



REPUBLIC OF THE PHILIPPINES

METROPOLITAN NAGA WATER DISTRICT

40 J. Miranda Avenue, Naga City

473-8438/ 0919-6486369/ 0927-4635596 - Customer Services Division

473-2040/ 0919-6486365/ 0927-4631859 - Water Distribution & Restoration Division

**ADMINISTRATION AND FINANCE GROUP
COMMERCIAL SERVICES DEPARTMENT
CUSTOMER SERVICES DIVISION**

NEW WATER SERVICE CONNECTION APPLICATION

Please complete all sections of this application

AIO NO.

APPLICANT'S NAME [Last Name, Given Name, Name Extension, Middle Name/ Name of Institution]		GENDER	DATE OF BIRTH
SPOUSE'S NAME (If married)		NUMBER OF OCCUPANT/S	CONTACT NO.
		Female Male	E-MAIL ADDRESS

I HEREBY APPLY FOR WATER SERVICE CONNECTION LOCATED AT

[Room/Unit No. & Building Name]	[House/Lot & Block No.]	[Street Name]	[Subdivision]
[Barangay/District/Locality]	[City/Municipality]	[Province]	[Zip Code]

SKETCH OF SERVICE CONNECTION LOCATION

APPLICANT	LOT OWNER	HOUSE/BUILDING OWNER
Signature over Printed Name	Signature over Printed Name	Signature over Printed Name

Please do not write below this line [to be filled-up by Customer Services Division personnel]

TYPE OF INSTALLATION	CLASSIFICATION OF CONNECTION	
<input type="checkbox"/> TAPPING <input type="checkbox"/> SUB-CONNECTION ACCOUNT NUMBER _____	<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> PUBLIC FAUCET <input type="checkbox"/> OTHERS NATURE OF BUSINESS _____	<input type="checkbox"/> GOVERNMENT <input type="checkbox"/> COMMERCIAL/ INDUSTRIAL FULL A B C <input type="checkbox"/> 200% <input type="checkbox"/> 175% <input type="checkbox"/> 150% <input type="checkbox"/> 125%

CHECKLIST OF REQUIREMENTS	ANY OF THE FOLLOWING	
<input type="checkbox"/> Photocopy of any valid ID w/ picture of the applicant or his/her authorized representative with three specimen signatures. <input type="checkbox"/> Photocopy of any valid ID w/ picture of the lot owner or his/her authorized representative with three specimen signatures. <input type="checkbox"/> SPECIAL POWER OF ATTORNEY (SPA), in case of absence of the principal (Notarized) <input type="checkbox"/> CERTIFICATE of Birth, Death, Marriage , Extra-Judicial Settlement, Last Will & Testament, Deed of Assignment, Acknowledgement Receipt and Secretaries Certificate to determine authority of signatories. Name of Representative: _____	A. PROOF OF OWNERSHIP (PHOTOCOPY) <input type="checkbox"/> ORIGINAL CERTIFICATE OF TITLE (OCT) <input type="checkbox"/> TRANSFER CERTIFICATE OF TITLE (TCT) <input type="checkbox"/> CERTIFICATE OF AWARD for Urban Poor Development Program, Project/Relocation Sites <input type="checkbox"/> CLOA (Certificate of Land Ownership Award) under Comprehensive Agrarian Reform Program (CARP) B. OTHER PROOF OF OWNERSHIP (PHOTO COPY) <input type="checkbox"/> TAX DECLARATION (TD), in the name of the applicant - current year <input type="checkbox"/> DEED OF SALE with OCT, TCT or TD in the name of the previous owner <input type="checkbox"/> CONTRACT TO SELL with OCT, TCT or TD in the name of the previous owner <input type="checkbox"/> DEED OF DONATION with OCT, TCT or TD in the name of the donor	C. WITH NO PROOF OF OWNERSHIP (ORIGINAL COPY) <input type="checkbox"/> AFFIDAVIT OF UNDERTAKING (Notarized) <input type="checkbox"/> BARANGAY CERTIFICATION (Signed & Sealed) <input type="checkbox"/> FORECLOSED PROPERTY CERTIFICATION from Bank, SSS, GSIS, PAG-IBIG and others <input type="checkbox"/> CERTIFICATION for LGU-Assisted Applicants GUARRANTY DEPOSIT No. of occupants _____ Cu m. X 6 Estimated usage (in cu.m) _____ Equivalent Amount P _____ No. of months X 3 Required Amount P _____

