Evidence
For inquiries and follow-ups clients
may contact the following telephone
number: 09489961375

FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Chief Pharmacist) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09489961375
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



Office	Address	<b>Contact Information</b>
Administrative Office	LCH Zone 9 Brgy Bitano	09611787866
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09175177178
	Legazpi City	





## Legazpi City Hospital Admission Section

**External Service** 



## Service Information: Admission Section

Office or	Admission Section	
Division:		
<b>Classification:</b>	Simple	
Type of	Government to C	Client
Transaction:		
Who may avail:	All	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Hospital ID		OPD Section/ Admitting Section
Admission Order		LCH Physicians
PHIC ID/ MDR		Philhealth Office
Discharg	le Slip	Billing Section

#### A. ADMISSION OF PATIENT

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Proceed to admitting area (Give correct patient's information when asked by the Admitting Staff)	Verifies patients record: -If OLD, Retrieves previous/ existing record (IHOMIS/ excel file)	N/A	10 minutes	Admitting Staff



Pay the amount of PHP:20 at the cashier       If NEW, creates/assigns new hospital record and/or issues patients hospital number/card (may require to present patient's valid ID for validation puposes whenever available); advises client to proceed at the cashier for payment       15 minutes       Admitting Staff         2       Proceed to admitting area       Receives notice to proceed at the cashier for payment       N/A       2 minutes       Admitting Staff         3       Provide admitting area       Collects the Demographic Profile and Admitting Diagnosis       N/A       5 minutes       Admitting Staff         4       Submit updated MDR/ present PHIC ID of member       V/A       5 minutes       Admitting Staff         5       Receives notice admitting area       N/A       5 minutes       Admitting Staff         6       Decorde       N/A       5 minutes       Admitting Staff						
admitting area       of admission         3       Provide additional Information       Collects the Patients Complete Demographic Profile and Admitting Diagnosis       N/A       5 minutes       Admitting Staff         4       Submit updated PHIC ID of member       Verify PHIC Advises to see Billing Staff       N/A       5 minutes       Admitting Staff         5       Records the patient's admission to iHomis and Excel File       N/A       5 minutes       Admitting Staff		amount of PHP:20 at the cashier	creates/ assigns new hospital record and/or issues patients hospital number/card (may require to present patient's valid ID for validation puposes whenever available); advises client to proceed at the cashier for payment	20		
additional Information       Patients Complete Demographic Profile and Admitting Diagnosis		admitting area	of admission			Ĵ
4Submit updated MDR/ present PHIC ID of memberVerify PHIC Classification. Advises to see Billing Staff ASAPN/A5 minutesAdmitting Staff ASAP5Records the patient's admission to iHomis and Excel FileN/A5 minutesAdmitting Staff Admitting Staff	3	additional	Patients Complete Demographic Profile and Admitting	N/A	5 minutes	Admitting Staff
patient's admission to iHomis and Excel File	4	updated MDR/ present PHIC ID of	Classification. Advises to see Billing Staff	N/A	5 minutes	Admitting Staff
6 Records N/A 5 minutes Admitting Staff	5		patient's admission to iHomis and	N/A	5 minutes	Admitting Staff
Patients Demographic in the Clinical Cover Sheet and Admission logbook	6		Demographic in the Clinical Cover Sheet and Admission logbook	N/A	5 minutes	Admitting Staff
7Review/ValidatesN/A2 minutesAdmitting Staff	7	Review/ confirm	Validates Information and	N/A	2 minutes	Admitting Staff



-					
	completeness and correctness of data in the Clinical Cover Sheet before signing	secures signatures of patients/ information in Clinical Cover Sheet			
8	Surrender any valid ID either of patient/ watcher	Releases watcher's ID and informs the client that ID surrendered shall be returned/ claimed (thru the Guard-on-duty @ the hospital entrance) upon discharge of patient	N/A	4 minutes	Admitting Staff
9	Proceed back to ER	Instructs the patient's representative to return to ER	N/A	1 minute	Admitting Staff

10	Endorses the accomplished and signed Clinical Cover Sheet to ER Nurse-on-duty	N/A	3 minutes	Admitting Staff
11	Coordinates with Medical Social Services for Patients classification and the Billing and Claims for	N/A	3 minutes	Admitting Staff



	Billing Requirements			
	Total:	Р 20.00	1 hour	

#### **B. DISCHARGE OF PATIENT**

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Billing Staff to forward Discharge Clearance Slip to Admitting Staff on duty	Receives Discharge Clearance Slip from the Billing Section	N/A	5 minutes	Admitting Staff
2		Records Patients Discharge	N/A	5 minutes	Admitting Staff
		Total:	none	10 minutes	

FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the admitting area		
How feedbacks are processed	Every Friday, the assigned admitting staff opens the drop box and compiles and records all feedback submitted.		
	Feedback requiring answers are forwarded to the admitting staff concerned and they are required to		



	answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number:
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in the admitting area
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence
	For inquiries and follow-ups clients may contact the following telephone number:



FEEDBACK AND CO	FEEDBACK AND COMPLAINTS MECHANISM					
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.					
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.					
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.					
	The Complaints Officer will give the feedback to the client.					
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888					
	CCB; 0908-881-6565 (SMS)					

Office	Address	Contact Information
Admission Section	LCH Zone 9 Brgy Bitano	
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09611787866
	Legazpi City	



# Legazpi City Hospital Billing and Claims

**External Service** 



Service Information: Billing and Claims Section

Office or Division:	Billing and Claims		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	All		
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE	
Philhealth Identifi	cation Card (Optional)	Philhealth Office	
Membership Data	a Record (MDR) (Optional)	Philhealth Office	
Senior Citizen/PV	VD ID (mandatory for those	Office of Senior Citizens/CSWD/MSWD	
	availing of discounts)		
Duly Accomplished Claim Signature Form (CSF)		Philhealth Member's Employer	
Employer's Certif	ication of Premium Contribution	Philhealth Member's Employer	

Schedule of Availability of Services: Monday to Sunday, 8:00AM-5:00PM (NO HOLIDAYS) Contact number : 09061054887

Fees : Applicable Fees

**Total Maximum Duration of Process:** 1hr and 30 minutes (Inquiries and interruptions not included; stable internet connection is required.)



	PHILHEALTH VERIFICATION ELIGIBILITY AND SUBMISSION OF DOCUMENTS PROCESS (The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)						
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE		
1	Proceeds to the Billing Section for verification of Philhealth eligibility *initial verification for ER/OPD patients *final verification for admitted patients	<ol> <li>Secures patient's signed CONSENT for PHIC verification (PAHINTULOT)</li> <li>Checks the patient's Philhealth record on the PHIC portal (PBEF)</li> <li>Forwards the consent and PHIC verification slip to the PCARES group chat or to the PCARES-on-duty</li> </ol>	N/A	With MDR: 5 mins With PHIC ID: 7 mins Without ID and/or MDR: 10 mins (accurate information provided); (inaccurate/not available information) 20 mins (Note: Requires stable internet signal. For slow internet, a 15- minute extension might be necessary.)	Billing Clerk		
2	Secures requirements for PHIC availment or for updating of PHIC validity/ membership	Orients the patient/representative on and provide list of the documents to be complied with to be eligible for availment of PHIC benefits	N/A	NBB: 5 mins *undeclared dependent:8 mins PRIVATE: 10 mins (for update of employer and/or contribution) NBB/PRIVATE: 15 mins (with discrepancies in PHIC record)	Billing Clerk		
3	Submits duly accomplished documents to the Billing Section upon admission or immediately the next day following the date of admission	Checks and verifies the accuracy and completeness of information on duly accomplished Philhealth forms	N/A	10 mins	Billing Clerk		
			Total	20 – 45 minutes			



	BILLING PROCESS FOR NON-PHILHEALTH PATIENTS (The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)						
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE		
1	A Ward/OR- DR/ER nurse endorses the face sheets and/or Discharge Clearance Slips of patients for discharge	Receives the face sheets and/or discharge clearance of patients for discharge from the Ward/OR-DR/ER nurse	N/A	5 mins	Billing Clerk		
2		Counterchecks the accuracy/completeness of charges posted in IHOMIS and/or charge slips forwarded to Billing	N/A	10 mins	Billing Clerk		
3		Counterchecks for discrepancy, if there is any, between the tentative and final bills Informs the IT personnel re: the names of patients for discharge for deletion of double/multiple charges (due to systems error in IHOMIS) Generates the final bill when the tentative and final bills have tallied	N/A	<ul> <li>*1-2 days confinement:10mins</li> <li>*3-4 days confinement:15mins</li> <li>*5-7 days confinement:20mins</li> <li>*8-10 days confinement: 25 mins</li> <li>*10 or more days confinement: 30 mins</li> <li>*10 or more days done: 30mins</li> <li>(The time set here applies provided all charges have been posted in IHOMIS; otherwise, a 15-minute extension might be necessary for posting of charges.)</li> </ul>	Billing Clerk		



		1		
	Encodes and prints the Statement of Account (SOA) complete with the patient's information, final diagnoses, date of confinement, summary of charges, and discounts, if applicable	N/A	For common diagnoses: *no verification of laboratory test and/or X-ray results needed: 10 mins For "rarely" encountered diagnoses: 20 mins	Billing Clerk
	Prepares the patients' Discharge Passes in triplicate (Nurse, Billing, and Guard) copies and records the same in the logbook		10 mins	Billing Clerk
	Forwards the face sheets and Discharge Passes of patients to the Ward/OR- DR/ER nurse		5 mins	Billing Clerk
		Total	50 – 80 minutes	
representative to	-	n to complete	ass to and advise the patient or h the discharge process. At this po rved.	



	DISCHARGE PROCESS FOR NON-PHILHEALTH PATIENTS					
	(The	and supported by s		ERRUPTED transactions et connection.)		
	CLIENT STEPS	AGENCY ACTIONS	FESS	PROCESSING TIME	PERSON RESPONSIBLE	
1	Proceeds to the Billing Section and present the Discharge Pass given by the Ward/OR- DR/ER nurse for information and verification of hospital bills	Informs the client about hospital charges and double checks/confirms PHIC eligibility and check all documents needed for discharge	N/A	15 mins	Billing Clerk	
2	Requests for a copy of hospital bills	Checks and verifies then prints the Statement of Account (SOA) and issues the same to the patient or his/her representative		10 mins	Billing Clerk	
3	Executes promissory note (if need be) Proceeds to the Cashier's Office for payment of hospital bills	Endorses the patient to the Cashier in case there are particular instructions re: payment [e.g., for Official Receipt (OR) or Acknowledgment Receipt (AR) for possible PHIC patients]	Fees reflected in the SOA	15 mins	Billing Clerk	
4	Presents OR/AR to Billing for recording of OR number/AR	Records the OR number/ AR, amount paid, and date on the SOA		5 mins	Billing Clerk	
5	Proceeds to the Ward/OR- DR/ER and presents the duly accomplished Discharge Pass to the nurse-on- duty	Issues three (3) copies (Nurse, Billing & Guard) of duly accomplished Discharge Pass to the patient or his/her representative		5 mins	Billing Clerk	



6	Proceeds to the Security Guard and presents the Discharge Pass to the guard-on- duty	The guard-on-duty checks the Discharge Pass and records the time of patient's departure from the hospital		5 mins	Security Guard
			Total	55 minutes	
	(The	BILLING PROCESS F maximum time set applie and supported by s	es to UNINT	ERRUPTED transactions	
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE
1	A Ward/OR- DR/ER nurse endorses to the Billing Section the face sheets of patients for discharge	Receives the face sheets of patients for discharge	N/A	5 mins	Billing Clerk
2		Counterchecks for accuracy/completeness/ discrepancies of charges, if there are any, between the tentative and final bills posted in IHOMIS and/or charge slips forwarded to Billing	N/A	10 mins	Billing Clerk
3		Informs the IT personnel re: the names of patients for discharge for deletion of double/multiple charges (due to systems error) Generates the final bill when the tentative and final bills have tallied	N/A	<ul> <li>*1-2 days confinement: 10 mins</li> <li>*3-4 days confinement: 15 mins</li> <li>*5-7 days confinement: 20 mins</li> <li>*8-10 days confinement: 25 mins</li> <li>*10 or more days confinement: 30 mins</li> <li>*with procedure/s done: 30 minutes</li> </ul>	Billing Clerk



		(The time set here applies provided all the charges have been entered in IHOMIS; otherwise, a 30-minute	
		extension might be	
		necessary for encoding of	
		 charges.)	
4	Encodes and prints the Statement of Account (SOA) complete with the patient's information, final diagnoses, ICD code, date of confinement, summary of charges, net of Philhealth case rate and discounts, if applicable		Billing Clerk
		set for verification of PHIC eligibility and submission of documents required will apply	



			on top of the time set for the above transaction.)	
5	Prepares the patients' Discharge Passes in triplicate (Nurse, Billing, and Guard) copies and records the same in the logbook		10 mins	Billing Clerk
6	Forwards the face sheets and Discharge Passes of patients to the Ward/OR- DR/ER nurse		5 mins	Billing Clerk
		Total	50 – 120 minutes	
Note: The Ward/OR-DR/ER nurse shall then receive the discharge passes and give the same to and advise the patient or his/her representative to proceed to the Billing Section for the discharge process. At this point, the discharge process for Philhealth eligible patients shall be observed.				

	DISCHARGE PROCESS FOR PHILHEALTH PATIENTS (The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)					
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE	
1	Proceeds to the Billing Section and presents the Discharge Pass given by the Ward/OR-DR/ER nurse for issuance of Statement of Account (SOA)	Prints SOA with the final bill net of Philhealth and discounts, if applicable	N/A	<ul> <li>With complete requirements checked and verified: 5 mins No verification done yet: 30 mins</li> <li>PHIC eligibility verified; without or incomplete requirements submitted: 20 mins</li> <li>For AR (with intent to refund)</li> <li>PHIC eligible: 15 mins</li> <li>PHIC eligible: 20 mins</li> <li>With excess; no available fund for payment; to execute promissory note (PN): 30 mins</li> </ul>	Billing Clerk	



				For availment of medical assistance/discount *with MSW intake: 45 minutes *for intake yet: 1 hr & 30 mins	
2	Proceeds to the Cashier for payment of excess bill	Issues a copy of SOA to be presented to the Cashier upon payment of bills	N/A	5 mins	Billing Clerk
3	Presents OR/AR to Billing for recording of OR/AR number	Records Official Receipt (OR) number or Acknowledgment Receipt (AR) and amount paid on the soft copy of SOA	N/A	5 mins	Billing Clerk
4	Proceeds to the Ward/OR-DR/ER and presents Discharge Pass to the nurse-on- duty	Issues three (3) copies (Nurse, Billing & Guard) of duly accomplished Discharge Pass to the patient or his/her representative	N/A	5 mins	Billing Clerk
5	Proceeds to the Security Guard and present the Discharge Pass to the guard-on-duty	The guard-on-duty checks the Discharge Pass and records the time of patient's departure from the hospital	N/A	5 mins	Security Guard
			Total	25 – 65 minutes	

BILLING and DISCHARGE PROCESS FOR NON-PHILHEALTH OPD PATIENTS WITH SURGICAL PROCEDURES				
(The	(The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)			
CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE



-		1			
1	An OR/ER nurse endorses the patient's OPD treatment record with OR technique for billing	Receives the OPD treatment record with OR technique for billing	N/A	5 mins	Billing Clerk
2		Counterchecks for accuracy/completeness/ discrepancies of charges, if there are any, between the tentative and final bills posted in IHOMIS and/or charge slips forwarded to Billing	N/A	20 mins	Billing Clerk
3		Informs the IT personnel re: the names of patients for discharge for deletion of double/multiple charges (due to systems error in IHOMIS) Generates the final bill when the tentative and final bills have tallied	N/A	10 mins (The time set here applies provided all the charges have been entered in IHOMIS; otherwise a 30-minute extension might be necessary for encoding of charges.)	Billing Clerk
4		Encodes and prints the Statement of Account (SOA) complete with the patient's information, final diagnoses, procedure, summary of charges net of Philhealth case rate, and discounts, if applicable	N/A	For common procedures with codes provided for by the surgeon: *NBB: 20 mins *Private: 30 mins For "rarely" encountered procedures; no codes provided for by the surgeon: 40mins *NBB: 40mins *Private: 60mins (The time set here applies provided the patient has been entered in IHOMIS and all	Billing Clerk

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				charges have been posted therein; otherwise a 30- minute extension might be necessary for such processes. It also applies to patients whose PHIC eligibility has already been verified and required documents have already been submitted, checked and verified. Otherwise the time set for verification of PHIC eligibility and documents required will apply on top of the time set for the above transaction.)	
5	The patient secures SOA from Billing and proceeds to the Cashier for payment of bills	Issues SOA to the patient for payment at the Cashier	N/A	5 mins	Billing Clerk
6	The patient presents the Official Receipt (OR) or Acknowledgment Receipt (AR) to Billing	Records the OR/AR number and amount paid on SOA; issues Discharge Clearance to the patient	N/A	10 mins	Billing Clerk
	The patient proceeds to the Security Guard and presents the Discharge Pass to the guard-on- duty	The guard-on-duty checks the Discharge Clearance and records the patient's departure from the hospital	N/A	5 mins	Billing Clerk
			Total	75 – 135 minutes	

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	BILLING and DISCHARGE PROCESS FOR PHILHEALTH OPD PATIENTS WITH SURGICAL PROCEDURES					
(	(The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)					
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE	
1	An OR/ER nurse endorses the patient's OPD treatment record with OR technique for billing	Receives the patient's OPD treatment record with OR technique for billing	N/A	5 mins	Billing Clerk	
2		Counterchecks for accuracy/completeness/ discrepancies of charges, if there are any, between the tentative and final bills posted in IHOMIS and/or charge slips forwarded to Billing	N/A	10 mins	Billing Clerk	
3		Informs the IT personnel re: the names of patients for discharge for deletion of double/multiple charges (due to systems error in IHOMIS) Generates the final bill when the tentative and final bills have tallied	N/A	20 mins (The time set here applies provided all the charges have been entered in IHOMIS; otherwise a 30-minute extension might be necessary for encoding of charges.)	Billing Clerk	
4		Encodes and prints the Statement of Account (SOA) complete with the patient's information, summary of charges, diagnoses, procedure, RVS code net of Philhealth case rate, and discounts, if applicable	N/A	For common procedures with codes provided for by the surgeon: *NBB: 20 mins *Private: 30 mins For "rarely" encountered procedures; no codes provided for by the surgeon: 40 mins *NBB: 40 mins *Private: 60 mins	Billing Clerk	

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				(The time set here applies provided the patient has been entered in IHOMIS and all charges have been posted therein; otherwise a 30-minute extension might be necessary for such processes. It also applies to patients whose PHIC eligibility has already been verified and required documents have already been submitted, checked and verified. Otherwise the time set for verification of PHIC eligibility and submission of documents required will apply on top of the time set for the above transaction.)	
5	The patient secures SOA from Billing and proceeds to the Cashier for payment of bills	Issues SOA to the patient for payment at the Cashier	N/A	5 mins	Billing Clerk
6	The patient presents the Official Receipt (OR) or Acknowledgment Receipt (AR) to Billing	Records the OR/AR number and amount paid on the soft copy of SOA; issues Discharge Clearance to the patient	N/A	10 mins	Billing Clerk
7	The patient proceeds to the Security Guard and presents the Discharge Pass to the guard-on- duty	The guard-on-duty checks the Discharge Clearance and records the patient's departure from the hospital	N/A	5 mins	Billing Clerk
			Total	75 – 125 minutes	

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	PRE- AND POST- DISCHARGE TRANSACTIONS (The maximum time set applies to UNINTERRUPTED transactions and supported by stable internet connection.)					
	CLIENT STEPS	AGENCY ACTIONS	FEES	PROCESSING TIME	PERSON RESPONSIBLE	
	PRE-BILLING OR PROGRESS BILLING					
1	The patient or his/her authorized representative requests for tentative or progress bill	Prepares the SOA based on the charges posted in IHOMIS at the time of request for pre-bill *This requires verification of Philhealth eligibility	N/A	30 mins	Billing Clerk	
	Total 30 minutes					
	RE	EFUND (FOR NEWBORN AND FO	R COMPLIANCE	WITH PHIC REQUIREMENTS)	_	
1	The member or his/her authorized representative submits the requirements for refund	Receives the documentary requirements for refund and verifies them for completeness and accuracy	N/A	10 mins	Billing Clerk	
2		Double checks the consistency of the charges posted in IHOMIS and on the SOA generated upon discharge	N/A	10 mins	Billing Clerk	
3		Prints the Statement of Account (SOA) complete with the patient's information, diagnoses, procedure, RVS/ICD code, summary of charges net of Philhealth case rate and discounts, if applicable	N/A	5 mins	Billing Clerk	



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4	The member/his or her authorized representative signs the SOA and other documents	Verifies if the SOA and other documents are properly signed Marks the AR <i>"OK FOR</i> <i>REFUND"</i> indicates date of refund, then signs it	N/A	5 mins	Billing Clerk
5	The member or his/her representative proceeds to the Cashier for refund	Issues a copy of final SOA for the Cashier if the patient had incurred excess in his/her hospital dues (for issuance of OR)	N/A	5 mins	Billing Clerk
6	The member or his/her representative presents the Official Receipt (OR) to Billing	Records the OR number and amount paid on the soft copy of SOA	N/A	5 mins	Billing Clerk
			Total	40 minutes	
	SU	BMISSION OF MAIPP DOCUMEN (WITH P	TARY REQUIREI		
1	The patient or his/her representative submits the documentary requirements to Billing	Receives the documents and verifies them for accuracy and completeness Retrieves discharge record and promissory note	N/A	no discrepancies: 20 mins with discrepancies: 30 mins (shall be advised to correct/complete discrepancies and resubmit)	Billing Clerk
2		Prepares final SOA for endorsement to MSW either for intake, for referral to <i>Ang</i> <i>Probinsyano (AP)</i> , or for both	N/A	For referral to AP: 15 mins For MAIPP availment: 15 mins	Billing Clerk



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3		Prepares the documents for submission to AP by the patient or his/her representative Prepares two sets of regular MAIPP documents for submission to MSW and for Billing files/PHIC claims	N/A	20 mins	Billing Clerk
4	The patient or his/her representative submits the Guarantee Letter (GL) and other documentary requirements from AP to Billing	Receives the Guarantee Letter (GL) and other documentary requirements from AP and verifies them for completeness and authenticity (original are copies required)	N/A	5 mins	Billing Clerk
			Total	60 – 70 minutes	

### ISSUANCE OF SOA, CERTIFICATION OF OUTSTANDING BALANCE (COB) AND CERTIFIED TRUE COPY OF PROMISSORY NOTE

1	The patient or his/her representative requests for a copy of SOA, COB and CTC of PN	Retrieves the patient's discharge/in-patient/OPD record and promissory note Encodes the certification, double checks the SOA for possible discrepancies) then prints them Scans the PN and certifies it as a true copy	N/A	30 mins	Billing Clerk
			Total	30 minutes	



FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the Billing Section
How feedback is processed	Every weekend, the Section Head opens the drop box and compiles and records all feedback submitted.
	Feedback requiring explanation is forwarded to the Hospital Administrator and the staff concerned is required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups, clients may contact the following telephone number:
How to file a complaint	Answer the Customer Satisfaction Survey and cite your complaints under remarks and drop the survey form at the designated drop box at the Billing Section.
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups, clients may contact the following telephone number:



FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Hospital Administrator) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the staff concerned for his/her explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09175177178
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB: 0908-881-6565 (SMS)

Office	Address	<b>Contact Information</b>
Billing Section	LCH Zone 9 Brgy Bitano	09061054887
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09175177178
	Legazpi City	



## **LEGAZPI CITY HOSPITAL**

**CASHIER SECTION** 



Service Information: Cashier Services

Office or Division:	Cashier		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	All (In-patient and Out-patient)		
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE	
Charge slip and Stat	ement of Account	Medical Imaging Dep't., Pharmacy, Laboratory,	
		Records Section, Billing Section	

