

	APPLICATION FOR OPERATIONAL PERMIT	Reference:	DOH-RO1-W166 FORM2 - REV 0
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	WATER SUPPLY SYSTEM		Effectivity Date:

Name of Establishment:	Date of Application:
Location/Address of Establishment:	Contact Numbers:

Name of Owner/Representative:

Mailing Address (No. St., City/Municipality, Province)

Water Source Type: <input type="checkbox"/> Dug Well <input type="checkbox"/> Deep Well Others (Specify) <input type="checkbox"/> Spring <input type="checkbox"/> Shallow Well _____
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Type of Supply Distribution: <input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III _____ Others (Specify)

As provided in the Implementing Rules and Regulations and/or Supplemental Implementing Rules and Regulations of Chapter II - "Water supply" of the Code on Sanitation of the Philippines (P.D. 856) the following supporting documents should also be submitted together with this application. (Please see attached guidelines/specifications):

_____ **1. Report of Inspection of Construction/repair/alterd works and complete disinfection of the system (From the Local Health Office concerned)**

_____ **2. Latest result of water sampling and testing conducted by a DOH accredited water analysis laboratory for both raw and product water.**

☐ a. Bacteriological Examination ☐ b. Physical/Chemical Examination
 ☐ c. Biological Examination ☐ d. Radiological Examination (as requested)

_____ **3. Certificate of Potability of Drinking Water (Issued by the Local Health Office concerned)**

☐ a. Raw Water ☐ b. Product Water

_____ **4. Department of Trade and Industry (DTI) Certificate/SEC Registration.**

_____ **5. Pictures of Delivery Vehicles. (For Level I & II)**

Owner/Representative (Signature over Printed Name): Date:	Received by: (For DOH use only) Date:
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