



OFFICE OF THE ZONING ADMINISTRATOR

APPLICATION FORM FOR ZONING CERTIFICATION

1. Name of Applicant : _____
2. Address of Applicant : _____
3. Name of Lot Owner/s : _____
4. Location of Lot/s : _____
_____, City of San Pedro, Laguna
5. Total Area of Lot (in square meter) : _____
6. Right over Land :
 Owner Lessee Other (Specify): _____
7. Preferred mode of release of certification
 Pick-up : _____ by mail, addressed to: _____
 Applicant Authorized Representative _____
8. Purpose of Certification : _____
9. Signature of Applicant : _____
10. Signature of Owner : _____
11. Requirements :
 Signed & Sealed Lot Plan with Vicinity Map (Showing the property with landmarks)
 Transfer Certificate of Title / Right Over Land
 Tax Declaration / Latest Real Property Tax

Republic of the Philippines)
_____) S.S

SUBSCRIBED AND SWORN TO before me this _____ day of _____ 20__ in the City/Municipality of _____, Province of _____. Affiants exhibit to me his/her Identification Card No. _____ issued at _____ on _____.

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

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