	CLIENT	AGENCY	FEES TO	PROCESSING TIME	PERSON
	STEPS	ACTIONS	BE PAID		RESPONSIBLE
1	Proceed to cashier's window. Present billing statement.	Receives billing statement or charge slip.	N/A	1 minutes	Cashier Staff Cashier Office
2	Agrees with the total billed amount and willingness to pay.	Receives payment from payer, issues official receipt	Applicable fees	2-3 minutes	Cashier Staff Cashier Office
3	Agrees with the total billed amount but has insufficient money to settle his/her patient's bill.	Instructs client to proceed to the Social Worker for discount	N/A	Refer to citizen's charter Social Worker Department	Social Worker Admin. Office
4	Proceed to Social Worker for re- assessment of his/her paying capacity	Compute for the discounted bill of patient	N/A	Refer to citizen's charter Social Worker Department	Social Worker Admin. Office



5	Present final discounted bill to the cashier for payment	Receive payment and issue official receipt	N/A	5 minutes	Cashier Staff Cashier Office
			Total	8 – 9 minutes in addition to Social Work's time	

Frontline Service	: Cashier Section Procedures
Clients	: Out-Patient / In-Patient / Walk-in Patient / Admitted Patients
Requirements	: Statement of Account and Charge Slips
	Senior Citizen's ID / PWD ID

Schedule of Availability of the Service: Monday to Friday, 8AM - 11PM, Saturday & Sunday, 8AM - 5PM

**Fees** : Applicable Fees

Total Maximum Duration of Process: 5 minutes



FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the cashier window.
How feedbacks are processed	Every Friday, the Admin Officer I (Cashier) opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the sections concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: 09958436010
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the cashier window
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients
	may contact the following telephone number: 09958436010



FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Chief Medical Technologist) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09958436010/09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Cashier Office	LCH Zone 9 Brgy Bitano	09175441601
	Legazpi City	
Administrative Office	LCH Zone 9 Brgy Bitano	09611787866
	Legazpi City	



CH Zone 9 Brgy Bitano	
Legazpi City	09175177178



# Legazpi City Hospital Dietary

**External Service** 



Service Information: Nutrition and Dietetic

Office or Division:	Nutrition and Dietary	
Classification:	Simple	
Type of Transaction:	Government to Client	
Who may avail:	All	
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE
Dist Dressription (Destar's	Orden	Marshine LVA/and Discontations
Diet Prescription/Doctor's	s Order	Medical Ward Physician
	GOrder	Medical Ward Physician

#### Schedule of Availability of the Service:

Breakfast	:	7:00 AM
Lunch	:	11:30 AM
Dinner	:	4:00 PM

### A. GENERAL MEAL DISTRIBUTION

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIB LE
	1. A meal will be offered to each patient three (3) times daily	(included in room rates)	B-fast-6:30 AM/ Lunch- 11:00AM/ Dinner-5:00PM	Cook, Food Server and Dietitian
	2. Patient meal will be prepared and serve according to physicians order and dietitian's formulated menu	N/A	N/A	Cook and Dietitian
	3. Patients on NPO diet will be given meals for watcher	N/A	N/A	Cook and ND



#### **B. MENU PLANNING**

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
	1. Weekly menu is used as a guide	N/A	N/A	ND
	2. The budget allowed is taken into consideration in menu planning	N/A	N/A	ND
	3. One dish meal are use when a resource from wet market is limited and expensive	N/A	N/A	Cook and ND

### C. FOOD PROCUREMENT

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
	1. Procurement of food stuffs are based on a daily budget allotment	N/A	N/A	ND
	2. Items are purchased in an open market system	N/A	N/A	ND
	3. Other items are delivered by market dealers	N/A	N/A	Cook, Dealer and Nutrition Dietitian
	4. Groceries are purchased on a day to day basis to prevent over stocking and proper control of items	N/A	N/A	Nutrition Dietitian



### D. DIET COUNSELING

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1. Accept referrals of patients requiring diet therapy from the different	N/A	N/A	ND
	2. The dietitian coordinates with the doctors concerning patient's dietary management	N/A	N/A	ND
	3. NGT computations are done by therapeutic dietitian	N/A	N/A	ND
	4. Teach mothers how to prepare proper food and how to feed them to her child	N/A	N/A	ND



FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in the Nutrition and Dietetics Office
How feedbacks are processed	Every Friday, the ND opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the sections concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: 09611787866
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the clinical laboratory receiving area
	Complaints can also be filed via telephone. Make sure to provide the following information:



<ul> <li>Name of person being</li> </ul>
complained
- Incident
- Evidence
For inquiries and follow-ups clients
may contact the following telephone
number: 09611787866

	OMPLAINTS MECHANISM
How complaints are processed	<b>DMPLAIN IS MECHANISM</b> The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.The Complaints Officer will create a report after the investigation and shall
	submit it to the Head of Agency for appropriate action. The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



Office	Address	Contact Information
Nutrition and Dietary	LCH Zone 9 Brgy Bitano Legazpi City	09096220944
Administrative Office	LCH Zone 9 Brgy Bitano Legazpi City	09611787866
Chief of Hospital	LCH Zone 9 Brgy Bitano Legazpi City	09175177178



## LEGAZPI CITY HOSPITAL Clinical Laboratory

**External Service** 

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Service Information: Clinical Laboratory Examinations

Office or Division:	Clinical Laboratory			
Classification:	Simple			
Type of Transaction:	Government to Client	Government to Client		
Who may avail:	All			
CHECKLIST OF RE	REQUIREMENTS WHERE TO SECURE			
Doctor's F	Request	LCH Physicians		
Updated OPD card for	service patients ( if	Referring Physicians ( for walk in		
applicable )		patients)		
Official R	eceipts			

Release of Official Results : For non-stat examinations (routine examination), results shall be released in the following schedules:

Time of request rendered	Releasing Time (Except for Batch Testing)
5.00am-8.00am	11:00am
8:01 am-12:00nn	3:00 pm
12:01 pm – 4:00 pm	7:00 pm
4:01 pm- 8pm	11:00 pm
8:01 pm-11pm	2:00 am
11:01 pm-4:59 am	5:00 am

(Note: Schedule of routing will vary or change during the event of a "stat request " which means all other work must be stopped immediately with "stat" test being run. Results shall be released in the reception booth by the laboratory receptionist or designated personnel to patients or their authorized representatives or it shall be routed or delivered based on the routing schedule.)

**STAT** (within 1 hour if automated examination

**ASAP:** (within 2 hours if automated examination)

Batch Testing: 3 P.M. (Lipid Profile, SGOT,SGPT,BUN,CREA,FBS,RBS,HBA1c,BUA)

Maximum Allowable Waiting Time: 3 Hours



	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Get a number from Clinical Laboratory Staff on Duty	Provides the queue number and briefly explain waiting time procedure	N/A	3 minutes	Medical Technologist I Clinical Laboratory Medical Laboratory Technician I Clinical Laboratory Clinical Laboratory Aide I
2	Present Doctors request form	Receive requirements and issue applicable forms	N/A	3 minutes	Medical Technologist I Clinical Laboratory Medical Laboratory Technician I Clinical Laboratory Clinical Laboratory Aide I
3	Fill out applicable forms	Process registration Give charge slip to the patient Instruct patient to pay applicable fees	Please refer to List of Services pages 9-14	5 minutes	Medical Technologist I Clinical Laboratory Medical Laboratory Technician I Clinical Laboratory Clinical Laboratory Aide I
4	Get a number from queuing machine		N/A	Refer to citizen's charter Cashier Department	Staff on Duty Cashier Office
5	Pay applicable fees	Receive payment and issue official receipt	N/A	Refer to citizen's charter Cashier Department	Staff on Duty Cashier Office



6	Present copy of official receipt	Record official receipt number	N/A	Official Receipt	2 minutes	Medical Technologist I Clinical Laboratory Medical Laboratory Technician I Clinical Laboratory Clinical Laboratory
7	Submit blood /laboratory sample ( if applicable) Submit for blood extraction	Check if the sample is acceptable for testing (with specimen from patient) Perform blood extraction	N/A	Reception area, Blood Bank Division Extraction room, Blood bank	30 minutes	Aide I Medical Technologist I Clinical Laboratory Medical Laboratory Technician I Clinical Laboratory Clinical Laboratory Aide I
8	Come back for the scheduled time or date to claim the result	Release the result	N/A	Receipt Claim slip	7 minutes	Medical Technologist I Clinical Laboratory Medical Laboratory Technician I/ Laboratory Aide I Clinical Laboratory



LIST OF SERVICES				
TEST	FEES TO BE PAID			
Blood Chemi	stry			
1. Cholesterol Exam	PHP: 150			
2. HDL/LDL exam	PHP: 100			
3. Triglyceride	PHP: 100			
4.FBS/RBS/PPBS	PHP: 100			
5. Blood Urea Nitrogen ( BUN )	PHP: 100			
6. Creatinine	PHP: 100			
7.Blood Uric Acid ( BUA )	PHP: 100			



8. SGOT/AST	PHP: 150
9. SGPT/ALT	PHP: 150
10. Oral Glucose Tolerance Test	660
11.Na,K,Cl ( package )	PHP:400
HEMATOLOG	θY
4	
1. CBC w/ platelet	PHP: 120
2. CT/BT	PHP:25
3. PROTIME	PHP 350
4. PARTIAL THROMBOPLASTIN TIME (PTT)	PHP 350
CLINICAL MICROS	SCOPY
1. Urinalysis (4 parameters)	PHP:50



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2. Urinalysis ( 11parameters )	PHP:100
3. Fecalysis	PHP:50
4. Pregnancy Test	PHP:50
5. Occult Blood	PHP:300
1. Gram Stain	PHP:100
2. KOH mount	PHP:50
3. Trichomonas Vaginalis Identification ( wet mount )	PHP:30
4. DSSM	PHP 250
SEROLOGY AND BLOC	D STATION
1. Test for Syphilis (Screening) (RPR)	PHP:200
SD SYPHILIS	
2 HBsAg (immunochromatography)	PHP:100



3Dengue NS1	PHP:795
4.Dengue IgG/IgM	PHP:910
5. Wondfo Antigent Test Kit	PHP 450
5. HIV Screening	PHP 850
10. Duplicate Copy of Result (per print/copy)	PHP 50
1. Blood Handling and Storage Fee	PHP 200
2. Whole Blood	PHP 1800
3. Packed/ Washed RBC	PHP 1500
4. Platelet Concentrate	PHP 1000
5. Fresh Frozen Plasma	PHP 1000
6. Cryoprecipitate / Cryosupernate	PHP 1000



	7. Complete Crossmatching ( Ge method )	PHP:600
	8. Forward ABO/RH Grouping (Gel Method)	PHP:430
	9. Duplicate Copy of Result (per print/copy)	PHP 50
	FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send		Answer the client feedback form and drop it at the designated drop box in front of the clinical laboratory receiving area
How feedba	cks are processed	Every Friday, the Chief Medical Technologist opens the drop box and compiles and records all feedback submitted.
		Feedback requiring answers are forwarded to the clinical laboratory sections concerned and they are required to answer within (3) days of the receipt of the feedback
		For inquiries and follow-ups clients may contact the following telephone number: 09958436004
How to file a	i complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the clinical laboratory receiving area
		Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients may contact the following telephone number: 09299674613



FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Chief Medical Technologist) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09958436004
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



Office	Address	Contact Information
Clinical Laboratory	LCH Zone 9 Brgy Bitano Legazpi City	09299674613
Chief of Hospital	LCH Zone 9 Brgy Bitano Legazpi City	09611787866



## LEGAZPI CITY HOSPITAL Clinical Nursing Unit External Service



Service Information

Office or Division:	Clinical Nursing Unit				
Classification:	Level 1 Hospital				
Type of Transaction:	Government to Client				
Who may avail:	admitted within the cather their lawful represent	in Legazpi City Hospital classified and apacity of LCH as a primary hospital or ative with the capacity to represent them ntire duration of hospital stay.			
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE			
1 sheet of Consent for Admission and Management duly signed by the Patient and/or his lawful representative		Admitting Section			
1 sheet of Admitting Doctor's Orders		Physician-on-Duty/Affiliated Physician			
1 set of Patient's Chart duly accomplished and signed		Emergency Room/ Operating Room/ Delivery Room Staff			

The services of the Clinical Nursing Unit is available 24/7 upon giving consent for admission and management.

A. Admission to Clinical Nursing Unit

CLIENT S	TEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
With s inform 1 conse admis and	ed nt for	Prepares the bed and other supplies/equipment needed	None	5 minutes	CNU Staff
manag	gement	Admits/Accompanies received patient from	None	5 minutes	CNU Staff



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		Emergency Room or Recovery Room to Regular Room.			
2	-	Obtains thorough assessment.	None	5 minutes	CNU Staff
4	-	Carries out Doctor's Order	None	10 minutes	CNU Staff Nurse
5	-	Prepares and administers medications, as ordered	None	5 minutes	CNU Staff Nurse
6	-	Documents Nursing Care	None	5 minutes	CNU Staff Nurse
7	-	Endorses the patient to the next shift	None	3 minutes/patient	CNU Staff
8	Requires care and treatment/ Requests any health care needs.	Performs care and treatment/ Attends to bedside calls.	None	*Depends on the procedures/ health care needs.	CNU Staff

B. Doctor's Rounds and Carrying out of Doctor's Orders

CI	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Receives progress report, health education	Responds to immediate referrals and performs regular rounds.	None	10 minutes	Physician-on-Duty/ Attending Physician



	and information.				
2	Receives new interventions	Carries out new Doctor's orders.	None	10 minutes	CNU Staff

C – 1. Discharge Clearance, Billing, Discharge within Office Hours

CL	IENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Receives discharge instructions.	Advise/Confirms May Go Home status.	None	2 minutes	Physician-on-Duty/ Attending Physician/ CNU Staff
2	-	Updates charges through I-HOMIS utilized by the patient.	None	5 minutes	CNU Staff
3	-	Facilitates Discharge Clearance.	None	2 minutes	CNU Staff
	Signs consent for discharge and	Prepares and explains the Patient's Discharge Instructions.	None	5 minutes	CNU Staff
4	acknowledges in-patient discharge instructions.	Conducts health education to the patient & significant others.	None	3 minutes	CNU Staff
5	Accomplishes and submits survey form.	Obtains Customer Satisfaction Survey.	None	3 minutes	CNU Staff
	Receives instructions to	Receives endorsed discharge pass from Billing Staff.	None	2 minutes	CNU Staff
6	proceed to Billing Section.	Gives the endorsed discharge pass to significant other with instructions to proceed to Billing Section.	Hospital Charges	2 minutes	CNU Staff
7	Present the Discharge Pass cleared	Signs the Discharge Pass and logbook discharge.	None	2 minutes	CNU Staff



by Cashier		
and Billing		
Sections.		

C – 2. Discharge Against Medical Advice (DAMA) and Request for Transfer to other Facility Clearance, Billing, Discharge within Office Hours

С	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Informs the Nurse of the decision to go home against medical advice/request transfer to hospital of choice.	Informs the Doctor of the DAMA/transfer request and explains to the patient the consequences of going home against medical advice.	None	3 minutes	CNU Staff
1	Signs Discharge Against Medical Advise Form/ Execute of Request to Transfer to Hospital of Choice.	Confirms DAMA/ Coordinates transfer to hospital of choice.	None	3 minutes	CNU Staff
2	Follow steps 2 – 7 of C – 1 Discharge Clearance, Billing, Discharge within Office Hours	-	-	-	-



D – 1. Transfer to Other Health Facility

CL	IENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Acknowledges the Transfer.	Inform the patient/significant others of the need for transfer to other health facility.	None	5 minutes	Physician-on-Duty/ Attending Physician/ CNU Staff
2	-	Coordinates transfer to other health facility. Coordinates with Ambulance Service.	None None	5 minutes 2 minutes	Physician-on-Duty/ Attending Physician CNU Staff
3	Settle the hospital bill.	Follow Discharge process steps 2, 3,5, 6 and 7.	None	10 minutes	CNU Staff
4	Present the Discharge Pass cleared by Cashier and Billing Sections.	Facilitates transfer to other health facility via ambulance conduction.	None	5 minutes *patient's transfer depends on availability of services from other health facility.	Physician-on-Duty/ CNU Staff/ Staff Nurse

\*Any transaction in the Clinical Nursing Unit (CNU) regarding the provision of healthcare and other related concerns does not have any corresponding payment. Any payment shall be made at the Cashier or Admitting Section.

\*Time allotment for every step was set in the maximum time in consideration of the number of patients and their different medical needs.

\*Time in response to calls and other patient's requests was intentionally not specified as it is highly relative and dependent to what may arise during the tour of duty and the kind of calls and needs which may not be predicted.



FEEDBACK AND	COMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the Clinical Nursing Unit Nurses' Station
How feedbacks are processed	Every Friday, the CNU Head Nurse opens the drop box and compiles and records all feedbacks submitted. Feedbacks requiring answers are forwarded to the Clinical Nursing Unit staff concerned and are required to answer within (3) days of the receipt of the feedback
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the Clinical Nursing Unit Nurses' Station Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients may contact the following telephone number: CNU 1&2: +63955-263-9471 CNU 3: +63965-094-8036
How complaints are processed	The Complaints Officer (CNU Head Nurse) opens the complaints drop box on a daily basis and evaluates each complaint. Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation. The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action. The Complaints Officer will give the feedback to the client. For inquiries and follow-ups, clients may contact the following telephone number: CNU 1&2: +63955-263-9471 CNU 3: +63965-094-8036



Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB: 0908-881-6565 (SMS)
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Office	Address	<b>Contact Information</b>
Clinical Nursing Unit 1&2	2 <sup>nd</sup> Floor, Legazpi City Hospital, Zone 9, Brgy. 37, Bitano, Legazpi City	+63955-263-9471
Clinical Nursing Unit 3	3 <sup>rd</sup> Floor, Legazpi City Hospital, Zone 9, Brgy. 37, Bitano, Legazpi City	+63965-094-8036
Chief Nurse	2 <sup>nd</sup> Floor, Legazpi City Hospital, Zone 9 Brgy. Bitano, Legazpi City	+63917-508-3175
Chief of Hospital	GF, Legazpi City Hospital, Zone 9 Brgy. Bitano, Legazpi City	+63917-772-3920



## LEGAZPI CITY HOSPITAL Dental

**External Service** 



### Service Information: Dental Health Care

Office or Division:	Dental Health Section		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	All		
CHECKLIST OF RI	EQUIREMENTS	WHERE TO SECURE	
Medical Social Service/Philhealth Card or MDR		Medical Social Work/Philhealth	

#### Schedule of Availability of the Service:

Monday-Friday 8:00AM – 12:00PM In-Patient & OPD 1:00PM – 5:00PM Private Patien

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIB LE
1. Get a number from Admission Clerk, Provide the Data necessary in Filling up of Admission Forms (e.g. Consent/Authorizati on, Patient's data sheet, etc.)	1. Provides the queue number and briefly explain waiting time procedure & Admission Forms Data Sheet	None	10 minutes	Admitting Clerk/ Admin Office
2. Submit requirements, know patient's right and responsibilities, don't leave your things unattended, avoid unnecessary noise & Wait until your number called	2. Receive requirements and issuance of applicable forms, explanation of patient's right & responsibilities & maintenance of cleanliness and orderliness in admission & waiting area	None	30 minutes	Admitting Clerk/ Admin Office



3. Present your number & filling up Dental Patient Record, and Consent for dental procedure	3. Receive the queue Number & issuance of form, Explanation of Dental Patient Record & Waiver	None	5 minutes	Dental Aide
4. Oral Consultation	4. Oral Examination, X- ray & performance of other diagnostic procedure	Please refer to List of Services on page 8	30 minutes	Dentist
5. Dental Treatment	5. Provision of Dental Health Care	Please refer to List of Services on page 8	1 hour	Dentist
6. Instruction on Post- Operative Management	6. Side chair Instruction, Post- operative management & Instruction on prescribed medication	None	3 minutes	Dentist
7. Pay Applicable fees	7. Instruct the patient to pay to cashier	None	3 minutes	Dental Staff
8. Present Copy of Official Receipt & Discharge	8. Recording of official receipt number	None	4 minutes	Dental Staff, Dental Aide or Dentist
		Total	2 hours 25 minutes	



DENTAL SERVICES	PUBLIC FEES	PRIVATE FEES
1. Dental Consultation	Free	Free
2. Oral Prophylaxis	200Php	500Php (Mild) 600Php (Moderate) 700Php (Severe)
3. Tooth Restoration	300Php/tooth	600Php/tooth (Mild) 800Php/tooth (Moderate) 900Php/tooth (Severe)
4. Dental Sealant	200Php/tooth	400Php/tooth
5. Tooth Extraction	100Php/tooth	400Php/tooth
<ol> <li>Dental Panoramic Xray</li> </ol>	Free in Philhealth	1,000Php
<ol> <li>Odontectomy (Impacted Wisdom Tooth Removal)</li> </ol>	Free Philhealth	10,000Php/tooth
8. Alveoloplasty	Free in Philhealth	18,000Php or Philhealth + excess 3,000Php
9. Frenectomy (Exicsional of Lingual Frenum	Free in Philhealth	10,000Php or Philhealth + excess 1,500Php
10. Frenoplasty (Surgical Revision of Frenum)	Free in Philhealth	10,000Php or Philhealth + excess 1,500Php
11. Intraoral Incision and Drainage of Abscess	Free in Philhealth	6,000Php or Philhealth + excess 1,500Php



FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and
	drop it at the designated drop box in
	the Dental Clinic receiving area
How feedbacks are processed	Every Friday, the Dentist opens the
	drop box and compiles and records
	all feedback submitted.
	Feedback requiring answers are
	forwarded to the sections concerned
	and they are required to answer
	within (3) days of the receipt of the
	feedback
	For inquiries and follow ups alignts
	For inquiries and follow-ups clients may contact the following telephone
	number: 09558436010
How to file a complaint	Answer the Customer Satisfaction
	Survey and sight your complaints
	under remarks and drop it at the
	designated drop box in front of the
	clinical laboratory receiving area
	Complaints can also be filed via
	telephone. Make sure to provide the
	following information:
	- Name of person being
	complained
	- Incident
	- Evidence
	For inquiries and follow-ups clients
	may contact the following telephone
	number: 09558436010



FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09558436010/ 09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



Office	Address	Contact Information
Dental Clinic	LCH Zone 9 Brgy 0961178786	
	Bitano Legazpi City	
Administrative Office	LCH Zone 9 Brgy	09611787866
	Bitano Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy	
	Bitano Legazpi City	09175177178



# LEGAZPI CITY HOSPITAL Engineering and Facilities Management

**Internal Service** 



Office or Division:	Engineering and F	acilities M	anagement	CIAL 3
Classification:	Administrative			
Type of	Admin-EFM	Admin-EFM		
Transaction:				
Who may avail:	Officers and Emp	oyees of L		
	REQUIREMENTS		WHERE TO S	
Maintenance Repair	Request Form	Engineering	g and Facilities Ma	inagement Office
		FEES		
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request repair through Maintenance Request Form	Accept Client's request	None	5 minutes	Maintenance Personnel/Admin Aide I
	Prepare pre - inspection of the facility/parts/equipment	None	30 minutes	Maintenance Personnel/Admin Aide I
	Approve Pre- Inspection Report	None	5 minutes	Engineer II
	Notify the end user if facility/part/equipment t is under warranty/need to repaired outside or need to be replaced		5 min	Admin Aide I
	Prepare PR or Cost Estimate of the facility/parts/equipme nt			Admin Aide I
	Review the specifications of the facility/parts/equipme nt listed in the PR and endorsed the	None	5 minutes	Engineer II



		r	
document to the Procurement Section			
Record and release the PR to the Procurement Section	None	10 minutes	Admin Aide I
Repair the facility/parts/equipme nt Prepare post Inspection Report	None	16 hours	Maintenance Personnel/Admin Aide I
Certify that the facility/parts/equipme nt is in good working condition	None	10 minutes	Engineer II
Approve post Inspection Report	None	5 minutes	Engineer II
Record Client's Maintenance Requests	None	5 minutes	Admin Aide I
·	Total	17 hours 20 minutes	



FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and
	drop it at the designated drop box in
How feedbacks are processed	front of the admitting area Every Friday, the assigned admitting
now recubacks are processed	staff opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the admitting staff concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number:
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in the admitting area
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence
	For inquiries and follow-ups clients may contact the following telephone number:



FEEDBACK AND CO	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

Office	Address	<b>Contact Information</b>
Engineering And	LCH Zone 9 Brgy Bitano	09950279413
Facilities Managment6	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09175177178
	Legazpi City	



## Legazpi City Hospital Emergency Room

**External Service** 



Service Information: Emergency Room

Office or Division:	Nursing Service Division- Emergency Room		
Classification:	Level 1 Hospital		
Type of Transaction:	Government to Client		
Who may avail:	Persons in need of urgent care.		
REQUIREI	MENTS WHERE TO SECURE		
Health Declaration Checklist*		Triage Area	
Hospital ID for Old Clients		Issued from previous Transaction	
Patient information slip for New Clients		Triage Area	
Referral from other Health Facilities		Referring Agency	

LCH ER is a 6-bed capacity unit (3 Regular Patients bed, 1 Minor Surgery bed, 1 Examination bed, and 1 Isolation bed) that provides initial treatment to patients with life threatening/emergency healthcare needs under the scope of license as a Level I Hospital.

#### Schedule: 24/7

#### Total Response Time Triaging System Category of Patients:

$\triangleright$	Urgent (Red)	-	To attend promptly
۶	Semi-urgent (yellow)	-	Maximum waiting time: *2 hours
$\triangleright$	Non- urgent (green)	-	Maximum waiting time: ** 4 hours

\*Extension time depends on the patient's condition, completion of diagnostic procedures, treatment plan by Attending Physician, intra-facility referrals and patient's influx.

\*\*Advised for OPD consultation.



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CLIENT STEPS	AGENCY ACTIONS	FEES TO	PROCESSI	PERSON
		BE PAID	NG TIME	RESPONSIBLE
<ol> <li>Proceed to triage area:</li> <li>To accomplish Health Declaration Checklist*</li> <li>New patients to fill out information</li> </ol>	Categorizes patient as: ➤ Urgent (Red) ➤ Semi-urgent (yellow)	None	To attend promptly Maximum waiting time: *2 hours	Triage / Staff Nurse
sheet • Old patients to present their Patient IDs	<ul> <li>Non- urgent (green)</li> </ul>		Maximum waiting time: ** 4 hours	
	Take initial assessment (vital signs to include height and weight), reason for consultation.		*Extended time depending on the present number of urgent cases.	
*if warranted.			**advised for OPD consultation.	
2 Patient Consultation and Management	<ul><li>2.1 Assesses Patient</li><li>2.2 Institutes immediate management.</li></ul>	N/A	15 minutes	Physician-on- Duty / ER Staff
	2.3 Performs diagnostic and other procedures.	* Fees shall apply only if patient is for billing	1 hour to 2hours	Physician-on- Duty
	2.4 Decides of patient's disposition. 2.4.1 Admits patient (If necessary) or treat as OPD.		30 minutes	Physician-on- Duty
	2.4.2 Refers patient for specialty			Physician-on- Duty



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care, if warranted.	25 minutes	
2.4.3 Transfers patient to higher level facility for further evaluation and management, if warranted.		Physician-on- Duty /ER Staff/ Ambulance Service Staff
2.5 Performs post-mortem care.	10 minutes	ER Staff/ Utility Personnel
2.6 Discharges patient (if treated as OPD / DAMA)	15 minutes	ER Staff

ER ADMISSION				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1a</b> Signs informed consent for	<ol> <li>Orients patient and significant other of patient's responsibilities.</li> </ol>	N/A	5 minutes	ER Staff



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admission and management.	<ol> <li>Carries out the admitting orders.</li> <li>1.1 Stat orders</li> <li>1.2 Routine orders</li> </ol>		5 minutes 30 minutes	ER Staff
	3. Informs concerned unit of admission.		2 minutes	ER Staff
	<ol> <li>Issues admission slip and advises patient's significant other to proceed to the admitting unit.</li> </ol>		3 minutes	ER Staff
	5. Enters patient data in the admission logbook.		2 minutes	ER Staff
	Follows steps 1-5 (1a).			
<b>1b</b> Presents admitting order (from affiliated consultants)				
2 Prepares for	Transfers patient to designated		15 minutes	ER Staff/ Utility
interunit transfer.	unit.			Personnel
<b>3</b> Receives instruction from designated unit.	<b>3</b> Receives Endorses patient to receiving instruction from staff.		15 minutes	ER Staff
ER DISCHARGE				
CLIENT STEP	S AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1</b> Proceeds to Billin Section.	patient/watcher with instructions.		2 minutes	ER Staff
2 Presents Exit Pa to ER Staff.	ss Signs exit pass and gives specific instructions.		10 minutes	ER Staff



FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the Emergency room receiving area
How feedbacks are processed	Every Friday, the Emergency Room Section Head opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the clinical laboratory sections concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: +63905-892-1185
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the



designated drop box in front of the
Emergency room receiving area
Complaints can also be filed via
telephone. Make sure to provide the
following information:
<ul> <li>Name of person being</li> </ul>
complained
- Incident
- Evidence
For inquiries and follow-ups clients
may contact the following telephone
number: +63905-892-1185



FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer/ Section Head opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: +63905-892-1185
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Emergency Room	LCH Zone 9 Brgy 37,	+63905-892-1185
	Bitano Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy 37,	+63917-517-7178
	Bitano Legazpi City	



## LEGAZPI CITY HOSPITAL HUMAN RESOURCE

**External & Internal Services** 



#### **1. Service Information: Application for Employment**

Application at the Legazpi City Hospital is open to anyone particularly bonafide residents provided they meet the qualifications required for the job opening. Job openings are posted at the City Hall Bulletin Boards and at the website of the Hospital and also published at the Civil Service Commission (CSC) ROV. Applications should be submitted to the Human Resource Office of LCH. The screening committee conducts screening to determine of the applicant is eligible for the position.

Then submits the application to the HRMO-City Hall for verification and scheduling of PS Board screening. The Personnel Selection Board (PSB) screens applicants.

The PSB Composition:

- City Mayor or his duly assigned representative
- City Vice-Mayor or his duly assigned representative
- Sangguniang Bayan Member Chairman of the Committee on Labor and Employment and Civil Service Matter.
- Department Heads of the department which has the vacancy
- City Human Resource Management Officer and its staff as its Secretariat
- Two (2) representatives of the rank-and-file career employees. One (1) form the first level and one (1) from the second level.
- President of the City Employees Association

Office or Division:	Human Resource				
Classification:	Simple	Simple			
Type of Transaction:	Government to Client				
Who may avail:	All				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE	
Resume/Personal Data S	iheet	Applicant			
Application Letter		Applicant			
Transcript of Records		School			
Certificate of previous em					
Certificate of eligibility/con	mpetency (if any)	PRC/CSC			
Other Documents (if any)	1		1		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Applicant submit credentials	<ol> <li>Receive resume/application</li> <li>1 Check and evaluate applicant's qualifications with reference to the requirements of the</li> </ol>	None None	3 minutes 15 minutes	Human Resource Staff Human Resource Staff	



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1.2 Conducts		Depending on	Admin Officer V
Preliminary	None	the availability	Chief of Hospital
screening		of the Chief of	
1.3 Office of the		Hospital	Admin Officer V
Hospital	None	Depending on	Chief of Hospital
Administrator		the availability	
will make an		of the	
endorsement		signatory	
for an			
Applicant			
1.4 Forward all			Human
documents	None	30 minutes	Resource Staff/
and			Liaison Officer
requirements			
submitted by			
the applicant			
to HRMO			

#### 2. Service Information: Application for Leave

Employee accrue leave credits each month and such credits may be used by the employee when the need to temporarily leave work arises, either due to illnesses or personal circumstances.

Actual leaves are deducted from earned leave credits. If an employee's leave goes beyond the accrued leave credits, he/she shall be without pay.

Applications for vacation leave must be filed at least **five (5) days** before the leave. For sick leaves, the application must be filed immediately upon the employee's return from such leave.

Office or Division:	Human Resource			
Classification:	Simple			
Type of Transaction:	Government to Client			
Who may avail:	All	-		
CHECKLIST OF R	EQUIREMENTS		WHERE TO SECUR	RE
Application Leave Form		Human Reso	urce Staff	
Medical Certificate for Sic 4 days)	k Leave <b>(exceeding</b>	Medical Reco	ords of the Hospital/	Clinic
Clearance for Travel abro		CHRMO		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIB LE
1. Employee's application for leave	1. The employee files a leave of Absence, accomplishes	None	10 minutes	Employee



			CIAL 3
three (3) copies			
of <b>Leave Form</b>			
Application for			
signature of the			
Chief of Hospital			
and his/her			
immediate			
supervisor			
1.2 Employee			
submits the	None	5 minutes	Employee
Application			1-12-1
for Leave			
Form to HR			
Office of LCH			
together with			
the			
requirements			
(if any)			
1.3 Records the			
Application	None	20 minutes	Human
for Leave in	None	20 111111111111111111111111111111111111	Resource
the Logbook.			Staff
Checks			Stall
supporting			
documents			
are correct			
and in order			
1.4 Forwards			
	None	30 minutes	Human
application for leave to			Resource
CHRMO. The			Staff
			Sidii
Acting Human			
Resource			
Management			
Officer			
approves the			
computation			
on the			
Application			
for Leave			



Note:

- 1. Special Privilege Leave shall be filed in advance (1 week)
- 2. Vacation Leave shall be filed in advance (discretion of the Head of Office)
- 3. Maternity Leave shall be filed in every instance of pregnancy.
- 4. Sick Leave shall be filed upon employee's return to office; medical check-up can be filed in advance.
- 5. Mandatory five-day vacation leave (Forced Leave) shall be arranged with the Chief of Hospital.

#### 3. Service Information: Application For Securing Service Record/Certificate Of Employment And Other Personal Records

The LCH employee may request from HRMO copies of service records, certificate of employment and other certifications and personal records.

These usually are required for loans, credit E-Card applications, NOSA Step Increments/promotions, retirement and terminal leave purposes and employment to other companies/agencies upon resignation from the government service.

Office or Division:	Human Resource				
Classification:	Simple	Simple			
Type of Transaction:	Government to Client				
Who may avail:	All				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE	
Invitation					
Request Letter					
Program Itinerary					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Securing Service Records/ Certificate of Employment and other Personal Records	<ol> <li>Employee requests/ indicates the type of document being requested and its purpose 1.2 Person in- charge conducts interview regarding the requested document</li> </ol>	None	5 minutes 10 minutes	Employee Human Resource Staff	



1.3 Forward to CHRMO the record/ certification	None	20 minutes	Liaison Officer
requested 1.4 Employee receives the document from LCH Human Resource Office	None	1 day (upon receipt from (CHRMO)	Human Resource Staff

### 4. Application of Employee To Attend Trainings/Seminars

Office or Division:	Human Resource			
Classification:	Simple			
Type of Transaction:	Government to Client			
Who may avail:	All			
CHECKLIST OF RE	EQUIREMENTS		WHERE TO SEC	URE
Invitation		Inviting Ager	псу	
Request Letter		Office of the	Chief of Hospital	
Program Itinerary		Inviting Ager		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Employee to attend trainings/ seminars	1. Receive and log invitation for training	None	5 minutes	Human Resource Staff
	1.2 Submit the requested invitation for training for evaluation and approval of the Chief of Hospital	None	15 minutes	Human Resource Staff
	1. 3 Forward to CHRMO to prepare/ encode Office Order/Travel Order	None	1 hour	Liaison Officer
	1.4 Forward to CMO for Mayor's Signature	None	1 Day (depends on the availability	CHRMO Staff



and for control number		of the Hon. Mayor)	
1.5 CHRMO	None		CHRMO Staff
forward		1 hour	
back the papers to			
LCH Human			
Resource			
Office			

FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at HR drop box.
How feedbacks are processed	Every Friday, the Admin Officer V opens the drop box. She compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to sections concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: 09150916396
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the clinical laboratory receiving area
	Complaints can also be filed via cellphone. Make sure to provide the following information:
	<ul> <li>Name of person being complained</li> <li>Incident</li> <li>Evidence</li> </ul>
	For inquiries and follow-ups clients may contact the following telephone numbers: 09150916396/ 09175177178



FEEDBACK A	ND COMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09150916396/09175177178
Contact Information of CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph PCC: 8888
	CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Administrative Office	LCH Zone 9 Brgy	09150916396
	Bitano Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy	09175177178
	Bitano Legazpi City	



# LEGAZPI CITY HOSPITAL Information and Technology Section

Internal Service



### Service Information: Information Technology Section Procedures

Office or Division:	Information and Technology Section			
Classification:	Simple			
Type of Transaction:	Government to Client			
Who may avail:	All Medical and Hospital Staff to include Allied Professionals			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
Job Order's Request Form		Sections in LCH		
Philhealth Claim	s Documents	Billing Section		

A. Request for PC, Printer Repair or Troubleshooting

C	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Hospital staff with Job Order Request for PC or Printer Repair or Troubleshooting	Receives Job Order Request Form Verify/ Checks the area that needs assistance and their concern	N/A	15 minutes	IT Staff
2	Hospital Staff demonstrates the Issue or Technical Problem	Visits the area with concern and physically inspect the problem	N/A	15 minutes	IT Staff
3	Hospital Staff Concurs that the Technical Issue is Received	Troubleshoots the technical issue and ensures that the problem is solved	N/A	60 minutes	IT Staff
			Total	90 minutes	



B. Request for Internet and Network Repair or Troubleshooting

С	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Hospital staff with Job Order Request for Internet and Network Repair or Troubleshooting	Receives Job Order Request Form Verify/ Checks the area that needs assistance and their concern	N/A	15 minutes	IT Staff
2	Hospital Staff demonstrates the Issue or Technical Problem	Visits the area with concern and physically inspect the problem	N/A	15 minutes	IT Staff
3	Hospital Staff Concurs that the Technical Issue is Received	Troubleshoots the technical issue and ensures that the problem is solved	N/A	60 minutes	IT Staff
			Total	90 minutes	

#### C. Request for Assistance and Troubleshooting for IHOMIS



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C	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Hospital staff with Job Order Request for Assistance and Troubleshooting for IHOMIS	Receives Job Order Request Form Verify/ Checks the area that needs assistance and their concern	N/A	15 minutes	IT Staff
2	Hospital Staff demonstrates the Issue or Technical Problem	Visits the area with concern and physically inspect the problem	N/A	15 minutes	IT Staff
3	Hospital Staff Concurs that the Technical Issue is Received	Troubleshoots the technical issue and ensures that the problem is solved	N/A	60 minutes	IT Staff
			Total	90 minutes	

#### D. Transmission of PhilHealth E-Claims Via IHOMI

CLIENT STEPS	AGENCY	FEES	PROCESSING	PERSON
	ACTIONS	TO BE	TIME	RESPONSIBLE
		PAID		



					CIAL SY	
1	Hospital staff with complete Philhealth Claims Documents	Receives Philhealth Claims Verify/ Checks that the documents are complete and intact	N/A	15 minutes	IT Staff	
2		Create/accomplish additional claims attachments (CF2, CF3, CF4)	N/A	100 minutes	IT Staff	
		Scans all documents and converts them into appropriate files needed for transmission	N/A	120 minutes	IT Staff	
3		Transmits all documents to Philhealth before the deadline	N/A	180 minutes	IT Staff	
			Tota	I 6 hours 55 minutes		
		FEEDBACK AN	D COM	PLAINTS MECHAN	ISM	
	How to send		An dro	swer the client feedbac op it at the designated d ide of the IT Office	k form and	
	How feedbacks are processed			Every Friday, the Head of IT opens the drop box and compiles and records all feedback submitted.		
				edback requiring answe warded to the sections d they are required to a days of the receipt of t	concerned nswer within	



	For inquiries and follow-ups clients
	may contact the following telephone
	number: 09958436010
How to file a complaint	Answer the Customer Satisfaction
	Survey and sight your complaints
	under remarks and drop it at the
	designated drop box in front of the
	clinical laboratory receiving area
	Complaints can also be filed via
	telephone. Make sure to provide the
	following information:
	<ul> <li>Name of person being</li> </ul>
	complained
	- Incident
	- Evidence
	For inquiries and follow-ups clients
	may contact the following telephone
	number: 09958436010
	number: 09958436010

Office	Address	<b>Contact Information</b>
Information and	LCH Zone 9 Brgy Bitano	09958436010
Technology	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	
	Legazpi City	09611787866



FEEDBACK AND COMPLAINTS	MECHANISM
How complaints are processed	The Complaints Officer (Head of IT) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09958436010/09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



## LEGAZPI CITY HOSPITAL Labor and Delivery Room

**External Service** 

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Service Information: Labor and Delivery Room Services

Office or Division:	Labor and Delivery Room		
Classification:	Level 1 Hospital		
Type of Transaction:	Government to Client		
Who may avail:	Women of reproductive age who are about to give birth.		

C	LIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Arrival in Labor and Delivery Room.	Receives endorsement from ER/ CNU.	N/A	5 mins	LR/DR Staff
	Required to change into clean patient's gown and	<ul><li>Transfer of patient to:</li><li>Labor Room</li><li>Delivery Room</li></ul>	Php 100/ hr	5 mins 7 mins	LR/DR Staff/ Utility Personnel
	footwear.	Obtains patient's vital signs including fetal heart tone, Leopold's Maneuver, cardiotocography and internal examination.	N/A	15-20 mins	LR/DR Staff/ Physician-On- Duty/ OB-Gyne Consultant
		Relay assessment to Physician-on-Duty/ OB-Gyne Consultant.	N/A		LR/DR Staff
2	Patient Care and Management	Monitors patient's vital, fetal heart tone and progress of labor.	N/A	14-16 hrs	LR/DR Staff/ Physician-On- Duty/ OB-Gyne Consultant
		Accomplishes partograph form.			LR/DR Staff



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3	Prepare for Transfer to Designated Area/Unit/Facility	Transfer of Patient to: • Delivery Room (6cm for multipara and fully for primipara)		7 mins	LR/DR Staff/ Physician-On- Duty/ OB-Gyne Consultant
		<ul> <li>Operating Room</li> </ul>		7 mins	LR/DR Staff/ Utility Personnel
		Other Facility		30 mins	LR/DR Staff/ Utility Personnel
4	Intrapartum Care	Performs procedures related to Normal Spontaneous Delivery (Episiotomy and Repair or Repair of Laceration)		1-3 hrs	LR/DR Staff/ Physician-On- Duty/ OB-Gyne Consultant
5	Prepares for transfer to Designated Unit or Other Facility/ Signs DAMA	Transfer of Patient from DR to: • Recovery Room	Php 100/ hr	10 mins	LR/DR Staff/ Utility Personnel
		Other Facility	Hospital Charges	30 mins	LR/DR Staff/ Utility Personnel

FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the OR/ DR Complex receiving area.		
How feedbacks are processed	Every Friday, the LR/ DR Section Head opens the drop box and compiles and records all feedback submitted.		
	Feedback requiring answers are forwarded to the Labor and Delivery Room Section and they are required		



	to answer within (3) upon receipt of the feedback.
	For inquiries and follow-ups, clients may contact the following telephone number: 09552559440.
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box at the OR/ DR Complex receiving area.
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups, clients may contact the following telephone number: +63916-990-4788

FEEDBACK AND COMPLAINTS MECHANISM				
How complaints are processed	The Complaints Officer (Labor and Delivery Room Section Head) opens the complaints drop box on a daily basis and evaluates each complaint. Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.			



	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: +63916-990-4788
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Labor and Delivery	Legazpi City Hospital,	+63916-990-4788
Room	Zone 9, Brgy 37, Bitano	
	Legazpi City	
Chief of Hospital	Legazpi City Hospital,	+63917-772-3920
	Zone 9, Brgy 37, Bitano	
	Legazpi City	



## LEGAZPI CITY HOSPITAL Records Section

**External Service** 



Service Information: Records Section

Office or Division:	Records Section		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	All		
CHECKLIST OF REQU	UIREMENTS WHERE TO SECURE		
Green ID card of Patient		Issued by LCH	
Record of Patient upo	on check-up OPD/ER section		
Request form		m Admitting Section	
Official Recei	Official Receipt		
Days/Hours of Re	eleasing	Monday to Friday, 8:00 AM-5:00 PM	
		Releasing: 8:00 AM – 4:00 PM	

## HOW TO AVAIL OF THE SERVICE (FOR VARIOUS CERTIFICATES AND FORMS REQUESTED)

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.	Proceed to admitting area for filling of Request form	Ensures complete and properly filled-up request form	N/A	5 minutes	Clerk on Duty
2.	Client is instructed to pay at the cashier (If requested has a corresponding payment).	Ensures that client was properly instructed	N/A	2 minutes	Clerk on Duty
З.	Request form forwarded to Records Section for Retrieval of Patient's/Client's Record and Processing of request	Retrieval of patient's record needed for processing Patient's/Client's request	N/A	10 minutes	Clerk/Record Section Staff



4. RELEASING	Proceed directly to admitting section: a. Present receipt (if requested certificate has payment). b. If no payment required (present the white i.d. card of patient official receipt). NOTE:Patient-Official Receipt Authorized nearest kin of legal age- Authorization Letter duly signed by the patient; valid photo ID of the patient and the authorized nearest kin; Claim Stub with Official Receipt	Verification of payment and certificate/forms requested	N/A N/A	10 minutes	Clerk/Record Section Staff
		Releasing	IN/A	5 minutes	Clerk/Record Section Staff
	•		Total	32 minutes	

#### VARIOUS CERTIFICATES AND FORMS REQUESTED

CERTIFICATES AND FORMS REQUESTED	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
a.) Medico-Legal Certificate	PHP 75.00	1-2 days	Clerk/Record Section Staff
b.) Medical Certificate	PHP 75.00	1-2 days	Clerk/Record Section Staff
c.) Medical Abstract	PHP 100.00	3-5 days	Physician
d.) Insurance Claims	N/A	3-5 days	Physician
e.) SSS/GSIS Claims	N/A	3-5 days	Physician
f.) Birth Certificate	PHP 75.00	2 days	Clerk/Record Section Staff



g.) Death Certificate	N/A		1 day	Clerk/Record Section Staff
FE	EDBACK	AND CO	OMPLAINTS ME	CHANISM
How to send feed	How to send feedback		Answer the client feedback form and drop it at the designated drop box in front of the admitting area	
How feedbacks a	How feedbacks are processed		Every Friday, Rec Officer opens the compiles and reco submitted.	drop box and
			Feedback requirin forwarded to the F concerned and the answer within (3) of the feedback	Record Section
			For inquiries and t may contact the fo number: 0917130	ollowing telephone
How to file a com	How to file a complaint		Answer the Custo Survey and sight under remarks an designated drop b area	your complaints
			Complaints can al telephone. Make s following informat - Name of per complained - Incident - Evidence	sure to provide the ion:
		For inquiries and t may contact the fo number: 0917130	ollowing telephone	



FEEDBACK AND	COMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, client may contact the following telephone number: 09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888
	CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Record Section	LCH Zone 9 Brgy Bitano Legazpi City	09171304914
Administrative Office	LCH Zone 9 Brgy Bitano Legazpi City	09611787866
Chief of Hospital	LCH Zone 9 Brgy Bitano Legazpi City	09175177178



## LEGAZPI CITY HOSPITAL Out Patient Section

**External Service** 



Service Information: Consultation Services

Office or Divi	sion:	Out Patient Section	
Classification	n:	Level 1 Hospital	
Type of Trans	saction:	Government to Client	
Who may ava		All	
CHECKLIST OF REQUIREMENTS			
CHECKI	LIST OF RE	EQUIREMENTS	WHERE TO SECURE
		EQUIREMENTS ion Treatment Form	WHERE TO SECURE           Admitting Section
Document 1		ion Treatment Form	

#### Service Schedule : Mondays to Fridays- 8:00am to 5:00pm Legal Holiday- no schedule Declared Holiday- 8:00am-12:00pm Cut-off Time: 4:00pm

Services Rendered	Clinic Schedule
<b>OB-GYNE</b> Consultation	Wednesday 8:00am to 4:00pm
Surgery Consultation	Monday- 10:00am- 12:00pm Tuesday- 1:00pm- 3:00pm Thursday- 12:00pm- 1:00pm
BCG/ Newborn and Postpartum Mother Consultation Day	Thursday
	Note: Senior Citizen, Pregnant Women and PWD clients may avail of Out patient services anytime during clinic hours.



	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	<ul> <li>Proceed to triage area:</li> <li>To accomplish Health Declaration Checklist *</li> <li>New patients to fill out information sheet</li> <li>Old patients to present their Patient ID</li> <li>*if warranted</li> </ul>	Give queuing number and instruct patient to be seated and wait for their number to be called, briefly explain waiting time. Take initial assessment (vital signs to include height and weight), reason for consultation.	None	3 minutes (first come first serve basis) Maximum waiting time: 15 minutes *waiting time varies in case of patient influx	Triage/ Staff Nurse
2	Patients are called for consultation.	Assists in the consultation process.	None	5 minutes	OPD Staff
3	Patient Consultation and Treatment	<ul> <li>Obtains comprehensive medical history</li> <li>Performs complete physical examination</li> <li>Orders medical treatment</li> <li>Prescribes medicine</li> </ul>	None	10 minutes	Physician-on- Duty



4	Interunit and intra facility referral	<ul> <li>Endorse to concern unit</li> <li>Accomplish Referral Form/ Diagnostic Requests</li> </ul>	None	5 minutes *please refer to citizen's charter of the concerned section	OPD Staff
5	Follow-up check-up with diagnostic results for the continuation of management	<ul> <li>Explains results and gives appropriate prescription</li> <li>Instruct patient regarding next visit schedule</li> <li>Gives appropriate health teachings/advise</li> </ul>	None	5 minutes *extended time needed for answering queries * extended time needed; depending on patient's condition	Physician –on- duty



FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in
	front of the OPD Consultation room
How feedbacks are processed	Every Friday, the Chief OPD Nurse
	opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are
	forwarded to the sections concerned
	and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients
	may contact the following telephone number: 09558436010
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints
	under remarks and drop it at the
	designated drop box in front of the
	OPD receiving area receiving area
	Complaints can also be filed via
	telephone. Make sure to provide the
	following information: - Name of person being
	complained
	- Incident
	- Evidence
	For inquiries and follow-ups clients
	may contact the following telephone
	number: 09958436010

FEEDBACK AND COMPLAINTS MECHANISM			
How complaints are processed	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint.		



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	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09958436010/ 09611787866
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)

Office	Address	Contact Information
Out Patient Section	LCH Zone 9 Brgy.37	09568776944
	Bitano Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy.37	09175177178
	Bitano Legazpi City	



## LEGAZPI CITY HOSPITAL Operating and Recovery Room

**External Service** 

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Service Information: Operating and Recovery Room Services

Office or Division:	Operating and Recovery Room	
Classification:	Level 1 Hospital	
Type of Transaction:	Government to Client	
Who may avail: All patients who are receiving and/or received anesthesia, surgica		
	interventions and postpartum patients.	

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	With signed informed consent for surgery, treatment and other procedures	Receives surgery request slip immediately after doctor's order from other units.	None	5 minutes	Staff-on-Duty/ OR/RR Staff
2	Client verbalizes understanding of the contemplated procedure, risk and possible outcome.	Attending Physician re-educate the client and significant others of the contemplated procedure, its risk and possible outcome.	None	5 minutes	Attending Physician
		Anesthesiologist orients client and significant others of anesthesia care plan, its risk and possible outcome.	None	5 minutes	Anesthesiologist
3	Prepares transfer from other unit to Operating Room.	Admits/ accommodate client from other units.	None	5 minutes	OR/RR Staff
		Performs perioperative assessment.* *preoperative checklist *WHO surgical safety checklist	None	5minutes	OR/RR Staff



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4	Prepares transfer from Semi- Restricted to Restricted Area. *client assisted to wear OR gown, bouffant, surgical facemask and clean footwears.	Ensures patient safety during transfer to Operating Table.	No Fee	5 minutes	OR/RR Staff/ Utility Personnel
5	Receives anesthesia and surgical care and treatment.	Performs WHO Surgical Safety Checklist.	None	Depends on the duration of surgical procedure.	All Surgical Team
6	Newbon receives essential intrapartum newborn care/	Performs essential intrapartum newborn care.	None	Depends on newborn status.	Attending Physician/ OR/RR Staff
	Significant Other receives information of newborn status.	Carries out Doctor's orders.	None	5 minutes	OR/RR Staff
7	Receives specimen and signs the Perioperative Form/Logbook, if warranted.	Endorses the properly labelled and treated specimen to client/ significant other with given instructions.	None	5 minutes	OR/RR Staff
8	Prepares transfer to Recovery Room/ Regular Room.	Ensures patient safety during transfer to Recovery Room and/ or Regular Room.	None	10 minutes	OR/RR Staff
		Performs post- operative monitoring, care and treatment.	None	1 Hour for NSD under Epidural Anesthesia	OR/RR Staff
				2-4 Hours for Surgical Patients under GA/Spinal/Epidural Anethesia.	
		Assess client's readiness for trans- out to regular room.	None	*readiness for transfer to regular room depends on Aldrete's Scoring	OR/RR Staff



					CIAL S
				and case classification	
		Obtains Customer Satisfaction Survey.	None	2 minutes	OR/RR Staff
9	Receives discharge instructions/transfer to other facility.	Prepares the client/significant others for discharge.	None	5 minutes	Attending Physician/ OR/RR Staff
		Inform the patient/significant others of discharge the need for transfer to other health facility.	None	5 minutes	Attending Physician/ OR/RR Staff
		Updates charges through I-HOMIS utilized by the patient.	None	5 minutes	OR/RR Staff
		Facilitates Discharge Clearance.	None	5 minutes	OR/RR Staff
		Prepares and explains the Patient's Discharge Instructions.	None	5 minutes	OR/RR Staff
		Conducts health education to the patient & significant others.	None	5 minutes	OR/RR Staff
		Obtains Customer Satisfaction Survey.	None	2 minutes	OR/RR Staff
		Coordinates transfer to other health facility.	None	5 minutes	OR/RR Staff
	Receives instructions to proceed to Billing Section.	Receives endorsed discharge pass from Billing Staff.	None	5 minutes	CNU Staff
10		Gives the endorsed discharge pass to significant other with instructions to proceed to Billing Section.	Hospital Charges	5 minutes	CNU Staff



11	Present the	Signs the Discharge	None	10 minutes	OR/RR Staff
	Discharge Pass cleared by Cashier	Pass.			
	and Billing	Coordinates with		10 minutes	OR/RR Staff
	Sections.	Ambulance Service.		*patient's transfer depends on	
		Facilitates transfer to other health facility		availability of services from	
		via ambulance		other health	
		conduction.		facility.	

FEEDBACK AND CO	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the OR/DR Complex receiving area
How feedbacks are processed	Every Friday, the Section Head Nurse opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the Operating and Recovery Room sections concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: +63965-095-9864
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box at the OR/DR Complex receiving area
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence



For inquiries and follow-ups clients
may contact the following telephone
number: +63965-095-9864

FEEDBACK AND C	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Section Head Nurse) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Chief Nurse for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number:
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB: 0908-881-6565 (SMS)

Office	Address	Contact Information
Operating and Recovery	3 <sup>rd</sup> Floor, Legazpi City	+63965-095-9864
Room	Hospital, Zone , Brgy.	
	37, Bitano Legazpi City	
Chief of Hospital	Legazpi City Hospital,	+639177723920
	Zone , Brgy. 37, Bitano	
	Legazpi City	



# LEGAZPI CITY HOSPITAL

### Pharmacy

**External Service** 



#### Service Information: Filling-Up of Prescription for In-Patients

Office or Division:	Pharmacy		
Classification:	Simple		
Type of Transaction:	Government to Client		
Who may avail:	In-patients		
CHECKLIST OF REQ	QUIREMENTS WHERE TO SECURE		
Prescription (1	copy) LCH Physicians/ Consultants		

CLIEN	NT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIB LE
1	Patient/ Nursing attendant with doctor's prescriptio n proceed to pharmacy	<ul> <li>1.1 Receives prescription from CNU</li> <li>1.2 Verify/Checks prescription details</li> <li>1.3 Check availability of items</li> <li>1.4 If drugs and medicines are not available, instructs the Nursing Attendant/ Patient accordingly</li> <li>1.5 If drugs and medicines are available</li> <li>1.5.1 Fills up prescription</li> <li>1.5.2 Give medicine according to coverage of PHIC</li> </ul>	None	30 minutes	Pharmacist/ Pharmacy Assistant on duty
		1.6 Enters doctor's order to IHOMIS	None	15 minutes	Nursing Attendant/ Nurse on Duty
		1.7 Generates charge slip number and Issue doctor's order in IHOMIS that will be reflected on the final bill of the patient	None	5 minutes	Pharmacist/ Pharmacy Assistant on duty
2	Receives prescribed medicines from the pharmacis t	2.1 Dispense and records medicine issued; and files the prescription.	None	15 minutes	Pharmacist/ Pharmacy Assistant on duty

Note: For Dangerous drugs, follow procedures per the Dangerous Drugs and Generics Act



Service Information: Filling-Up of Prescription for ER/ Walk-In/ Out-Patients

Office or Division:	Pharmacy		
Classification:	Simple		
Type of Transaction:	Government to C	lient	
Who may avail:	ER, Walk-In and	Out-patients	
CHECKLIST OF REG	UIREMENTS	WHERE TO SECURE	
Prescription (1 copy)		LCH Physicians/ Referring Physicians ( for walk in patients )	
Yellow Prescription	n (2 copies)	LCH Physicians/ Referring Physicians with s2 license	
4Ps ID/ Philhe	alth ID	DSWD/ Philhealth	
Latest MDR (1	сору)	Philhealth	
Authorization Letter (1 copy)		4Ps/ Philhealth beneficiaries	
Medicine Purchase Booklet		OSCA/ PWD office	
Senior Citizen ID/ PWD ID		OSCA/ PWD office	
Official Rec	eipt	LCH Cashier	

Note: For Dangerous drugs, follow procedures per the Dangerous Drugs and Generics Act.

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONS IBLE
Present doctor's prescription to the pharmacist	<ul> <li>1.1 Receives prescription from ER/ OPD Units and/ Walk-in patients</li> <li>1.2 Verify/Checks prescription details</li> <li>1.3 Check availability of items</li> <li>1.4 Informs the patient of price and availability</li> <li>1.5 If drugs and medicines are available: 1.5.1 Give medicine's starter dose/ full coverage if antibiotics.</li> <li>1.6 Enters prescribed medicines to IHOMIS and prints charge slip.</li> <li>1.7 Instructs the patient/client to pay to the cashier</li> </ul>	Unit Price <b>X</b> Quantity= Total Amount Total amount- 20% discount (if SC/PWD)=Grand Total	30 minutes	Pharmacist/ Pharmacy Assistant on duty



2	Present official receipt to the pharmacist	<ul> <li>2.1 Records medicine issued and files the prescription</li> <li>2.2 Indicates the official receipt number on the dispensing logbook and fills up the prescription</li> </ul>	None	20 minutes	Pharmacist/ Pharmacy Assistant on duty
3	Receives prescribed medicines from the pharmacist	3.1 Counsels the patient and dispense the medication	None	15 minutes	Pharmacist/ Pharmacy Assistant on duty

Service Information: Filling-Up of Discharge Slip for ER Patients

Office or Division:	Pharmacy	Pharmacy		
Classification:	Simple			
Type of Transaction:	Government to Cli	ent		
Who may avail:	ER patients			
CHECKLIST OF RE	QUIREMENTS WHERE TO SECURE			
Prescriptio	n (1 copy)	LCH Physicians		
Discharge Slip	(1 copy)	LCH Emergency Room		
Authorization Let	Authorization Letter (1 copy) 4Ps/ Philhealth beneficiaries			
Medicine Purchase Booklet		OSCA/ PWD office		
Senior Citizen ID/ PWD ID		OSCA/ PWD office		
Official Re	ceipt	LCH Cashier		

Note: For Dangerous drugs, follow procedures per the Dangerous Drugs and Generics Act.

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Present doctor's prescription to the pharmacist	<ul> <li>1.1 Enters doctor's order to IHOMIS</li> <li>1.2 Process discharge slip and instructs the patient to proceed to the pharmacy</li> </ul>	None	30 minutes	Nursing Attendant/ Nurse on Duty



2	Present doctor's discharge slip to the pharmacist	<ul> <li>2.2 Receives discharge slip from the patient</li> <li>2.3 Verify/ Checks doctor's order posted in iHOMIS</li> <li>2.4 Generates charge slip number and print charge slip</li> <li>2.5 Instructs the patient/relative to go to the billing section, pay to the cashier and return to the pharmacy</li> </ul>	None	30 minutes	Pharmacist/ Pharmacy Assistant on duty
3	Present official receipt to the pharmacist	<ul> <li>3.1 Records medicine issued and files the prescription</li> <li>3.2 Indicates official receipt number in the dispensing logbook and fills up the prescription</li> <li>3.3 Signs the discharge clearance and instruct the patient to return to ER</li> </ul>	None	30 minutes	Pharmacist/ Pharmacy Assistant on duty I

FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the clinical laboratory receiving area		
How feedbacks are processed	Every Friday, the Chief Pharmacist opens the drop box and compiles and records all feedback submitted. Feedback requiring answers are forwarded to the pharmacy sections concerned and they are required to answer within (3) days of the receipt of the feedback For inquiries and follow-ups clients may contact the following telephone		
How to file a complaint	number: 09489961375 Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the		



designated drop box in front of the clinical laboratory receiving area
Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients may contact the following telephone number: 09489961375

FEEDBACK AND CO	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Chief Pharmacist) opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09489961375
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0908-881-6565 (SMS)



Office	Address	Contact Information
Pharmacy	LCH Zone 9 Brgy Bitano	09489961375
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	
	Legazpi City	



### Legazpi City Hospital Procurement Office

**Internal Service** 



#### **Procurement Division**

Purchasing services in accordance with RA 9184 or the Government Procurement Reform Act.

Step	Actions to Take	Corresponding Task of Hospital Personnel	Duration of Activity (Maximum Time)	Person in charge	Documents Required	Amount Fee
1	Filing of Request by the concern division/section officer to the procurement section.	Filing and Consolidation of all request per quarter. Such items in the request must correspond or stated to the APP.	5 minutes (Filing) Per Quarter (Consolidati on)	Admin Officer III Admin Aide VI	Request Slip Annual Procurement Plan	
2	<ul> <li>Preparati on of PR (Purchas e Request) to be signed by the Chief of Hospital and submitte d to CMO (City Mayor's Office) for Mayor's Approval.</li> <li>The PR will proceed GSO (General</li> </ul>	Purchase Request prepared and signed by the Chief of Hospital to be submitted to CMO (City Mayor's Office) for Mayor's Approval.	Preparation of Purchase Request per quarter 5 hours	Admin Officer III Admin Aide VI	Purchase Request and Obligation Request	



					CIAL	
	Services					
	Office)					
	for					
	numberi					
	ng and					
	Checking					
	of items					
	if it is in					
	accordan					
	ce with					
	the APP,					
	and next					
	to the					
	CBO (City					
	Budget					
	Office)					
	for					
	Budget					
	Allotmen					
	t.					
	• Thereaft					
	er it will					
	be back					
	to GSO					
	for BAC					
	required					
	papers					
	and					
	signature					
	S.					
3	Receive	Conduct of canvass	1 day	Admin Officer	Canvass for	
	from the	at least 3	per supplier	Ш	the Supplier	
	GSO 3	supplier per Item				
	canvass	included in the Purchase Request				
	forms.					
			<u> </u>			



					CIAL 2	
	<ul> <li>Conduct of Canvass at least 3 supplier per item</li> <li>Submit the Canvass to GSO for award</li> </ul>					
4	<ul> <li>Issuance of PO (Purchas e Order) by GSO</li> <li>Delivery of items in the PO and Issuance of Sales Invoice/C harge Invoice by the Supplier upon complete delivery</li> </ul>	Receive and Inspect the Items Delivered together with the GSO inspector	3 hours per delivery (receive and inspection)	Admin Officer III Admin Aide VI	Purchase Order Sales Invoice, Charge Invoice	
5	Distribution of delivered items to the concern Division. (Donation/Purchas ed)	Distribute items	2 hours from inspection	Admin Officer III Admin Aide VI	Acknowledge ment Receipt Requisition Issuance Receipt	



	Total	1 day 10 hours and 5		
		hours and 5		
		minutes		

Office	Address	Contact Information
Procurement Section	LCH Zone 9 Brgy Bitano	09175518200
	Legazpi City	
Administrative Office	LCH Zone 9 Brgy Bitano	09611787866
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09175177178
	Legazpi City	



# LEGAZPI CITY HOSPITAL Radiology Department (Ultrasound Section)

**External Service** 

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Service Information: Radiologic Examinations

Office or Division:	Radiology Departmer	Radiology Department(Ultrasound Section)			
Classification:	Simple				
Type of Transaction:	Government to Client				
Who may avail:	All				
CHECKLIST OF RE	EQUIREMENTS	WHERE TO SECURE			
Doctor's Request		LCH Physicians			
Updated OPD card for service patients ( if		Referring Physicians (for walk in patients)			
applicable )					
Official R	eceipts				

Release of Official Results: For non-stat examinations (routine examination), results shall be released in the following schedules:

Time of request rendered	Releasing Time
Monday – 9AM-10AM	All results will be readily
Tuesday -Starts at 4PM	available at 10AM the next
Wednesday – Starts at 4PM $ angle$	day
Thursday – Starts at 4PM	
Friday – Starts at 4PM	

If in an event that the result is delayed because of unforeseen events such as no connectivity in the internet, natural calamities and no radiologist available to handle the for reading x-ray images the client is advised by the radiologic technologist on duty via text or call if the result is already available.

**STAT** (within 10 minutes from the time of examination for viewing/wet reading of the Resident on Duty)

**ASAP:** (Resident-on-duty/Nurse-on-duty will inform the Radiologic technologist/Radiologist for the temporary ultrasound reports )



	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Present Doctors request form	Receive requirements, schedule patient and get contact information	N/A	3 minutes	Admin Aide IV Radiologic Technologist I & II
2	Fill out applicable forms	Process registration Give charge slip to the patient Instruct patient to pay applicable fees	N/A	3 minutes	Admin Aide IV Radiologic Technologist I & II
3	Pay applicable fees	Receive payment and issue official receipt	Please refer to List of Services pages 9-14	Refer to citizen's charter Cashier Department	Staff on Duty Cashier Office
4	Present copy of official receipt	Record official receipt number	N/A	2 minutes	Admin Aide IV Radiologic Technologist I & II
5	Patient enters the	Patient will undergone	N/A	2 minutes	



								CIAL
	examination room	preparation and quick orientation about the examination			10 minut	es	10	Radiologic Technologist & II, Sonologist
				Total	20 minut	es		
6	Claim result		Release the result	N/A	Official Receipt	Results available 10am th next day	e	Admin Aide IV Radiologic Technologist I & II
	Total < 24 hours							

#### LIST OF SERVICES

No.	PROCEDURE	AMOUNT
1	ABDOMINAL	1,700
2	HBT	850
3	LIVER	700
4	KUB	850
5	PELVIC	800
6	PROSTATE	700
7	UPPER ABDOMEN	950
8	LOWER ABDOMEN	950
9	WHOLE ABDOMEN	1,650
10	SINGLE ORGAN	700
11	TRANSRECTAL	950
12	TRANSVAGINAL (TVS)	950
13	BPS	1,150
14	KUB+PROSTATE	950



FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the radiology department reception area
How feedbacks are processed	Every 1 <sup>st</sup> week of the month, the Chief Radiologic Technologist opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the radiology departments concerned and they are required to answer within (3) days of the receipt of the feedback
	For inquiries and follow-ups clients may contact the following telephone number: 09497339717
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the radiology department reception area
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence
	For inquiries and follow-ups clients may contact the following telephone number: 09497339717



FEEDBACK AND CO	OMPLAINTS MECHANISM
How complaints are processed	The Complaints Officer (Chief Radiologic Technologist) opens the complaints drop box on a monthly basis and evaluates each complaint.
	Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.
	The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.
	The Complaints Officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the following telephone number: 09497339717
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0949-733-9717 (SMS)

Office	Address	<b>Contact Information</b>
Radiology Department	LCH Zone 9 Brgy Bitano	09497339717
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	091751777178
	Legazpi City	



## Legazpi City Hospital Radiology Department (X-ray Section)

**External Service** 



Service Information: Radiologic Examinations

Office or Division:	Radiology Department (X-ray Section)				
Classification:	Simple				
Type of Transaction:	Government to Client				
Who may avail:	All				
CHECKLIST OF RE	EQUIREMENTS	WHERE TO SECURE			
Doctor's F	Request	LCH Physicians			
Updated OPD card for	service patients ( if	Referring Physicians (for walk in patients)			
applicat	ole)				
Official R	eceipts				

Release of Official Results: For non-stat examinations (routine examination), results shall be released in the following schedules:

Time of request rendered		Releasing Time
5.00 AM-8:00 AM	)	All results will be readily
8:01 AM-12:00 PM		available within 24-48 hours
12:01 PM – 4:00 PM	5	from the time or date of
4:01 PM - 8:00 PM	[	examination and the availability
Beyond 1:00 AM	J	of the radiologist

If in an event that the result is delayed because of unforeseen events such as no connectivity in the internet, natural calamities and no radiologist available to handle the for reading x-ray images the client is advised by the radiologic technologist on duty via text or call if the result is already available.

**STAT** (within 10 minutes from the time of examination for viewing/wet reading of the Resident on Duty)

**ASAP:** (Resident-on-duty/Nurse-on-duty will inform the Radiologic technologist on duty if the radiologist is available for ASAP reading )

		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Present	Receive requirements and	N/A	3 minutes	Admin Aide IV



								CIAL
	Doctors		applicable					Radiologic
	request forms						Technologist	
	form							I & II
							_	
2	Fill out	Fill out Process		N/A	3 minute	s		Admin Aide IV
	applicable	reg	istration					
5	forms							Radiologic
			narge slip to					T <b>eachmai</b> ha <b>gia</b> te IV
	Claim result	the	p <del>Railea</del> tse the	N/A	Official	Within 2	4-	1&11
			result		Receipt	48 hours	5	Radiologic
		Instru	ict patient			from the		Technologist
			applicable			date of		1&11
			fees			examina	ntion	
3	Pay	Receiv	re payment	Please	Refer to citiz			
	applicable		and	refer to	charterotal			
	fees	<u>iss</u> u	e official	List of	Departme	ntiours		
			eceipt	Services			Sta	aff on Duty
			,	pages				•
				9-14			Ca	shier
								Office
					<b>.</b>			
4	Present		ord official	N/A	2 minute	es		Admin Aide IV
	сору	receip	ot number					De alla la aria
	of official							Radiologic
	receipt							Technologist
	- 1							&
<u> </u>		~	('	N//A				
5	Patient		tient will	N/A	2 minute	es		
	enters the		dergone					De die le die
	examination	• •	ration and					Radiologic
	room	•	orientation		10 minute	es		Technologist
			out the					&
		exa	mination					
				Total	20 minute	20		
				i Ulai	20 1111100			



#### LIST OF SERVICES

No.	PROCEDURE	PRICE
1	SKULL AP/LATERAL	440.00
2	TOWNE'S VIEW	220.00
3	WATER'S VIEW	220.00
4	PARANASAL SERIES	660.00
5	SKULL SERIES	660.00
6	NASAL BONE (SOFT TISSUE TECHNIQUE) LEFT AND RIGHT	440.00
7	MANDIBLE PA	220.00
8	CERVICAL AP/LATERAL	440.00
9	CERVICAL SERIES	880.00
10	THORACIC SPINE AP/LATERAL	440.00
11	THORACOLUMBAR SPINE AP/LATERAL	440.00
12	THORACIC SPINE OBLIQUE VIEW	220.00
13	LUMBAR SPINE AP/LATERAL	440.00
14	LUMBOSACRAL AP/LATERAL	440.00
15	LUMBAR SPINE OBLIQUE VIEW	220.00
16	SACRUM AP/LATERAL	440.00
17	COCCYX AP/LATERAL	440.00
18	CHEST PA (ADULT)	220.00
19	CHEST APICOLORDOTIC VIEW	220.00
20	CHEST AP/LATERAL (PEDIA)	440.00
21	CHEST PA/LATERAL (ADULT)	440.00
22	CHEST LATERAL DECUBITUS	220.00
23	RIB CAGE/THORACIC CAGE AP	220.00
24	RIB CAGE/THORACIC CAGE OBLIQUE	220.00
25	ABDOMEN AP (PLAIN)	220.00
26	ABDOMEN UPIGHT/SUPINE	440.00
27	ABDOMEN LATERAL DECUBITUS	220.00
28	KUB (PLAIN)	220.00
29	CLAVICLE AP	220.00
30	SHOULDER AP	220.00



31	PELVIS AP	220.00
32	FINGERS AP	220.00
33	FINGERS LATERAL/OBLIQUE	440.00
34	HAND PA/OBLIQUE	440.00
35	HAND (BALLCATCHERS)	220.00
36	WRIST PA/LATERAL	440.00
37	FOREARM AP/LATERAL	440.00
38	ELBOW AP/LATERAL	440.00
39	HUMERUS(ARM) AP/LATERAL	440.00
40	TOE AP/LATERAL	440.00
41	FOOT AP/OBLIQUE	440.00
42	FOOT LATERAL	220.00
43	ANKLE AP/LATERAL	440.00
44	ANKLE MORTISE VIEW	220.00
45	LEG AP/LATERAL	440.00
46	KNEE AP/LATERAL	440.00
47	FEMUR AP/LATERAL	440.00
48	HIP JOINT AP (BILATERAL)	440.00
49	HIP JOINT FROG LEG	220.00

FEEDBACK AND COMPLAINTS MECHANISM					
How to send feedback	Answer the client feedback form and drop it at the designated drop box in front of the radiology department reception area				
How feedbacks are processed	Every 1 <sup>st</sup> week of the month, the Chief Radiologic Technologist opens the drop box and compiles and records all feedback submitted.				



	Feedback requiring answers are forwarded to the radiology departments concerned and they are required to answer within (3) days of the receipt of the feedback For inquiries and follow-ups clients
	may contact the following telephone number: 09497339717
How to file a complaint	Answer the Customer Satisfaction Survey and sight your complaints under remarks and drop it at the designated drop box in front of the radiology department reception area Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence For inquiries and follow-ups clients may contact the following telephone number: 09497339717

FEEDBACK AND COMPLAINTS MECHANISM		
How complaints are processed	The Complaints Officer (Chief Radiologic Technologist) opens the complaints drop box on a monthly basis and evaluates each complaint. Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation. The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.	



	The Complaints Officer will give the feedback to the client.	
	For inquiries and follow-ups, clients may contact the following telephone number: 09497339717	
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> PCC: 8888 CCB; 0949-733-9717 (SMS)	

Office	Address	Contact Information
Radiology Department	LCH Zone 9 Brgy Bitano	09497339717
	Legazpi City	
Chief of Hospital	LCH Zone 9 Brgy Bitano	09175177178
	Legazpi City	



### **OFFICE OF THE CITY CIVIL REGISTRAR**



### **1. Registration of On-Time Certificate of Live Birth**

A process of registering Certificates of Live Birth of newly born child, born in Legazpi City, within thirty (30) days from the date of birth.

Office or Division:	Birth Registration	on Section		
Classification:	Simple			
Type of Transaction:	G2C-Governme	nt to Client		
Who may avail:	General Public, other birth atten		and Private Hosp	bital and Lying-in/
CHECKLIST OF RE	QUIREMENTS		WHERE TO SEC	CURE
1. Duly Accomplished Certificate(4copies)	Birth	1.Hospital/ Lyi	ng-in/ other birthi	ng facilities
2. For Married Parents Contract For Not Ma AUSF (Affidavit to Use Father) & Admission o	rried Parents: the Surname of	2.PSA/Local C	Civil registrar Offic	e
3.Information sheet		3.Hospital/ Lying-in		
4. Valid I.D.		4.Government/ Private sectors		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present and submit Certificate of Live Birth and other required attachments         <u>a. Married</u> <u>Parents</u>:         -with Marriage Contract</li> </ol>	1. 1.) Receives Certificate of Live Birth,	1. a. None b. <u>P100.00</u> (Admission of Paternity) <u>P200.00</u>	<ul> <li>20 minutes /filled up documents</li> <li>2 hrs. /unfilled documents</li> </ul>	City Civil Registrar and



			•	ICIAL 3
<u>b. Not Married</u> Parents:		(AUSF)		Administrative Officer I
				Admin. Aide IV
<ul> <li>With Admission of Paternity</li> <li>With</li> </ul>				Bookbinder I
AUSF (Authority to use the Surname				Admin. Aide I
of the Father)				
	1.2.) Checks for correctness and completeness of data and attachments			
	1.3) Registers and signs documents by the local civil registrar/ authorized signatory.			
	1.4.) Assigns registry number			
2. Pays at the City Treasurer Office the required fees	2.Released personal copies to clients			
3. Receives registered				



Certificate of Live Birth				
	TOTAL	a. None B. P300.00	• 20 minutes /filled up documents 2 hrs. /unfilled documents	

### 2. Delayed Registration of Certificate of Live Birth

A process of registering Certificate of Live Birth born in Legazpi City beyond thirty (30) days upon giving birth or those who have no existing record from the Local Civil Registrar and PSA.

2.1 Out-of-Town Delayed Registration Pursuant to Rule 20 of Administrative Order No.1, Series of 1993- The process or registering Certificate of Live Birth of the constituents born outside of Legazpi city and have no existing record from the Local Civil Registrar and PSA

Office or Division:	Birth Registratio	n Section
Classification:	Simple	
Type of Transaction:	G2C-Governme	nt to Client
Who may avail:	General Public, other birth attend	Government and Private Hospital and Lying-in/ dants
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE
1. Birth Certificate (MF	102) 4copies	1. Hospital/ Lying-Ins/ Other birthing facilities/ LCRO
2. Affidavit of Delayed Birth (back of MF 102)	Registration of	2. Hospital/ Lying-Ins/ Other birthing facilities/ LCRO
3. Admission of Paternity (if not married)		3. Hospital/ Lying-Ins/ Other birthing facilities/ LCRO
4. Marriage Contract of Parents (if married)		4. PSA/LCRO
5. Any 2 of the ff:		5.
-Baptismal Certificate		-Church/ place of baptismal -Schools



				CIAL S	
-School Record Form 1 or HS)	37(Elementary	-COMELEC			
-Certified True copy of Registration Form(COM		-Hospital/C	-Hospital/Clinic		
-Medical Record/Patier	nt's Record	-Pag-Ibig age			
-Pag-ibig Beneficiary N	omination Form	-COMELEC			
-Philhealth Membershij (MDR)	o Data Record	-SSS -NBI/ Polici	e station		
- Service Record/Voter	s List				
-SSS E-4 or Remittanc Employee Membership Information					
-NBI Certificate/Police	Clearance (least				
required)					
6. Marriage Certificate of the Registrant		6.PSA/ LCR	6.PSA/ LCR		
	•		7. Government/Private sector		
8. Affidavit of 2 disinter	ested persons	8. Law offices/Local Civil Registrar Office			
mother/registrant (for u	9. Sworn Statement of the mother/registrant (for unknown whereabouts of the mother/ or abandoned children)		s/ Local Civil Reg	istrar Office	
10. Barangay Certificat residence of parents of		10. Barangay Hall			
11. Certification from P Result )	SA ( Negative	11. PSA			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Inquire for the necessary requirements	1. Interview and gives checklist of requirements to clients	P100.00 (Admission of Paternity) P200.00	1. 1 hour &30 minutes / filled up	City Civil Registrar OCCR Legazpi City	
		L			



				CIAL S
		(AUSF)	2. 2 hours/ unfilled application	and
				Administrative Officer I
				Admin. Aide IV
				Bookbinder I
				Admin. Aide I
2. Submit and present the required documents	2.1.) Receives the documents			
	2.2.) Verify and check the correctness and completeness of the documents			
	2.3.) Signs documents by the local civil registrar/ authorized signatories			
	2.4) Organizes and prepares the documents for filing and posting			
3. Pays the required fees at the Cashier Section	3. Upon payment, issues claim stub to client indicating the date and		Ten(10) calendar days	



4. After compliance of ten (10) days' notice of posting,	time of release/ registration of documents. 4. Documents will be released and registered			
receives the personal copy of Certificate of Live Birth	after compliance of ten (10) days' notice of posting.			
	For Out-of-Town Delayed registration: -Upon completion, sends the documents to the civil registrar of the city/ municipality where the birth occurred via courier.	(Out of Town Fee) <u>P200.00</u> (Service Fee)		
	Total	P300.00 (Additional P200.00for Out-of- Town)	<ol> <li>1 hour &amp;30 minutes / filled up</li> <li>2 hours/ unfilled application and</li> <li>10 calendar</li> </ol>	
			days (posting period)	



### 3. Legitimation

A process of allowing the illegitimate child (whose born out of wedlock) to be legitimated by subsequent marriage of parents.

Office or	Archives Section			
Division:				
Classification:	Simple			
Type of	G2C-Government to	o Client		
Transaction:	Conorol Dublic Olio	nto (Annelia queto		
Who may avail:	General Public, Clie			IDE
1. Birth Certificate (		1. PSA/ LCRO	VHERE TO SECU	IKE
xerox copies)	•			
2. Marriage Contrac		2.PSA/ LCRO		
3. Cenomar of moth (3 xerox copies eacl		3. PSA		
4. Valid ID or Comm	nunity Tax Certificate	4.Government/	Private Sector	
5.Affidavit of Legitim	nation(notarized)	5.LCRO		
6.Admission of Pate Father)	ernity (for unknown	6.LCRO		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire for the	1. Interview and	P250.00	1 hour & 30	City Civil
necessary	gives checklist of	(Endorsement		Registrar
requirements	requirements to clients	Fee to Manila	document	OCCR Legazpi City and
	21) Dessives the	D155.00		anu
2 Submits	2.1.) Receives the documents from	<u>P155.00</u> (Mailing Fee)		Asst.
complete	client	(Mannig Fee)		Registration
requirements				Officer
	2.2.) Checks for the			
	correctness and			Admin. Aide I
	completeness of the			
	submitted			
	requirements			
	2.3.) Process the			
	documents: cover			
	letter, certificate of			
	Legitimation, Cert.			
	photocopy of			
	notarized Affidavit of Legitimation			
	executed by his/her			
	parents, certified			



	photocopy of child's original and annotated COLB and certified photocopy of his/ her parent's COM.			
3. Pays the required fees at City Treasurer's Office	<ul> <li>3.1. Local Civil Registrar/Authorized signatories verifies and signs the document.</li> <li>3.2. Sends copy of the documents to PSA Manila</li> </ul>			
4. Receives copy of the annotated Birth certificate and other documents.	4. Releases personal copy of the annotated Birth Certificate and other documents to client.			
	Total	P405.00	1 hour & 30 minutes	

### 4. Registration of On-Time Certificate of Death

A process of registering Certificates of Death of persons died in Legazpi City within thirty (30) days from the date of death.

Office or Division:	Death Registration Section				
Classification:	Simple	Simple			
Type of Transaction:	G2C-Government to	o Client			
Who may avail:	General Public, Go	vernment and	d Private Hospita	I/other Death	
	attendants				
CHECKLIST OF REQ	UIREMENTS		WHERE TO S	ECURE	
1 Duly Accomplished Death Ce by City Health Office	1 Duly Accomplished Death Certificate reviewed by City Health Office		1. Hospital/City Health Office/LCRO		
2. Burial Permit /Transfer Perm	nit	2.City Treasurer's Office			
3.Certification of Not Embalmed	d (if not embalmed)	3.Funeral Parlor/ Informant			
4.Certificate of Cremation(if cre	mated)	4.Funeral Parlor			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present and submit	1.1.) Receives	P30.00	15		
Certificate of Death and other	Certificate of Death	(Burial	min./document		
required attachments		Fee) <u>P30.00</u>		City Civil Registrar OCCR Legazpi City	



				CIAL
		(Issuance of Death Certificate) <u>P60.00</u> (Transfer Permit		and Chief of Death Registration Section
	1.2.) Checks for correctness and completeness of data and attachments			Admin. Aide I
	1.3.) Registers and signs documents by the local civil registrar/ authorized signatory.			
	1.4.) Assigns registry number			
2. Pays the required fees at City Treasurer's Office	2.Released personal copies to clients			
3. Receive the Registered Certificate of Death				
	Total	P120.00	15 minutes	

### 5. Delayed Registration of Certificate of Death

A process of registering Certificate of Death of persons died in Legazpi City beyond thirty (30) days upon death or those who have no existing record from the Local Civil Registrar and PSA.

Office or Division:	Death Registration Section		
Classification:	Simple		
Type of Transaction:	G2C-Government to	o Client	
Who may avail:	General Public, Gov	vernment and Private Hospital / other Death	
	attendants		
CHECKLIST OF REQ	UIREMENTS	WHERE TO SECURE	
1 Duly Accomplished Death Certificate reviewed by City Health Office		1. Hospital/City Health Office/LCRO	
2. Burial Permit /Transfer Permit		2.City Treasurer's Office	
3.Certification of Not Embalmed (if not embalmed)		3.Funeral Parlor/ Informant	



4.Certificate of Cremation (if cre	4.Funeral Parlor				
5.Burial Certificate		5.Cemetery/ Church where the deceased was buried			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present and submit Certificate of Death and other required attachments	1. 1.) Receives Certificate of Death,	P30.00 (Burial Fee) P30.00 (Issuance of Death Certificate) <u>P60.00</u> (Transfer Permit)	15 min./document	City Civil Registrar OCCR Legazpi City and Chief of Death Registration Section Admin. Aide I	
	1.2.) Checks for correctness and completeness of data and attachments				
	1.3.) Organizes and prepares the documents for filing and posting of Notice for ten (10) calendar days.		Ten (10) calendar days		
2. Pays the required fees at the City Treasurer Office	2.Documents will be registered and released after compliance of ten (10) days' notice of posting.				
3.After compliance of ten (10) days' notice of posting, receives the personal copy of Certificate of Death					
	Total	P120.00	15 minutes & 10 calendar days		



### 6. Registration of On-Time Marriage Certificate

A process of registering Certificates of Marriage of two individuals married/solemnized in Legazpi City within fifteen (15) days for with Marriage License and thirty (30) days for with Affidavit of Cohabitation/ P.D 1083.

Office or Division: Marriage Registration Section					
Classification:		Tation Sect	1011		
	Simple				
Type of Transaction:	G2C-Governmen	nt to Client			
Who may avail:	General Public,				
CHECKLIST OF REQ	UIREMIEN I S		WHERE TO SE	ECURE	
Duly Accomplished Marriage Certificate (4 copies) -with attachments of: For Article 34- Affidavit of Cohabitation For P.D 1034- Dowry Agreement Form			Registrar Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present and submit the duly accomplished Marriage Certificate (4 copies)	1. 1.) Receives the Certificate of Marriage	None	15 minutes/ document	City Civil Registrar OCCR Legazpi City and Chief of Marriage Registration Section Admin. Aide I	
	1.2.) Checks/reviews the correctness and completeness of data				
	1.3.) Registers and signs the Marriage certificate by the Local Civil registrar/				



	Authorized Signatory			
	1.4.) Assigns Registry number			
2.Receive the registered Certificate of Marriage	2. Release personal copy to client			
	Total	None	15 minutes	

### 7. Delayed Registration of Marriage Certificate

A process of registering Certificate of Marriage of two individuals married/solemnized in Legazpi City beyond fifteen (15) days for with Marriage License and thirty (30) days for with Affidavit of cohabitation (Art. 34)/ P.D 1034

### 7.1 Reconstruction of Marriage Certificate

A process of reconstructing Marriage Certificates based on unregistered Marriage certificate/ Matrimony of marriage from Church/ Office of the Mayor/ Judge

Office or Division:	Marriage Registration Section				
Classification:	Simple				
Type of Transaction:	G2C-Governme	nt to Clien	t		
Who may avail:	General Public				
CHECKLIST OF REQ	UIREMENTS		WHERE TO SE	CURE	
•Delayed Registration:     1. Duly Accomplished M Certificate (4copies)	arriage		Mayor's Office/ Ju	dge	
2. Negative Result of Marriage (for 3 months late)		2. PSA	2. PSA		
<ul> <li>Reconstruction of Marriage Certificate <ol> <li>CENOMAR</li> <li>Negative Result of Marriage</li> <li>Certificate of Marriage/Matrimony</li> <li>2 Birth certificate of children with correct date of Marriage</li> <li>Affidavit of 2 Disinterested Person</li> </ol></li></ul>		1.PSA 2.PSA 3.Church/Mayor's Office/Judge 4.Client/LCR/PSA 5.Notary Public			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present and submit complete documents and required attachments	1. Receives complete documents For Reconstruction	<u>P50.00</u> (Service Fee)	30 mins. /document	<i>City Civil Registrar</i> OCCR Legazpi City	



				CIAL
	of Marriage certificate: a.) Prepares Certificate of marriage b.) Prepares and post notice of publication c. Notarize Affidavit of late registration d.) Give claim stub to client		10 mins./document	and Chief of Marriage Registration Section Admin. Aide I
2. Filled-up and sign affidavit of late registration (at the back portion of Marriage Certificate)	2.Registers and signs the Marriage certificate			
3. Pays at the City Treasurer's Office the prescribed fee.	3. Assigns registry number			
4. Get claim stub (with ten days posting period)	4. Release the registered Marriage Certificate			
5. Receives the registered Marriage Certificate				
	Total	P50.00	40 minutes	



### 8. Application and Issuance of Marriage License

A process of applying for a license to contract marriage of couple and have all the necessary personal data and information.

Office or Division: Marriage Registration Section						
Classification:	Simple					
Type of Transaction:	G2C-Govern	ment to Client				
Who may avail:	General Pub	lic,				
CHECKLIST OF REQ	UIREMENTS		WHERE TO SECUR	2E		
1. Birth certificate		1. LCRO/ PSA				
2.CENOMAR		2.PSA				
3.Valid ID		3.Government/P	rivate sectors			
4.Parental Advice (21-2	24 yrs. Old)	4.LCRO				
5.Consent (18-20 yrs. 0	Dld)	5.LCRO				
6. Death Certificate of S widow/widower)	Spouse (for	6.LCRO/PSA				
7. Legal Capacity to Ma foreign national)	7. Legal Capacity to Marry ( for		7.respective embassy			
8.Original/Certified True Judicial Decree of Abso Divorce/ Nullity of Marr annulled/divorcee)	plute	8.Court				
CLIENT STEPS	AGENCY	FEES TO BE	PROCESSING	PERSON		
1. Present and submit	ACTIONS 1. Receives	PAID	TIME	RESPONSIBLE		
complete requirements	documents and interview clients	<u>P100.00</u> (Family Planning Fee) <u>P300.00</u> ( Application	30 mins./ document	<i>City Civil Registrar</i> OCCR Legazpi City		
		Fee) <u>P200.00</u> (Marriage License Fee)	20 mins./ document	and Chief Marriage Registration Section OCCR Legazpi City		
		<u>P500.00</u>				



			CIAL
		(Solemnization Fee)	
2. Pays at the City Treasure's Office Family Planning Fee	2. Prepares parental advice/ consents (for 18024 yrs. Old)		
3. Attend Family Planning seminar as scheduled	3. Prepares family planning seminar schedule		
4.1. Come back after attended the family planning seminar	4.1. Prepares Marriage Application		
4.2review and sign Marriage Application Form	4.2. Prepares Notice of Publication		
4.3Pays at the City Treasure's Office the prescribed fees	4.3. Review and signs jurat of Marriage application		
	4.4. Post/mail notice of publication (with 10 days posting period)		
	4.5. Assigns marriage application number		
5. Get Claim Stub	5. Gives claim stub to client.		



6. Receives the Marriage License	6. Prepares and signs Marriage License		16 minutes/document	
	7. Release marriage License			
	Total	P1, 100.00	65 minutes	

### 9. Issuance of Certified True/Xerox Copies of Civil Registry Records

A process of acquiring certified true/Xerox copies of Birth Certificates, Marriage Certificates, Death Certificates and other civil registry records that are registered in Legazpi City.

	ni registry records triat are registered in Legazpi Oity.				
Office or Division:	Archives Section				
Classification:	Simple				
Type of Transaction:		G2C-Government to Client			
Who may avail:	General Public				
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE		
1.Verification Form			ivil Registrar Offic		
2. Valid ID		2.Governr	nent/Private Sect	or	
3.Authorization Letter (for persons to claim)	r not authorized	3.Owner o	of the Document/A	Authorized person	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.1) Fill-up and sign the verification form	1.Recieves the verification form	<u>P50.00</u> (local use) <u>P200.00</u>	30-45 minutes/ document	City Civil Registrar OCCR Legazpi City and	
<ul> <li>1.2.) Submit and present ID/ Authorization Letter</li> <li>2.Pays the required fees at the City Treasurer's Office</li> </ul>	2.Verify and checks the record of the requested certificate	(abroad)		Chief of Archives Admin. Officer I Admin. Aide III	
3.Recieves the documents	3.Local Civil Registrar/Authorized signatory signs the certified true/Xerox copy of the document				



4.Released the documents to clients			
Total	P50.00	30-45	
	(local	minutes	
	use)		
	-		
	P200.00		
	(abroad)		

### **10. Electronic Endorsement**

A process of submitting in advance the newly registered copy of Birth, Marriage, and Death certificate to PSA in the current month for fastest acquiring of PSA copy in SECPA. This also includes endorsing a copy to PSA negative issued certification but available at the Local Civil Registrar including those who have blurred/ unreadable copies at PSA.

Office or Division:	Archives Section				
Classification:	Simple				
Type of	G2C-Government to	o Client			
Transaction:					
Who may	General Public				
avail:					
	F REQUIREMENTS WHERE TO SECURE				
1. Applicant's CO Certificates	LB/COM/ Death	1. Owner's copy/ Local Civil Registrar			
2. Negative Certif	ication from PSA	2.PSA			
3.PSA feedback f	form (if any)	3.PSA			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BEPROCESSINGPERSONPAIDTIMERESPONSIBL			
1. Fill-up the verification Form and submit the required documents (if any	1.1Receives the form/documents	<u>P50.00</u> (Electronic Endorsement Fee)	15- 30 minutes/document	City Civil Registrar OCCR Legazpi City and Chief of	
2. Pays the required fees at	<ul><li>1.2 Verify and checks the record</li><li>2.1 The Local Civil Pogistrar/Authorized</li></ul>		3-4 weeks waiting period at PSA	Archives Chief of Birth Registration section	
the City Treasurer's Office	Registrar/Authorized Signatories issues and signs Endorsement letter			Admin. Officer I Admin Aide III	



	with the attached Certificate			
	2.2 Submits documents to PSA			
3. Receives a copy of endorsement letter and follow-ups at PSA after 3-4 weeks	3. Gives client a copy of endorsement letter sent to PSA and advises the client to follow-up after 3-4 weeks at PSA.			
	Total	P50.00	30 minutes and 3-4 weeks	

## 11. Processing of Petitions for R.A 9048 and R.A 10172 (Change of first name and correction of Clerical Error in Civil Registry Records) Administrative process of correction on erroneous entries in the Civil Registry documents.

Office or Division:	Archives Secti	on	
Classification:	Complex		
Type of	G2C-Governm	ent to Client	
Transaction:			
Who may avail:	General Public	, Clients/Applicants	
CHECKLIST OF RE	QUIREMENTS	WHERE TO SECURE	
1. Birth, Marriage or Do Certificate with erroned subject for correction		1. LCRO and PSA	
2.Petitioner's parents a COLB (Birth Certificate		2. LCRO and PSA	
3.Petitioner's Marriage Certificate (if married) and his/her children's COLB (Birth certificate)		3. LCRO and PSA	
4.Petioner's personal of bearing the correct iter reference to his civil re documents sought to b (e.g. baptismal certifica and medical records, v SSS and GSIS records	ns in gistry be corrected ate, school ralid IDs,	4. Church/School/Hospital/CITY Health Office/SSS and GSIS	



Change of First Name Correction of Sex and and month (NBI and P Clearance, Employer's No Pending Administra	Additional requirements for hange of First Name and orrection of Sex and Birth date nd month (NBI and Police learance, Employer's Affidavit of o Pending Administrative Charge, employed, or Affidavit of Non- mployment)		PAO or Private N	Iotary Public
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present the subject civil Registry document for evaluation and needed supporting documents and required filing fees</li> <li>Clients complied and submit the supporting documents</li> </ol>	<ul> <li>1.Interview the client and advised to submit the needed supporting documents</li> <li>2.Evaluation and preparation of the needed petition, notary for jurat and advised for payment, advised the clients for publication of the petition, if it is for change of first name or correction of date and month/posting of petition in the City Hall Bulletin Board for ten (10) days</li> </ul>	<ol> <li>None</li> <li><u>P3,200.00</u> change of First name/Correction of Sex, date of birth and month</li> <li><u>P1,200.00</u> Correction of Entry</li> <li>(Additional of <u>P300.00</u> for endorsement fee to PSA, Legal)</li> <li>Publication fee is to be paid to publisher</li> </ol>	2 minutes/ document 20 minutes/ document	City Civil Registrar OCCR Legazpi City or Chief of Archives Admin. Aide I
3.Clients submit the clippings and publisher's affidavit of publication	3.CCRO approved the petition and send it to PSA Legal Service, Quezon City for AFFIRMATION	5. P150.00		



	(waiting period is 2-3 months)			
4.Client received a certified Xerox copy of the AFFIRMED Petition with certificate of Finality and the annotated/corrected civil registry documents subject of petition	4.1 Receives copy of the OCRG AFFIRMED Petition, prepares certificate of Finality and annotated copy of the subject civil registry records.			
	4.2 .Endorses a copy of to PSA CRS for up-dating of the client's records on PSA Data thru Decap.			
	Total	P4, 400.00 (Additional P300.00 for endorsement to PSA)	22 minutes	

### 12. Processing of the Application for Change of Surname per R.A 9255

Office or Division:	Archives Section	
Classification:	Complex	
Type of Transaction:	G2C-Government to	o Client
Who may avail:	General Public, Clie	nts/Applicants
CHECKLIST OF REQU	JIREMENTS	WHERE TO SECURE
1. Certified Xerox copy of the ch Copy	ild's LCRO and PSA	1. LCRO and PSA
<ul> <li>2. Subscribed Affidavit to Use the Father:</li> <li>a. For the child age 0-7 yes</li> <li>b. For the child age 7 – 18 with notarized attestation</li> <li>c. For the Child 18 years and the child 18</li></ul>	ars old - mother years old - child n of the mother	2. LCRO or any Notary Public



3. Notarized Father's Admission child' unrecognized by the nature child's COLB		3. LCRO or	any Notary Public	;
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the LCRO and OCRG Copy of birth certificate with duly notarized Affidavit to Use the Surname of the Father, for un-recognized child by the in the birth certificate, include a notarized Affidavit of Admission of Paternity executed by his/her biological/natural father	1.1.) Evaluate the completeness and veracity of entries on the documents submitted and the real filiation and true identity of the father executing the Affidavit of Admission	P200.00 (Authentica tion Fee)	20 minutes/ document	City Civil Registrar or Registration Officer III Admin. Aide I
	1.2.) Register the submitted Legal Instrument to the appropriate Civil Register			
	1.3.) Advised for payment, prepare the Certificate of Registration and Annotated birth certificate of the child			
2. Clients received a copy of the child's annotated COLB.	2. Endorse to PSA a copy of the same registered documents for up- dating in PSA data of the child's record on PSA File			
	Total	P200.00	20 minutes	



# 13. Registration of Court Decrees/Order: Adoption, Nullity of Marriage, Legal Separation Court Issuances

Registration of court processes affecting civil status of a person and issuance of annotated civil registry records effecting a court decree

Office or Division:	Archives Section			
Classification:	Complex			
Type of Transaction:	G2C-Government to Client			
Who may avail:	General Public			
CHECKLIST OF REQU			WHERE TO S	ECURE
1. 4 Certified Xerox copies of the		1. Court whe	re the DECISION	
2. 4 Certified Xerox copy of the C Entry of Judgment, Decree of Ac Nullity/Annulment of Marriage Additional requirement if DEC issued by RTC, Legazpi	Certificate of Finality, doption and CISION was not	1. Court whe	re the DECISION	was issued
3. Certificate of Registration and Court Decision issued by the M the Court sits/located			R where the issuin CISION is located	g the
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the Court DECISION/ORDER, together with the Certificate of Finality/Entry of Judgment/Decree of Adoption/Nullity or Annulment of Marriage and copy of the civil registry documents subject of the Court Decree/Order	1.a.) Examines and Evaluates the completeness and veracity of Court Decree			<i>City Civil Registrar</i> OCCR Legazpi City or <i>Chief of Archives</i> <i>Admin. Aide I</i>
	<ul> <li>1.b.) Registers the Court Decree in the Registry Book of Court Decree</li> <li>1.c.) Prepares the Certificate of Registration and</li> </ul>	<u>P300.00</u> (Registratio n of Court Decree)	20 Minutes/ document	
	annotated civil registry documents subject of the Court Order/Decree 1.d.) Advises the client the corresponding payment and			



1. Clients received a copy of the annotated civil registry documents subject of the Court Action.	Endorses the subject document to PSA, Quezon City for up-dating in PSA data base the subject document.			
	Total	P300.00	20 minutes	

### **14. Supplemental Report**

A process of adding/ supplementing omitted items in the concerned civil registry documents previously registered in LCRO and OCRG files.

Office or Division:	Archives Section			
Classification:	Complex			
Type of Transaction:	G2C-Government to	o Client		
Who may avail:	General Public, Clie	ents/Applican	ts	
CHECKLIST OF REQU	JIREMENTS		WHERE TO S	ECURE
<ol> <li>Certified copy of the LCRO a death and marriage certificat</li> </ol>	-	1. LCLRO ar	nd PSA	
2. Subscribed Affidavit of Supple stating the reason why the entry filled up during registration		2. LCRO or I	Notary Public	
3. Any document bearing the c for the item to be supplemented		3. Issuing Of	fice/agency	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit a certified copy of the civil registry document with blank items sought to be supplemented added, together the Notarized Affidavit of Supplemental Report	1. Evaluate the document submitted and prepare the supplemental item in Municipal Form No. 1A.	<u>P150.00</u> (Suppleme	20 Minutes/	<i>City Civil Registrar</i> OCCR Legazpi City or
2. Payment of the required fees and Clients received his/her annotated Civil Registry	2. Prepare the annotated civil registry records and endorsement to	ntal Fee)	application	Chief of Archives



documents with supplemental information	PSA for the needed up-dating in PSA data base effecting the supplemental data/items.			
	Total	P150.00	20 minutes	

### 15. Issuances of Other Certificates Relative to Civil Registration

A process of issuance of miscellaneous certifications needed by the client for some legal purposes.

Office or Division:	Birth, Marriage, De	ath and Arch	ives Section		
Classification:	Simple	Simple			
Type of Transaction:	G2C-Government to	o Client			
Who may avail:	General Public, Clie	ents/Applican	ts		
CHECKLIST OF REQ			WHERE TO S	ECURE	
1. Application/Verification Form	)	1.LCRO			
2. Requesting Letter (if any)		2.Governme	nt/Private agency		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Filling of Application Form	1.1Searching of records	<u>P50.00</u> (Service	30	<i>City Civil Registrar</i> OCCR Legazpi City	
	1.2 preparation of certification	Fee)	minutes/applic ation	and	
2.Payment of the required fees at City Treasurer's Office	2. Local Civil Registrar/ Authorized signatory signs the certification			Chief of Archives Chief of Birth Registration Section Admin. Officer I	
3. Receives the certification/document	3. Release the document to client	1			
	Total	P50.00	30 minutes		



FEEDBACK AND COMPLAINTS M	ECHANISM
How to send Feedback	Accomplish/ Fill-up the Customer Feedback form available at Information Desk/ Window 1 of our office.
How feedbacks are processed	Once the feedback is received, it will be forwarded and endorsed to the concerned section/ person for appropriate action.
How to file a complaint	Accomplish Client's Complaint/ Feedback Form with Public Assistance and Complaints Desk (PACD) Clients inquiries, feedback mechanisms, suggestions, recommendation as well as complaints may send/call to: 1. Priscilla L. Galicia(OIC-CCR)- 09276463610 2.Juan B. Yuson (ROIII) - 09358185300 3.Corazon Kim E. Nemir(Admin. Officer I) - 09369700665 Email Address: legazpicivilregistrar@gmail.com
How complaints are processed	The office evaluates the Accomplished PACD Form and interviews the complainant. After which, endorses the complaint to the concerned appointed officer/ Local Civil Registrar. The Local Civil Registrar calls the attention of the concerned person/ sector being complained for appropriate action and provides feedback.
Contact Information of CCB, PCC, ARTA	LCRO Office- CP# 09606884345

Office	Address	Contact Information
Office of the City Civil	Legazpi City Hall Building	09606884345
Registrar- Legazpi City	1F, Rizal St. Legazpi City,	legazpicivilregistrar@gmail.com
	Albay	



## OFFICE OF THE CITY ENVIRONMENT AND NATURAL RESOURCES



## OFFICE OF THE CITY ENVIRONMENT AND NATURAL RESOURCES

**External Services** 



### Solid Waste Management

SECURING OF PERMIT TO DUMP:

The OCENR is implementing a timed and scheduled segregated collection services. Collection of waste from the established Materials Recovery Facility or Drop-Off-Center (MRDOC) of each barangay is done daily. The "No Segregation, No Collection" policy is strictly enforced by the city. From the Barangay MRDOC, waste will be transported to its intended destination, Composting Facility or Sanitary Landfill Facility. However, individuals and firms may directly dispose their garbage to the city's designated facility on a case to case basis upon request.

Office or Division:	Office of the City I	Office of the City Environment and Natural Resources (OCENR)			
Classification:	Simple	Simple			
Type of Transaction:	G2C, G2B, G2G	G2C, G2B, G2G			
Who may avail:		ALL			
CHECKLIST OF RE		l l	WHERE TO SEC	CURE	
Client prepares a letter of copy, 1 photocopy)	request (1 original	Client			
Fill-in Permit to Dump For	m	OCENR			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Client prepares a letter of request and present letter to the Desk Officer	1.1 Desk Officer review the letter of request, give client a request for permit to Dump Form to fill- up	None	5 minutes	Administrative Personnel	
Client properly filled-up the request for permit to Dump form	2.1 Review the permit to Dump Form if properly filled-up	None	10 minutes	Administrative Personnel	
	2.2 Client is interviewed and request is referred to technical personnel for ocular inspection of garbage for Disposal				
	2.3Ocular Inspection of garbage	None	1 hr. (depends on location)	Administrative Personnel	



2.4 Report of Inspection/ Recommendation	None	20 minutes	Administrative Personnel
<ul><li>2.5 Issuance of Permit to Dump (if request is acceptable)</li><li>2.6 City ENRO explains if declined</li></ul>	None	10 minutes	Administrative Personnel City ENRO
Total		1 hr. & 45 mins.	

# SECURING OF VISITORS ENTRY PASS TO THE CITY SANITARY LANDFILL FACILITY:

The construction of a Sanitary Landfill Facility is a mandate under RA 9003, otherwise known as the "Ecological Solid Waste Management Act of 2000". This is to protect public health and the environment. To construct a SLF is quiet costly that's why only a few of the LGUs were able to establish a Sanitary Landfill Facility (SLF) as its final disposal of the collected waste from the households and one of them is the City of Legazpi. From construction up to the start of the operation and until now, the facility is frequently visited by LGUs from other cities/municipalities, students and even business entrepreneurs. Inside the SLF, the areas to be visited are classified into Yellow Zone (Safe Area) and Red Zone (Critical Area). Technical Assistance to the visitors are provided by the OCENR Staff

Office or Division:	Office of the City Environment and Natural Resources (OCENR)			
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	ALL			
CHECKLIST OF REQ	UIREMENTS	WHERE TO SECURE		
Client prepares a letter of rec	quest (1 original	Client		
copy, 1 photocopy)				
Fill-up entry pass form		OCENR		

SECURING OF ENVIRONMENTAL CERTIFICATE TO ECOLOGICAL SOLID WASTE MANAGEMENT SEMINAR TO BUSINESS ESTABLISHMENT (FACE TO FACE/VIRTUAL SEMINAR) FOR NEW BUSINESS AND FOR RENEWAL OF BUSINESS PERMIT:

Per City Ordinance No. 0010-2008, all owners & operators of business & commercial establishments are required to undergo a seminar on Ecological Solid Waste Management prior to issuance of a business permit and license to operate. Seminar



on ESWM is done by OCENR 5x a week (Monday to Friday afternoon) during the peak months of Business Permit Renewal and 2x a week (Tuesday & Thursday

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Client prepares a letter of request and present letter to the Desk Officer	1.1			
<i>Client fill-up the SLF Visitors Entry Pass Form</i>	2.1 Properly filled- up form is checked and client is asked if project orientation is needed	None	10 minutes	Special Operations Officer III/ Technical Staff
	2.2 If project orientation is asked to be conducted, City ENRO assigns a Technical	None	10 minutes	City ENRO
	Personnel 2.3 Issuance 0f SLF Entry Pass		5 mins	Special Operations Officer III/ Technical Staff
	1.1 Information Desk Officer refers the client to OCENR personnel project-in-	None	5 minutes	Administrative Personnel
	charge OCENR Personnel request the client to fill-up the SLF Visitors Entry Pass Form	None	10 minutes	Special Operations Officer III/ Administrative Personnel
	Total		40 mins.	

afternoon) during lean month:

#### I - FOR ENVIRONMENTAL SEMINAR:

FOR NON-COMPLIANT BUSINESS ESTABLISHMENTS/ESTABLISHMENTS WITH EXPIRED CERTIFICATE OF ATTENDANCE. NON-COMPLIANT BUSINESS ESTABLISHMENTS ARE OPERATIONAL BUSINESSES IN THE CITY THAT HAVE NO RECORD OF ATTENDANCE TO THE ESWM/EBDS.

Office or Division:	Office of the City Environment and Natural Resources (OCENR)			
Classification:	Complex			
Type of Transaction:	G2B			
Who may avail:	ALL			
CHECKLIST OF REQUIREMENTS WHERE TO SECURE				



Client accomplishes the Environmental Baseline Data Sheet (to be filled-up via Google Forms)		Link can be found at OCENR's Facebook Page		
Attendance to the Virtual Environmental Webinar		seminar via 2	send the details o Zoom to the applic nobile number	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Client accomplishes the Environmental Baseline Data Sheet (to be filed- up via Google Forms	<ul> <li>1.1Review the form and sends the details of the virtual seminar via Zoom to the applicant's email address a. Applicants with expired Certificate of Attendance will be cleared from the negative list after the submission of environmental Baseline Data Sheet (EBDS)</li> <li>b. Applicants tagged as non- compliant will be cleared from the negative list after attending the virtual seminar</li> </ul>	50.00 a. For business establishme nt with Mayor's Permit- payment is included in the 1 time assessment b. For micro enterprises, such as sari-sari stores/ ambulant vendors), a a payment slip will be issued to the client for payment to the CTO)	15 minutes	Administrative Personnel
Applicant attends the Environmental Webinar	<ul> <li>2.1 OCENR conducts the Environmental Webinar</li> <li>2.2 Prepares the Environmental Certificate after the webinar a. Prepares and print the EC for release to the client</li> <li><i>b.</i> Sends the e- copy of the EC to the applicant's</li> </ul>		2.5 hrs	Webinar Team Administrative Staff



via email, if requested	
Total	2 hours & 50 mins.

### II - FOR NEW APPLICATION/RENEWAL OF ENVIRONMENTAL CERTIFCATE BUSINESS ESTABLISHMENTS.

Office or Division:	Office of the City I	Environment a	nd Natural Resou	rces (OCENR)
Classification:	Complex			
Type of Transaction:	G2B			
Who may avail:	ALL			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	CURE
New applications for business permit/renewal wherein the validity period of the environmental certificate (EC) is not yet expired, they will be processed upon application of a new/renewal business permit to BPLO				
Attendance to the Environmental Seminar			ne applicants ema	f the environmental il address or
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Applicant attends the	<ol> <li>OCENR checks the information of the clients in the data base provided by BPLO</li> <li>Review the form and sends the details of the environmental seminar to the applicant's email address or mobile number</li> </ol>	50.00 a. For business establishm ent with Mayor's Permit- payment is included in the 1 time assessmen t b. For micro enterprises	10 minutes	Administrative Staff Seminar Team
Applicant attends the Environmental Webinar	<ol> <li>Conducts the Environmental Seminar (venue to be announced)</li> </ol>	, such as sari-sari stores/ ambulant vendors), a	2.5 hrs	



			CIAD
	payment		Administrative
<ol><li>Prepares the</li></ol>	slip will be	10 minutes per	Staff
Environmental	issued to	certificate	
Certificates after	the client		
the seminar	for		
a. Prepares	payment to		
and print the	the CTO)		
Total		2 hours &	
		50 mins.	

**NOTE:** The Environmental Certificate (EC) is valid only for three (3) years after its issuance. After the validity period, business establishments will have to renew their EC by attending another ESWM/Environmental seminar for updates/developments on Environmental Program and Policies of the City.

### SECURING OF A CERTIFICATE OF NO OBJECTION TO CUT TREE

Individuals, schools, firms and other entities who wish to cut down trees within our outside their property or within the project site required to secure a Permit to Cut Tree from the Department of Environment and Natural Resources (DENR). However, as a requirement by the DENR, a certification of no objection shall be secured from the LGU concerned. In the City of Legazpi, the certification may be secured from the Office of the City Environment and Natural Resources:

Office or Division:	Office of the City Environment and Natural Resources (OCENR)			
Classification:	simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	ALL			
CHECKLIST OF REQ	UIREMENTS	WHERE TO SECURE		
Two (2) original copies         1. Client prepares a letter         addressed to the City         Mr. Cicero T. Caňo, C         (indicate in the letter         number of the focal p         requesting party to fa         addressing the request	Mayor, Attn: City ENRO the mobile person from the politate in est.)	Client		
2. Barangay Certificate Cut Trees	of No Objection to	Barangay		
3. Land Title/Tax Declar lot)	ration (for private	Client		
<ol> <li>Map/Diagram showin location of all trees re bearing its individual coordinates and tree</li> </ol>	equested to be cut geographical	Client Client		
<ol> <li>Individual pictures of with corresponding g coordinates</li> </ol>		Client		



				FICIAL SV	
number/quantity a	ree species and its nd tree	Client			
	circumference at breast height 7. Site Development Plan showing the		Client		
8. Authorization lette ID of landowner (i	r with duly attached	Client			
9. Identification card landowner/transac	of the	Client			
10. Barangay Resolut barangay consulta	ion/minutes of the ation meeting (for				
selected governm 11. Environmental Co together with its A		Barangay			
on Non Coverage EMB V (for develo	(ECC/CNC) from pment	DENR-EMB			
projects/undertaki ECC/CNC) 12. Zoning Certificatic	n (for development				
projects requiring Ordinance No. 14 applicable	ECC/CNC per City -0011-2019, if	City Planning & Development Office			
13. Locational Cleara No. 14-0011-2019	), if applicable				
14. Duly accomplishe Undertaking 15. Ocular visit/inspec	•	City Planning & Development Office			
•	nplete requirements				
Note: Additional documen when complex situation re arise upon complete eval submitted requirements a	equires as it may uation of the				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Client prepares a letter of request and have it received at the City Mayor's Office (Original Copy) with complete required documents	1.1 Information Desk Officer received and records the letter and forwarded it to the City	None	5 minutes	Administrative Personnel	
and provide a duplicate copy at OCENR, to the Desk Officer	ENRO 2.1 City ENRO, conducts initial evaluation of the letter request and provide instruction to the concerned	None	15 minutes	City ENRO	



			ICIAL 3
personnel for appropriate action 3.1 The personnel in-charge conducts evaluation of the documents and schedule the date of the actual inspection	None	1-3 days (depending on the complexity of the request, number of days may be shortened)	Project Development Officer III/ Technical Personnel
4.1 Conduct ocular inspection to validate the request, make appropriate recommendatio n, and prepares the necessary certification for	None	5 days (depending on the complexity of the request. number of days may be shortened)	Project Development Officer III/ Technical Personnel
signature by the City ENRO 5.1 The City ENRO checks and reviews the Certificate of No Objection and if found valid, the certification is signed 6.1 OCENR	None	20 minutes	City ENRO
Information Desk Officer receives and records the duly signed certification for release to the requesting client to support his/her request for a Permit to Cut Tree with the DENR Field Office	None	10 minutes	Administrative Personnel
Total		8 hours & 50 mins.	



# SECURING OF A CERTIFICATION FOR THE APPLICATION FOR THE REGISTRATION OF CHAINSAW

Individuals, firms and other entities who wanted to register the chainsaw being used in cutting-down trees are required to apply for the Registration of Chainsaw from the Department of Environment and Natural Resources (DENR). However, as a requirement by the DENR, a certification shall be secured from the LGU concerned. In the City of Legazpi, the certification may be secured from the Office of the City Environment and Natural Resources (OCENR):

Office or Division:	Office of the City E	Environment and Natural Resources (OCENR)
Classification:	simple	
Type of Transaction:G2C, G2B, G		
Who may avail: ALL		
CHECKLIST OF REQU	JIREMENTS	WHERE TO SECURE
<ul> <li><u>Two (2) original copies</u></li> <li>Client prepares a letter of request addressed to the City Mayor, Attn: Engr. Linno Benju Q. Calleja, OIC-City ENRO/SOO III (<i>kindly indicate in the</i> <i>letter the mobile number of the person</i> <i>to facilitate coordination</i>)</li> <li>Certificate of registration issued by</li> </ul>		Client DENR
<ul> <li>DENR (copy of the expired registration subject for renewal</li> <li>3. Identification card of the owner</li> <li>4. Official receipt/sales invoice for the purchase of the unit or duly notarized Affidavit of Ownership</li> </ul>		Client Client
5. Barangay Certification of chainsaw ownership		Barangay Client
7. Stencil of the serial number of the unit Note: Additional documents maybe requested when situation requires as it may arise upon complete evaluation of the submitted requirements		Client



CLIENT STEPS ACTIONS BE PAID TII	ESSING PERSON ME RESPONSIBLE
	inutes Administrative
of request and have it Desk Officer	Personnel
received at the City received and	OCENR
Mayor's Office (Original Copy) with completerecords the letter and forwarded it	
required documents to the City	
and provide a duplicate ENRO	
	minutes City ENRO
to the Desk Officer 2.1 City ENRO	OCENR
conducts initial	
evaluation of the	
letter request and provide Instruction	
to the concerned	
personnel for the	
appropriate action	
and forwards the	
communication to	
the OCENR Desk Officer for proper	
	inutes Administrative
	Personnel
3.1 The OCENR	OCENR
Desk Officer refers	
the documents to	
the personnel-in- charge for None 1 c	day Project
immediate action.	Development
4.1 The personnel	
in-charge conducts	
	Officer
	III/Technical
None 10 mi	inutes
	City ENRO
5.1 OCENR None 5 mir	nutes Administrative
Information Desk	Personnel
Officer receives &	
records the duly	
signed certification	
for release to the	
requesting client to support his/her	
request for	
registration of	
chainsaw	

			FFICIAL SET
	Total	2 hours	

#### REQUEST FOR TREE SEEDLING

Organizations, schools, firms and other entities who wish to request for seedling for their tree planting activities may send letter request to the Office of the City Environment and Natural Resources (OCENR). The Office is responsible for the seedling production and distributing tree seedlings for tree planting activities:

Office or Division:	Office of the City E	Environment a	nd Natural Resou	rces (OCENR)
Classification:	simple	simple		
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	ALL			
CHECKLIST OF RE	QUIREMENTS			
		1	WHERE TO SEC	CURE
addressed to the C Attn:Engr. Linno Be City ENRO/ SOO I <i>letter the mobile nu</i> <i>to facilitate coordin</i> 2. Promissory of Und	<ul> <li>Client prepares a letter of request addressed to the City Mayor, Attn:Engr. Linno Benju Q. Calleja, OIC- City ENRO/ SOO III ( <i>indicate in the</i> <i>letter the mobile number of the person</i> <i>to facilitate coordination</i> )</li> <li>Promissory of Undertaking reflects the conditions that the client has comply with the OCENID</li> </ul>			
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE		PERSON RESPONSIBLE



				CIAL SI
Client prepares a letter of request and have it received at the City Mayor's Office (Original Copy) and provide a duplicate copy at OCENR, to the Desk Officer	1.1 Information Desk Officer received and records the letter and forwarded it to the City ENRO 2.1 City ENRO,	None	10 minutes 20 minutes	Administrative Personnel OCENR City ENRO
	conducts initial evaluation of the letter request and provide instruction to the concerned personnel for appropriate action and forward the communication to the OCENR Desk Officer for proper routing			OCENR
	3.1 The personnel in-charge evaluates the letter and checks the availability of the seedlings at the nursery. If seedlings are available, pertinent documents (seedlings withdrawal slip and promissory of undertaking) are prepared prior to the release of the seedlings.	None	2 days	



CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
02.2.11 012.0	ACTIONS	BE PAID	TIME	RESPONSIBLE
	<ul> <li>4.1 City ENRO approves the seedlings withdrawal slip.</li> <li>5.1 Clients signs the promissory of undertaking.</li> <li>6.1 OCENR Desk Information Officer releases the duly signed withdrawal to the client.</li> </ul>			
	7.1 Client presents the seedling withdrawal slip at the nursery to secure the			<i>City ENRO</i> OCENR
	seedlings.	None	10 minutes	Client
		None	5 minutes	Administrative Personnel OCENR
		None	2 minutes	Client
		None	Depending on the clients availability	



CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTIONS	BE PAID	TIME	RESPONSIBLE
	8.1 OCENR nursery personnel facilitates the hauling of the seedlings and records the details of the request.	None	<sup>1</sup> ⁄₂ day (depending on the quantity of seedlings requested and the location of the nursery, number of days may be extended)	Nursery Personnel OCENR/Client



### REQUEST FOR THE CONDUCT OF INFORMATION, EDUCATION AND COMMUNICATION (IEC) CAMPAIGN

INFORMATION, EDUCATION AND COMMUNICATION (IEC) CAMPAIGN is used for generating awareness. Organizations, schools, establishments and other entities who wish to request for a conduct of Information, Education & Communication (IEC) may send letter request to the Office of the City Environment and Natural Resources (OCENR):

Office or Division:	Office of the City E	Environment a	nd Natural Resou	rces (OCENR)
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	ALL			
CHECKLIST OF RE			WHERE TO SE	CURE
<ol> <li>Client prepares a letter of request addressed to the City Mayor, Attn: Engr. Linno Benju Q. Calleja, OIC-City ENRO/SOO III (<i>indicate in the letter</i> the mobile number of the person to facilitate coordination)</li> </ol>		Client		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Client prepares a letter of request and have it received at the City Mayor's Office (Original Copy) and provide a duplicate copy at OCENR, to the Desk Officer</li> </ol>	<ul> <li>1.1 Information <ul> <li>Desk Officer</li> <li>received and</li> <li>records the letter</li> <li>and forwarded it</li> <li>to the City</li> <li>ENRO</li> </ul> </li> <li>2.1 City ENRO <ul> <li>checks his</li> <li>availability, if</li> <li>not: a: informed</li> <li>other Senior</li> <li>Staff about the</li> <li>letter for</li> <li>immediate</li> <li>action.</li> </ul> </li> <li>3.1 Coordinate and</li> <li>confirmed with</li> </ul>	None None	10 minutes 15 minutes 15 minutes	Administrative Personnel OCENR City ENRO OCENR Resource Speaker
	confirmed with the requesting party the available schedule and speaker.			OCENR



#### REQUEST FOR SERVICES DESLUDGING/SYPHONING OF SEPTIC TANKS

The City Government of Legazpi enacted an Ordinance No. 0025-2015 known as "Septage Management Code" of the City of Legazpi. This is to protect public health and the environment, it shall cover the entire territorial jurisdiction of the City and shall apply to all proposed, planned or existing buildings or structures, whether public or private, residential, commercial

Office or Division:	Office of the City E	Environment a	and Natural Resou	rces (OCENR)
Classification:	Simple			
Type of Transaction:	G2C, G2B, G2G			
Who may avail:	ALL	-		
CHECKLIST OF R	EQUIREMENTS			
			WHERE TO SE	CURE
Client prepares a letter of	request	Client		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Walk-in client proceeds to OCENR information Desk Officer	<ul> <li>1.1 Information <ul> <li>Desk Officer</li> <li>refers the client</li> <li>to the technical</li> <li>person in-</li> <li>charge of the</li> <li>Septage</li> <li>Management</li> <li>Program</li> </ul> </li> <li>2.1 Personnel <ul> <li>interviews the</li> <li>client and fills-</li> </ul></li></ul>	None	2 minutes 10 minutes	Administrative Personnel OCENR Laborer I/ Surveyor/ Coordinator
	up the Survey Form 3.1 Schedules the client for inspection of their septic tank (provided that the survey form is completely filled-out)	None	10 minutes	OCENR Laborer I/ <i>Coordinator</i> OCENR



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	4.1 Inspect septic tank	None	2 hrs.	Laborer I/ Surveyor OCENR
	5.1 Issuance of Payment Order Form (POF)	Septage Fee payment to City Treasurer's Office	5 minutes	Laborer I/ Coordinator OCENR
After payment, present Official Receipt or Septage Fee at OCENR	6.1 Schedules clients for actual desludging service (depends on the availability of vacuum trucks)	None	5 minutes	Laborer I/ Coordinator OCENR
	7.1 Provide lists of clients for desludging to the desludging service team	None	5 minutes	Laborer I/ Coordinator OCENR
	8.1 Actual Desludging operation ( <i>depends on the</i> <i>availability of</i> <i>vacuum trucks</i> )	None	1.5 hours per trip	Laborer I/ Desludging Team OCENR
	9.1 Prepares Manifest Form to be signed by client as conformity to the completion of the desludging operation	None	5 minutes	Laborer I/ Vacuum Truck Unit Operator OCENR



FEEDBACK A	ND COMPLAINTS MECHANISM
How to send feedback?	Answer the Feedback Form located in the Frontline Desk of the OCENR , then place it inside the drop box or personally hand it over to the Officer of the Day (OD). OCENR Contact Number: 0946-599-0597
How feedback is processed?	The Administrative Division verifies the nature of the queries and feedback within one (1) working day. The same shall be referred to the concerned Division. Upon receipt of reply from the concerned Division, the Client will be informed via email, text or phone call. For follow-ups or inquiries, the contact information are as follows: <u>eswm_ocenrlegazpi@yahoo.com</u>
How to file complaint?	0946-599-0597 To file a complaint against the OCENR, provide the following details through writing on the Complaint Form (CSC Form #3), or via e-mail:
	<ul> <li>Full name, address and contact information of the Complainant</li> <li>Narrative of the Complaint</li> <li>Evidences</li> <li>Name of the Person being Complained</li> </ul>
	Send all complaints against the OCENR, through writing on the COMPLAINT FORM (CSC Form #3) or to <a href="mailto:eswm_ocenrlegazpi@yahoo.com">eswm_ocenrlegazpi@yahoo.com</a>
	For follow-ups or inquiries, the contact information is: 0946-599-0597
How complaints are processed?	All complaints received against the OCENR will be processed by the Administrative Division.
	The ADMIN reads (Complaint Form - CSC Form 3), browses, evaluates and determines the complaints received on a daily basis. The ADMIN shall coordinate with the concerned Division to answer the complaint and shall investigate, if necessary. After the concern has been addressed or after conduct of investigation, the ADMIN shall



	prepare an Incident Report and refer it to the Legal Office, for further review. Then the Legal Office shall forward its findings to the City Mayor, copy furnished the OCENR, for appropriate action &/or final decision. The ADMIN shall give the feedback to the clients via email, or through writing.
Contact Information of OFFICE OF THE CITY ENVIRONMENT AND NATURAL RESOURCES (OCENR)	Engr. LINNO BENJU Q. CALLEJA OIC - City ENRO/ SOO III Mr. RHODERIC M. ABACHE Project Development Officer III Office Number: 0946-599-0597 Email Address: eswm_ocenrlegazpi@yahoo.com



### **PUBLIC EMPLOYMENT SERVICE OFFICE**



Office or Division:	Public Employment Service Office					
Classification:	Simple Transaction					
Type of Transaction:	Government to Client					
Who may avail:	Jobseekers	Jobseekers				
CHECKLIST OF R	EQUIREMENTS WHERE TO SECURE					
• Resume			Hand Carry by the	applicants		
NSRP FORM 1			PESO's Front	Desk		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
	Registration and Issuance of National Skills Registration Program Form (NSRP Form 1)	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV		
	Accept Resumes and get the Accomplished NSRP Form 1	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV		
Submission of Resumes, viewing of	Documents will be assessed and evaluated as to the completeness of data required in the form.	None	5 minutes	Labor and Employment Assistant Admin Aide I/IV		
available job vacancies and job referral request.	If the client is only requesting for the list of available Job Vacancies, present PESO Job Vacancies Catalog	None	5 minutes	Labor and Employment Assistant Admin Aide I/IV		
	For Job Matching/ Referral, Interview qualified applicant and suggest Job Vacancies of Partner Employers and/or Technical Vocational Institutions.	None	5 minutes	PESO Manager Labor and Employment Officer II/Assistant		
	Issues Referral Slip	None	3 minutes	PESO Manager		

### **Employment Facilitation - Jobseekers**



			Labor and
			Employment Officer
			II/Assistant
	Total	24 mins.	

### **Employment Facilitation – Employers (Local and Overseas)**

Office or Division:	on – Employers (Local and Overseas) Public Employment Service Office			
Classification:	I V	Simple Transaction		
Type of Transaction:	Government to Client			
Who may avail:	Employers			
CHECKLIST OF R			WHERE TO SE	CUDE
	-		WHERE IUSE	CUNE
and Overseas Em	f requirements (Local		PESO's Front	Desk
NSRP FORM 2	bioyets)		PESO's Front	Desk
	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEPS	ACTIONS	BE PAID	TIME	RESPONSIBLE
	Registration and Issuance of National Skills Registration Program Form 2 (NSRP Form 2)	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV
Request for accreditation for New Agencies/ Employers to access PESO Legazpi Services	Get the Accomplished NSRP Form 2	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV
	Issuance of Requirements	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV
Submission of	Registration	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV
requirements for accreditation for New Agencies/ Employers to access PESO Legazpi Services	Documents will be assessed and evaluated as to the completeness of requirements.	None	5 minutes	Labor and Employment Assistant Admin Aide I/IV
	Assist the client based on their request	None	5 minutes	Labor and Employment Assistant



				CIAL
				Admin Aide I/IV
	Registration	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV Job Order
	Get the Letter of Intent and evaluate the client's request.	None	5 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV
Employer's Request for Resume Browsing, Job posting, Scheduling of Local/Overseas	Verify if the client had already submitted their complete requirements.	None	5 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV Job Order
Recruitment Activity	If client has no requirements yet or submitted documents are already expired, give the lust of needed documents	None	3 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV Job Order
	Assist the client based on their request	None	5 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV Job Order
		Total	43 mins.	

### **OFW Help Desk**

<b>L</b>			
Office or Division:	Public Employment Service Office		
Classification:	Simple Transaction		
<b>Type of Transaction:</b>	Government to Client		
Who may avail	Returning Overseas F	ilipino Workers (OFWs)	
Who may avail:	Displaced Workers		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Official document     clients' concern	ts related to the	Hand Carry by the client	
• Any documents pertaining to the clients' concern		Hand Carry by the client	



CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEFS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
				Labor and
				Employment
	Registration	None	3 minutes	Assistant
				Admin Aide I/IV
				Job Order
A mailing /Information	Assist the client based on their No request	None 10 minutes	10 minutes	PESO Manager
Availing/Information Re: OFWs and OFs				Labor and
				Employment Officer
Concerns and Programs.				II/Assistant
			Contract Of Service	
	Issues			PESO Manager
	Referral/Assist to	Nono	2	Labor and
	Proper Agency/	None	3 minutes	Employment Officer
	Programs			II/Assistant
		Total	16 mins	

### SPECIAL PROGRAM FOR THE EMPLOYMENT OF STUDENTS (SPES)

Office or Division:	Public Employment S	ervice Office		
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	Government to Client			
Who may avail	Students			
Who may avail:	Out of School Youth			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SH	ECURE
Photocopy of Birt	h Certificate			
• ITR of Parents or (if the parents are	BIR Tax Exemption			
-	ency (if the parents	Hand Course has the alignet		
<ul> <li>Certificate of Grades</li> </ul>		Hand Carry by the client		
• 2 pieces of 2x2 pi	cture			
Certification from CSWD if OSY				
CI IENT STEDS	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEPS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
Availing of SPES	Registration	None	3 minutes	Labor and Employment Assistant
Program	Documents will be assessed and evaluated as to the	None	10 minutes	PESO Manager Labor and Employment Officer II/Assistant



completeness of requirements.			Admin Aide I/IV
If qualified and with complete documents, application will be processed and will be included to list of qualified beneficiaries to be submitted to DOLE for final approval.	None	5 minutes	PESO Manager Labor and Employment Officer II/Assistant Admin Aide I/IV
If not qualified or incomplete documents, notify the applicant for appropriate actions.	None	3 minutes	PESO Manager Labor and Employment Officer II/Assistant Admin Aide I/IV
	Total	21 mins.	

### JOBSTART PHILIPPINES PROGRAM

	INES I KUGKAW	L		
Office or Division:	Public Employment Service Office			
Classification:	Simple Transaction			
<b>Type of Transaction:</b>	Government to Client			
Who may avail:	Students			
who may avan.	Out of School Youth			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	ECURE
Photocopy of Birt	h Certificate			
Barangay Certific	ate		Hand Carry by th	a client
Certificate of Grad	des		fiand Carry by ti	
Atleast High Scho	ool Graduate			
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEFS	ACTIONS	BE PAID TIME	RESPONSIBLE	
				Labor and
				Employment
	Registration	None	3 minutes	Assistant
				Admin Aide I/IV
Availing of JobStart				Job Order
Philippines Program	Documents will be			PESO Manager
T imppines Trogram	assessed and			Labor and
	evaluated as to the	None	10 minutes	Employment Officer
	completeness of	THORE	10 minutes	II/Assistant
	requirements.			Admin Aide I/IV
				Contract of Service



com doc app pro be i qua ben sub	ualified and with nplete cuments, blication will be cessed and will included to list of lified heficiaries to be mitted to DOLE final approval.	None	5 minutes	PESO Manager Labor and Employment Officer II/Assistant Admin Aide I/IV Contract of Service
inco doc app	ot qualified or omplete uments, notify the licant for ropriate actions.	None	5 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV
		Total	23 mins.	

### **OTHER DOLE (Grant Based) PROGRAMS**

Office or Division:	Public Employment Service Office			
Classification:	Simple Transaction	Simple Transaction		
<b>Type of Transaction:</b>	Government to Client			
Who may avail:	Qualified Beneficiaries depending on the Program (TUPAD, GIP, DILEEP, etc)		PAD, GIP, DILEEP,	
CHECKLIST OF R	EQUIREMENTS		WHERE TO SE	ECURE
Certification	id ID or Barangay ts to follow depending of program/s	y Hand Carry by the client		ne client
	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEPS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
	Registration	None	3 minutes	Labor and Employment Assistant Admin Aide I/IV
Availing of Other DOLE (Grant Based) Program	For initial interview and assessment regarding their qualifications.	None	15 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV
	If qualified, will be given Form and Lists of Requirements to be	None	5 minutes	Labor and Employment Officer II/Assistant



			CIAC
submitted the following day, else slot will be given to the next qualified applicant.			Admin Aide I/IV
If not qualified, notify the applicant for appropriate actions.	None	5 minutes	Labor and Employment Officer II/Assistant Admin Aide I/IV
	Total	28 mins.	

FEEDBACK AN	ID COMPLAINTS MECHANISM
How to send feedback?	Answer the client feedback form available at the receiving desk and drop it at the designated drop box in the same area. or
	Contact info: 052-820-7621 pesolegazpi@gmail.com
How feedback is processed?	Every Friday, the Administrative Section opens the drop box and compiles and records all feedback submitted.
	Feedback requiring answers are forwarded to the relevant officers or personnel and are required to answer within three (3) working days from the receipt of the feedback.
	The answer of the office is then relayed to the citizen or institution.
	For inquiries and follow-ups, clients may contact the following landline and mobile numbers:
	052-820-7621 0927 532 3801
How to file complaint?	To file a complaint against the PESO, provide the following details through writing on the Complaint Form (CSC Form #3), or via e-mail:



	CIAL 3
	<ul> <li>Full name, address and contact information of the Complainant</li> <li>Narrative of the Complaint</li> <li>Evidences</li> <li>Name of the Person being Complained</li> </ul>
	Send all complaints against the PESO, through writing on the COMPLAINT FORM (CSC Form #3) or to pesolegazpi@gmail.com
	For follow-ups or inquiries, the contact information are as follows:
	052-820-7621 0927 532 3801
How complaint is processed?	The Administrative Section opens the complaints drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the administrative officer shall relay the information to the department head. The department head starts the investigation and calls the attention of the personnel concerned.
Contact Information of PUBLIC	MR. DIOSDADO R. RAÑESES
EMPLOYMENT SERVICE O(PESO)	CGDH I/ PESO Manager
	Office Number: (052) 820-7621
	Cellphone Number: 0927 532 3801
	Email Address: pesolegazpi@gmail.com



### OFFICE OF THE SANGGUNIANG PANLUNGSOD LEGISLATIVE A.



### 1) Receiving of documents

Service Information

Office or Division:	Office of the Sangguniang Panlungsod – Vice-Mayor's Office				
Classification:	Simple				
Type of Transaction:	GC2 – Government to Citizen				
Who may avail:	All				
CHECKLIST OF RI	EQUIREMENTS	NTS WHERE TO SECURE			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING	PERSON RESPONSIBLE	
1. Sign in the Client Logbook of the office.	<ol> <li>Give the logbook to the client.</li> </ol>	None	10 minutes	Assigned employee as Officer of the Day Office of the Sangguniang Panlungsod	
<ol> <li>Submit document and obtain receiving copy with tracking number.</li> </ol>	<ol> <li>Receive / read / check completeness of documents and its attachments (if any).</li> </ol>	None	10 minutes	Local Legislative Staff Officer I Office of the Vice-Mayor	
	2.1 Receive the document by affixing date and time of receipt, document number and signature of receiving staff.	None	20 minutes	Local Legislative Staff Officer I Office of the Vice-Mayor	
	<ul> <li>1.3 Forward document to:</li> <li>a. Secretary to the Sanggunian for agenda</li> <li>b. Vice-Mayor for approval (if solicitation)</li> </ul>	None None	30 minutes 30 minutes	Local Legislative Staff Officer I Office of the Vice-Mayor Local Legislative Staff Officer I Office of the Vice-Mayor	



Vice-Mayor for signature (if communica- tions from CMO; Resolutions, Ordinances, Appropriation Ordinances, etc.)	None	30 minutes	Local Legislative Staff Officer I Office of the Vice-Mayor
Total:	None	2 Hours and 10 Minutes	

### 2. Releasing of documents / solicited items

Classification: Simp	le – Government to		sod – Vice-Mayor WHERE TO SEC	
Type of Transaction:GC2Who may avail:All	<ul> <li>Government to</li> </ul>	o Citizen	WHERE TO SEC	URE
Who may avail: All			WHERE TO SEC	URE
	EMENTS		WHERE TO SEC	URE
				ONE
	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
letter request / cer solicitation letter. refe pro cus doo 2. If th soli lett Ma	ne request is for tification / erences, vide the stomer the cument. ne request is for icitation submit er to the Vice- yor for proval.	None	30 minutes 20 minutes (client is required to leave their contact number for release of their solicited item)	Local Legislative Staff Officer I Office of the Vice-Mayor Local Legislative Staff Officer I Office of the Vice-Mayor
iter dul the with rec sign	n proof of eipt duly ned by the icitor.	None	10 minutes	Local Legislative Staff Officer I Office of the Vice-Mayor
	Total:	None	1 hour	



FEEDBACK AND	COMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the Public Assistance and Complaints Desk of the office.
	Contact No. 742-6136 or Email at <u>splegazpi2016@gmail.com</u>
How feedbacks are processed	Every Friday, the Administrative Officer opens the drop box and complies and records all feedback submitted.
	Feedback requiring answers are forwarded to the Vice-Mayor.
	The answer of the Office is then relayed to the citizen.
	For inquiries and follow-ups, clients may contact the following telephone number: 742-6136
How to file a complaint	Answer the client complaint form and drop it at the designated drop box at the Public Assistance and Complaints Desk of the office.
	Complaints can also be filed via email at <a href="mailto:splegazpi2016@gmail.com">splegazpi2016@gmail.com</a> . Make sure to provide the following information: <ul> <li>Name of person being complained</li> <li>Incident</li> <li>evidence</li> </ul>
	For inquiries and follow-ups, clients may contact the following telephone number: 742-6136
How complaints are processed	The Administrative Officer opens the complaints drop box on a daily basis and evaluates each complaint.



	The Administrative Officer forward the complaint to the Vice-Mayor for investigation.
	The Vice-Mayor will make the necessary action and give feedback to the client.
Contact Information of	HON. OSCAR ROBERT H. CRISTOBAL
SANGGUNIANG	CP Number: 0939-923-6997
PANLUNGSON-LEGISLATIVE OFFICE	MA. LETICIA B. BELLO City Secretary CP Number: 0917-770-3307 0999-988-9950 Email Address: splegazpi2016@gmail.com



### OFFICE OF THE SANGGUNIANG PANLUNGSOD SECRETARIAT B.



#### 1. Receive Documents

Service Information

Office or Division:	Office of the Sangguniang Panlungsod – Administrative Services Division				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	All				
CHECKLIST OF RE		\\/	HERE TO SECU	DE	
1. Documents for sul		Office / Ager			
	0111551011	Onice / Ager	icy		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONS IBLE	
1. Client submits document and obtain receiving copy with tracking number.	<ol> <li>Receive / read / check completeness of documents and its attachments (if any)</li> <li>Receive the</li> </ol>	None	30 minutes 10 minutes	Administrat ive Officer I / Job Order Employee Office of the Sanggunia ng Panlungso d Administrat	
	document by affixing the date and time of receipt, document number and signature of receiving staff.			ive Officer I / Job Order Employee Office of the Sanggunia ng Panlungso d	
	Forward document to the Secretary to the Sanggunian for proper disposition / action	None	10 minutes	Administrat ive Officer I / Job Order Employee Office of the Sanggunia ng	



			Panlungso d
Total:	None	50 Minutes	

### 1. Technical Assistance and Research

Service Information

Office or Division:	Office of the Sangguniang Panlungsod – Technical Assistance and Research Division				
Classification:	Simple				
Type of Transaction:	G2C – Government to	o Citizen			
Who may avail:	All				
CHECKLIST OF RE	EQUIREMENTS	W	HERE TO SECUR	RE	
1. Identification Carc	I	Office ID, So issued ID	hool ID, Any gov	ernment	
2. Letter request		School, Offic	e / Agency		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPON SIBLE	
<ol> <li>Sign in the Client Logbook of the office.</li> </ol>	<ol> <li>Give the logbook to the client.</li> </ol>	None	10 minutes	Assigned employee as Officer of the Day Office of the Sangguni ang Panlungso d	
2. Submit / present letter request.	2. Receive letter request.	None	15 minutes	LLSO III / Legal Aide Office of the Sangguni ang Panlungso d	
	<ol> <li>Research requested data.</li> </ol>	None	2 days for current year Resolutions,	LLSO III / Legal Aide	



			Ordinances or Appropriation Ordinances / 5 days for past years	Office of the Sangguni ang Panlungso d
	<ol> <li>Issues payment order for payment to the City Treasurer's Office.</li> </ol>	PHP 5.00 per photocopy / page PHP 50.00 per page for certified true copy	1 hour	LLSO III / Legal Aide Office of the Sangguni ang Panlungso d
3. Pay the required fees at the City Treasurer's Office by showing the order for payment. "Make sure to secure Official Receipt that will be issued upon payment."	3. Check the official receipt	None	10 minutes	LLSO III / Legal Aide Office of the Sangguni ang Panlungso d
4. Return to the Office of the Sangguniang Panlungsod for the processing and release of documents.	4. Present the photocopied documents to the Sanggunian Secretary or his duly authorized representative with attached official receipt for signature (if client is requesting for a certified true copy) then release the requested document to the client.	None	1 hour	LLSO III / Legal Aide Office of the Sangguni ang Panlungso d
	Total:	PHP55.00	2 days, 2 hours and 35 minutes	



### 1) Inspection of unit

	i) inspection of unit					
Office or Division:	Office of the Sangguniang Panlungsod – Franchising Unit					
<b>Classification:</b>	Simple					
Type of	G2C – Government t	o Citizen				
Transaction:						
Who may	Operators / Drivers o	f tricycles, taxicles	and pedicab			
avail:						
	F REQUIREMENTS	W	HERE TO SECUE	RE		
Duly notarized a		Sangguniang Par	nlungsod			
renewal of Franc						
Certificate of Fra		Sangguniang Par				
	of the Previous Year	Sangguniang Par				
	OR) and Certificate	Land Transportat	ion Office			
	CR) in the case of					
	ind taxicle for hire					
Insurance covera		Preferred Insuran		e		
	/ inspection report	Sangguniang Par	<u> </u>			
Latest Cedula			Office / Barangay			
Barangay Cleara		Barangay				
Police Clearance		Philippine Nationa	al Police			
White folder (lon			DDOOE00INO	DEDOON		
CLIENT	AGENCY	FEES TO BE	PROCESSING			
STEPS	ACTIONS	PAID	TIME	RESPONSIBLE		
1. Submit	1. Check the submitted	None	10 minutes	Senior		
application for inspection of				Transportation		
inspection of unit	documents together with			Regulation Officer II		
	the attached					
	requirements.			Sangguniang		
				Panlungsod		
	2. Inspect Unit for	None	1 hour	Senior		
	Roadworthiness			Transportation		
	(If unit is found			Regulation		



		-		CIAL
	to be defective, not roadworthy or did not comply with Ordinance No. 0005-2012, as amended, the application will be held in abeyance until correction of defects.			Officer II / Authorized Inspector Office of the Sangguniang Panlungsod
	3. Re-evaluation of application and assessment of fees	None	10 minutes	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
	<ol> <li>Issues payment of fees</li> </ol>	None	10 minutes	Transportation Regulation Officer II Office of the Sangguniang Panlungsod
Pay the required fees at the City Treasurer's Office by showing the order of payment. "Make sure to secure Official Receipt that will be issued upon payment.		Tricycle for hire or taxicle for hire: 1. Annual Supervision Fee – PHP150.00 per unit 2. Certificate on Safety and Roadworthiness – PHP50.00 per unit 3. City Plate – PHP250.00 per unit Pedicab-for-	1 hour	<i>Cashier</i> City Treasurer's Office
		hire: 1. Annual Supervision Fee – PHP60.00 per unit		



	2. Certificate on Safety and Roadworthiness – PHP30.00 per unit 3. City Plate – PHP200.00 per unit		
Approval of Mayor's Permit	None	30 minutes	<i>City Mayor</i> City Mayor's Office
Release of the Mayor's Permit and City Sticker	None	10 minutes	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
		3 hours and 10 minutes	Ŭ

## 2) Submission of application for Renewal of Franchise and application for renewal of franchise

Office or Division:	Office of the Sangguniang Panlungsod – Franchising Unit			
Classification:	Simple			
Type of	G2C – Government	to Citizen		
Transaction:				
Who may avail:	Operators / Drivers of	of tricycles, taxicles and pedicab		
CHECKLIST OF I	REQUIREMENTS	WHERE TO SECURE		
Duly notarized applic	ation for renewal of	Sangguniang Panlungsod		
Franchise				
Certificate of Franchi	se	Sangguniang Panlungsod		
Mayor's Permit of the Previous Year		Sangguniang Panlungsod		
Official Receipt (OR) and Certificate of		Land Transportation Office		
Registration (CR) in the case of tricycle-				
for-hire and taxicle for hire				
Insurance coverage of the unit		Preferred Insurance Agency / Office		
Roadworthiness / inspection report		Sangguniang Panlungsod		
Latest Cedula		City Treasurer's Office / Barangay		
Barangay Clearance		Barangay		
Police Clearance		Philippine National Police		
Prosecutor's Clearance		City Prosecutor's Office		
Inspection Report		Sangguniang Panlungsod		



Pictures of Unit (front	back and sides)			CIAC
White folder (long)				
Additional requireme	nts for renewal and			
transfer of franchise:				
	liate family – proof of			
	pirth or marriage			
certificate)	juli el manage			
,	ndary hulog – copy of			
•	og agreement; duly			
	lication for transfer			
	n the part of the			
transferee	•			
	AGENCY	FEES TO	PROCESSING	PERSON
CLIENT STEPS	ACTIONS	<b>BE PAID</b>	TIME	RESPONSIBLE
1. Submit	1. Check the	None	10 minutes	Senior
application	submitted			Transportation
together with the	documents			Regulation
complete	together with			Officer II
requirements	the attached			Office of the
(two (2) months	requirements.			Sangguniang
before the	•			Panlungsod
expiration of the				J. J
franchise				
a. renewal of				
franchise				
b. renewal and				
transfer of				
franchise				
- within				
immediate				
family				
Through				
boundary				
hulog				
agreement				
	2. Verify / evaluate	None	30 minutes	Senior
	submitted			Transportation
	application			Regulation
				Officer II
				Office of the
				Sangguniang
				Panlungsod
	3. Inspect Unit for	None	1 hour	Senior
	Roadworthiness			Transportation
	(If unit is found			Regulation
	to be defective,			Officer II
	not roadworthy			Authorized
	or did not			Inspector
	comply with			
	comply with			



	<b>a</b>			CIAL
	Ordinance No. 0005-2012, as amended, the application will be held in abeyance until correction of defects.			Office of the Sangguniang Panlungsod
Attend seminar conducted every Tuesday, 2:30 P.M. at the SP Session Hall <i>Note: Temporarily</i> <i>suspended due</i> <i>to the</i> <i>pandemic.</i>	Conduct seminar	None	2 hours	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
	Transmittal of the application to the Office of the Vice-Mayor for inclusion in the regular session of SP Legazpi	None	30 minutes	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
	Committee review action	None	30 minutes	Committee on Public Utilities / Transportation Regulation Officer II Sangguniang Panlungsod
	Passage of a resolution approving the application	None		Sanggunian Members Sangguniang Panlungsod
	Preparation of the certificate of franchise upon receipt of the approved Resolution to be signed by the Vice-Mayor	None		Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
Pay the required fees at the City Treasurer's Office by showing the order of	Upon follow-up, assessment of fees	Tricycle for-hire Renewal of franchise 1. Operator's	1 hour	<i>Cashier</i> City Treasurer's Office
	1	Operator 5		



					CIAL
payment. "Make			Permit –		
sure to secure			PHP300.00		
Official Receipt			(1-3 units)		
that will be					
			Renewal		
issued upon					
payment.			and		
			transfer of		
			franchise		
			1.		
			Operator's		
			Permit –		
			PHP300.00		
			(1-3 units)		
			2. Transfer		
			z. mansier		
			-		
			PHP150.00		
			per unit		
			Pedicab-		
			for-hire		
			1.		
			Operator's		
			permit –		
			PHP150.00		
			(1-3 units)		
			· · · ·		
			Renewal		
			and		
			transfer of		
			franchise:		
			1.		
			Operator's		
			Permit –		
			PHP150.00		
			(1-3 units(		
			2. Transfer		
			-		
			PHP100.00		
			per unit		
	Dalaaa			00	Conten
		of	None	20 minutes	Senior
	Certificate	of			Transportation
	Franchise				Regulation
	1 101101130				
					Officer II
					Office of the
					Sangguniang
					Panlungsod
	Tota	al:		6 hours	
L			1 I		<u> </u>



# 3) Submission of application for Change of Certificate of Franchise and Order for Dropping and Substitution of Motor Unit

Office or Division:	Office of the Sangguniang Panlungsod – Franchising Unit				
Classification:	Simple				
Type of	G2C – Government to Citizen				
Transaction:					
Who may avail:	Operators / Drivers				
CHECKLIST OF F		WHERE TO SECURE			
Certificate of Franchis		Sangguniang Panlungsod			
Official Receipt (OR)		Land Transp	ortation Office		
Registration (CR) of c					
sales invoice of the n	,				
of tricycle-for-hire and					
Roadworthiness / ins		Sangguniang	g Panlungsod		
Picture of Unit (front,	,				
Photocopy of Driver's					
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON	
Outrait and in a first	ACTIONS	BE PAID	TIME	RESPONSIBLE	
Submit application	Check the	None	10 minutes	Senior	
together with the complete	submitted documents			Transportation Regulation	
requirements	together with the			Officer II	
requirements	attached			Office of the	
	requirements.			Sangguniang	
	roquiomonto.			Panlungsod	
	Verify / evaluate	None	30 minutes	good	
	submitted				
	application				
	Inspect Unit for	None	1 hour	Authorized	
	Roadworthiness (If			Inspector	
	unit is found to be			Office of the	
	defective, not			Sangguniang	
	roadworthy or did			Panlungsod	
	not comply with				
	Ordinance No.				
	0005-2012, as				
	amended, the				
	application will be				



				CIAL
	held in abeyance until correction of defects.			
	Re-evaluation of application	None	30 minutes	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
Pay the required fees at the City Treasurer's Office by showing the order of payment. "Make sure to secure Official Receipt that will be issued upon payment.	Upon follow-up, assessment of fees	Tricycle for- hire Renewal of franchise: 1. Change of Certificate– PHP150.00 / units 2. Order for Dropping and Substitution of Unit – PHP 150.00 per unit Pedicab- for-hire 1. Change of Certificate – PHP150.00 / units 2. Order for dropping and substitution of unit PHP100.00 per unit	1 hour	Cashier City Treasurer's Office
	Release of the Certificate of Franchise and Order for Dropping and Substitution of Motor Unit.	None	30 minutes	Transportation Regulation Officer II Office of the Sangguniang Panlungsod



Total:	3 hours and	
	40 Minutes	

## 4) Application for ID for Drivers

, , ,				n ai Llucit
Office or Division:	Office of the Sangguniang Panlungsod – Franchising Unit			
Classification:	Simple			
Type of	G2C – Government	to Citizen		
Transaction:				
Who may avail:	Operators / Drivers of	of tricycles, ta		
CHECKLIST OF R			WHERE TO SEC	URE
One (1) piece 2x2 pict	ure			
Filled up registration				
Photocopy of Franchis	e			
Driver's License				
				DEDOON
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit filled up	Check the	None	10 minutes	Senior
registration form	submitted form			Transportation
5	together with the			Regulation
	attached			Officer II
	requirements.			Office of the
				Sangguniang
				Panlungsod
	Attendance by the	None	2 hours	Senior
	applicant to the			Transportation
	seminar conducted			Regulation
	every Tuesday,			Officer II
	2:30 p.m. at the SP			Office of the
	Session Hall			Sangguniang
				Panlungsod
	Preparation of the	None	30 minutes	Senior
	ID			Transportation
				Regulation Officer II
				Office of the
				Sangguniang
Pay the required fees	Linon follow up		10 minutos	Panlungsod Cashier
Pay the required fees at the City	Upon follow up, assessment of fees	PHP50.00	10 minutes	Cashier City Treasurer's
Treasurer's Office				Office
by showing the				Child
order of payment.				
"Make sure to				
secure Official				
Receipt that will be				



issued payment.	upon				
		Release of the ID	None	20 minutes	Senior Transportation Regulation Officer II Office of the Sangguniang Panlungsod
		Total:	PHP 50.00	3 hours and 10 minutes	

FEEDBACK AND	COMPLAINTS MECHANISM
How to send feedback	Answer the client feedback form and drop it at the designated drop box at the Public Assistance and Complaints Desk of the office. Contact No. 742-6136 or Email at splegazpi2016@gmail.com
How feedbacks are processed	<ul> <li>Every Friday, the Administrative Officer opens the drop box and complies and records all feedback submitted.</li> <li>Feedback requiring answers are forwarded to the Vice-Mayor.</li> <li>The answer of the Office is then relayed to the citizen.</li> <li>For inquiries and follow-ups, clients may contact the following telephone number: 742-6136</li> </ul>
How to file a complaint	Answer the client complaint form and drop it at the designated drop box at the Public



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lients may mber: 742-
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FEEDBACK AND C	OMPLAINTS MECHANISM
How to send feedback?	Answer the Client Feedback Form and drop it at the Feedbacks Drop Box located at the Public Assistance and Complaints Desk (PACD).
How feedbacks are processed?	Every Friday, the Officer monitoring the PACD opens the drop box, complies and records all feedback submitted. Feedback requiring answers are forwarded to
	the relevant offices and they are required to answer within three (3) days of the receipt of the feedback.
	The answers are then relayed to the citizens.
	For inquiries and follow-ups, clients may contact the telephone number: 480-0139.
How to file a complaint?	Answer the Client Complaint Form and drop it at the Complaints Drop Box located at the Public Assistance and Complaints Desk (PACD).
	Complaints can also be filed via telephone. Make sure to provide the following information: - Name of person being complained - Incident - Evidence
	For inquiries and follow-ups, clients may contact the telephone number: 480-0139.
How complaints are processed	The Officer monitoring the PACD opens the drop box on a daily basis and evaluates each complaint.
	Upon evaluation, the officer shall start the investigation and forward the complaint to the relevant office for their explanation.

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	CONTRACTOR OF THE SECOND
	The officer will prepare a report after the investigation and shall submit to the chief of office for appropriate action.
	The officer will give the feedback to the client.
	For inquiries and follow-ups, clients may contact the telephone number: 431-3454.
Contact Information of the City Government of Legazpi	Hon. Carmen Geraldine B. Rosal City Mayor
	Email: <u>carmengeraldinerosal@yahoo.com</u> Mobile No.: 0953-306-7106
	<b>Mr. Carlos A. Ante</b> City Administrator
	Email: chitoante@yahoo.com Mobile No.: 0919-364-8292
Contact Information of CCB, PCC, ARTA	ARTA: <u>complaints@arta.gov.ph</u> 1-ARTA (2782) PCC: 8888 CCB:0908-881-6565 (SMS)



## List of Offices

OFFICE	ADDRESS	CHIEF OF OFFICE /CONTACT INFORMATION
		Hon. Carmen Geraldine B. Rosal
OFFICE OF THE CITY MAYOR (CMO)		City Mayor
		Mr. Santiago E. Baltazar
		Executive Assistant IV
		(09533067106)
		Ms. Alma P. Salazar
		Chief of Staff
		Mr. Perfecto R. Ofrasio
		Public Information Officer
		(09778038177)
	Motorpool, Airport Road,	Engr. Miladee N. Azur
CITY DISASTER RISK	Legazpi City	City Government Department Head I
REDUCTION & MANAGEMENT OFFICE		(052) 431-0330
		09209528188
		Legazpi.cdrrmd@gmail.com
ECONOMIC & INVESTMENT	2/f City Hall Compound,	Ms. Ma. Theresa D. Nuñez
PROMOTIONS DIVISION	Rizal St., Legazpi City	Supervising Administrative Officer
		(052) 742-3990
		Mr. Ralph Vincent L. Lasin
ECONOMIC ENTERPRISE & MANAGEMENT DIVISION (EEMD) ALBAY MARKET	Albay Public Market, Legazpi City	Market Supervisor IV Officer-In-Charge



		ICIAL 3
		09177930043
		Mr. Ronald H. Pasano
ECONOMIC ENTERPRISE & MANAGEMENT DIVISION		Licensing Officer IV
(EEMD) LEGAZPI MARKET	Legazpi Public Market,	Officer-In-Charge
	Legazpi City	09192729466
INFORMATION	3/F City Hall	Mr. Guillermo B. Yuson, Jr.
TECHNOLOGY DIVISION	Compound, Rizal St.,	Information Technology Officer II
	Legazpi City	09274965288
		Ms. Asuncion C. Viñas
BUSINESS PERMITS &	BPLO Building, City	City Government Department Head I
LICENSING OFFICE	Hall Compound, Rizal St., Legazpi City	09158727722
OFFICE OF THE		Ms. Maria Leticia A. Buenaflor-Bello
SANGGUNIANG PANLUNGSOD- SECRETARIAT	2/F, SP Bldg., City Hall Compound, Rizal St., Legazpi City	Secretary to the Sanggunian
	Ground Floor, City Hall	Ms. Gloria E. Aringo
CITY ACCOUNTANT'S	Annex Bldg., City Hall Compound, Rizal St.,	City Government Department Head I
OFFICE	Legazpi City	(052) 742-3700
		gloria_aringo@yahoo.com
	2/F, City Hall Bldg., Rizal	Carlos A. Ante
CITY ADMINISTRATOR'S OFFICE	St., Legazpi City	City Government Department Head
		09335101953/ 09051147295
		chitoante@yahoo.com
		Ms. Sheila R. Nas



CITY AGRICULTURE'S OFFICE	Lakandula Dr., Brgy.	City Government Department Head I
	Gogon, Legazpi City	(052) 742-1739
		<u>wjjk41@yahoo.com</u>
	Ground Floor, City Hall	Engr. Eduardo A. Luna, Jr.
CITY ASSESSOR'S OFFICE	Annex Bldg., City Hall Compound, Rizal St.,	City Government Department Head I
	Legazpi City	(052) 742-6882
		legazpi.assessorsoffice@gmail.com
	2/F, City Hall Bldg., Rizal	Mr. Jeffrey P. Navarro
CITY BUDGET OFFICE	St., Legazpi City	City Government Department Head I
		(052) 820-3048
		cbo_leg@yahoo.com
		PRISCILLA L. GALICIA
CITY CIVIL REGISTRAR'S	Ground Floor, City Hall Bldg., Rizal St., Legazpi City	OIC- OCCR
OFFICE		0927-646-3610
		occrlegazpicity@gmail.com
		Ms. Gina Marie A. Belchez
CITY COOPERATIVE	3/F, City Hall Bldg., Rizal	OIC Designate
DEVELOPMENT OFFICE	St., Legazpi City	09103339650/ 09922213639
		gmbelchez@gmail.com
		Engr. Clemente A. Ibo
CITY ENGINEER'S OFFICE	Legazpi Blvd., Dap-Dap, Legazpi City	City Government Department Head I/ City Engineer
		09989830073
	City Hall Compound, Rizal St., Legazpi City	Dr. Fulbert Alec R. Gillego



		CIAL ST
CITY HEALTH OFFICE		City Health Officer II
		09771833638
		CHOLegazpi@gmail.com
	2/ City Hall Annex Bldg.,	Atty. Marietta B. Cledera
CITY LEGAL OFFICE	City Hall Compound,	City Government Department Head I
	Rizal St., Legazpi City	09568628647/ 09558040548
		legazpicitylegaloffice@gmail.com
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MUSEO DE LEGAZPI	Gregorian Mall, Rizal St.,	Mr. Darlito A. Perez, Jr.
	Legazpi City	Museum Curator Designate
		museodelegazpi@yahoo.com
		Ms. Jocelyn M. Codorniz
CITY PLANNING & DEVELOPMENT OFFICE	2/F, City Hall Bldg., Rizal St., Legazpi City	Officer-In-Charge
		(052) 742-0821
		Ms. Maria Marlene G. Manaya
CITY SOCIAL WELFARE &	Lakandula Dr., Brgy. Gogon, Legazpi City	City Government Department Head I
DEVELOPMENT OFFICE		09392820158
		<u>cswdolegazpi@yahoo.com</u>
		Ms. Carlita P. De Guzman
CITY TREASURER'S OFFICE	Ground Floor, SP Bldg., City Hall Compound, Rizal St., Legazpi City	City Government Department Head I
		(052) 201-94-87
		ctoleg@yahoo.com
	Ground Floor, City Hall Annex Bldg., City Hall	Dr. Emmanuel V. Estipona
CITY VETERINARY OFFICE		City Government Department Head I



		CIAL 9
	Compound, Rizal St., Legazpi City	09615453386
GENERAL SERVICES	Ground Floor, City Hall	Ms. Ma. Chona A. Riocasa
OFFICE (GSO)	Bldg., Rizal St., Legazpi City	City Government Department Head I
		lgu.legazpi.gso.786@gmail.com
		Ms. Joan E. Jamisal
INTERNAL AUDIT OFFICE	City Hall Compound,	City Government Department Head I
(IAS)	Rizal St., Legazpi City	(052) 742-3484
		ias.legazpi@gmail.com
	Zone 9, BrgyBitano, Legazpi City	Dr. Lady Ann T. Serrano
LEGAZPI CITY HOSPITAL		Officer-In-Charge
		09611787866
	Legazpi Blvd., Dap-Dap,	Mr. Linnu Benju Q. Calleja
OFFICE OF THE CITY	Legazpi City	Special Operations Officer III
ENVIRONMENT & NATURAL RESOURCES (OCENR)		Officer-In-Charge
		09465990597
PUBLIC EMPLOYMENT SERVICE OFFICE (PESO)	3 <sup>rd</sup> floor, SM City	Mr. Diosdado R. Rañeses
SERVICE OFFICE (FESO)	Legazpi, Legazpi City	City Government Department Head
		(052) 820-7671
		pesolegazpi@gmail.com
	Ground Floor, City Hall	Ms. Agapita S. Pacres
	Bldg., Rizal St., Legazpi City	Supervising Tourism Operations Officer
DIVISION		09322406439/ 09688561290



URBAN POOR AFFAIRS OFFICE (UPAO)	City Hall Annex Bldg., City Hall Compound, Rizal St., Legazpi City	Engr. Augusto B. Ante Special Operations Officer IV
		09335101953
CITY HUMAN RESOURCE MANAGEMENT OFFICE	3/F, City Hall Bldg., Rizal St., Legazpi City	Mr. Darlito A. Perez, Jr.
		City Government Department Head I
		(052) 431 3454
		chrmo.legazpicity@gmail.com
OFFICE OF THE VICE MAYOR (VMO)		Hon. Oscar Robert H. Cristobal
	2/F, SP Bldg., City Hall Compound, Rizal St., Legazpi City	Vice Mayor
		CP Number: 0939-923-6997
OFFICE OF THE SANGGUNIANG PANLUNGSOD		<ol> <li>Hon. Jose Gregorio R. Ojano</li> <li>Hon. Lourence M. Beltran</li> <li>Hon. Ismael B. Buban IV</li> <li>Hon. Glenn O. Casulla</li> <li>Hon. Luis Felipe L. Gutierrez</li> <li>Hon. Maria Paz Salud C. Imperial</li> <li>Hon. Alexander U. Jao</li> <li>Hon. Joseph Philip L. Lee</li> <li>Hon. Roberto Rafael N. Lucila II</li> <li>Hon. Renato A. Valladolid</li> <li>Hon. Milagros B. Bal Representative, Liga ng mga Barangay Ex-Officio Member</li> <li>Hon. John Nicolas C. Garbin Representative, SK Federation President, Legazpi City Chapter, Ex- Officio Member</li> </ol>