REMARKS (if any)	Name and Signature of Applicant/ Representative - Date/Time Filed
	Name and Signature of Frontline Personnel - Date/Time Received

PROCESSED BY	RECOMMENDING APPROVAL	APPROVED
MARIA JESUSA L. NIEVES CUSTOMER SERVICE ASSISTANT D	TEEJAY ALTAIR A. TORMES UTILITIES/CUSTOMER SERVICE ASSISTANT B	RICARDO B. FELIX III DIVISION MANAGER A
INSPECTED BY:		
Date and Time:		

INSPECTION & COST ESTIMATE REPORT

PIPELINE LAY-OUT PLAN

SIZE OF WATER METER	TYPE OF PERMIT	TYPE & SIZE OF TAPPING POINT
<input type="checkbox"/> 15mm Ø (1/2") <input type="checkbox"/> 50mm Ø (2") <input type="checkbox"/> 20mm Ø (3/4") <input type="checkbox"/> 100mm Ø (4") <input type="checkbox"/> 25mm Ø (1") OTHERS _____	<input type="checkbox"/> CEO <input type="checkbox"/> PNR <input type="checkbox"/> MEO <input type="checkbox"/> NONE <input type="checkbox"/> DPWH OTHERS _____	<input type="checkbox"/> uPVC PIPE <input type="checkbox"/> G.I. PIPE <input type="checkbox"/> CCSP <input type="checkbox"/> OTHERS SIZE: _____

SUMMARY OF CHARGES / FEES								
Materials	Size	Qty	Unit Cost (P)	Amount (P)	Labor	Qty	Unit Cost (P)	Amount (P)
Saddle Clamp					Concrete Cutting			
Corporation Cock					Concrete Breaking			
Replacement Pc.					Boring			
PE Pipe					Installation fee			
G.I. Elbow Red. x 90°					Concrete Restoration			
GI Pipe					Service Connection			
G.I. Elbow x 90°					Sub Connection			
G.I. Nipple					Tapping			
Ball Valve w/ Lock Wing					Guaranty Deposit			
Tail Piece								
Teflon Tape								
G.I. Check Valve								
Sub-total					Sub-total			
TOTAL AMOUNT								P

INSPECTED / ESTIMATED BY	DATE / TIME INSPECTED
PROCESSED BY	DATE / TIME PROCESSED
WILSON S. IMPERIO Utilities Customer Service Assistant-E	
CHECKED / REVIEWED	APPROVED
NOEL A. MARTINEZ JR. Principal Engineer-A / OIC Division Manager-A	GILBERT V. ELEAZAR Department Manager-A

GUIDES REGARDING WATER BILL

- WATER BILLING** - You will regularly receive a monthly Notice of Water Billing indicating your Water consumption immediately upon reading of the water meter.
- LIABILITY CHARGE** - A ten percent (10%) liability charge is imposed if your water bill is not paid on the due date indicated in your notice of water billing.
- GRACE PERIOD** - To avoid paying the ten percent (10%) liability charge, a ten (10) days grace period is provided to enable you to settle your water bill, which shall start from receipt of your Notice of Water Billing.
- DUE DATE** - The notice of water billing served to you will be due for payment ten (10) days from its meter reading date. If the due date falls in a Saturday, Sunday or holiday, the water bill will be due for payment on the following working day.
- DISCONNECTION DATE** - Your water service connection will be disconnected if your water bill is not paid five (5) days after its due date.
- 48-HOURS RECONNECTION** - No reconnection fee shall be imposed if overdue water bill is settled within forty-eight (48) hours from disconnection date.

ILLEGAL WATER SERVICE CONNECTION

- BY PASS TAPPING** o dae awtorisado o ilegal na pagkabit sa arin man na linya nin tubig can MNWD na naka-instalar bago o antes can water meter nin sarong konsesyonaryo.
- ILLEGAL TAPPING** o dae awtorisado o ilegal na pagkabit sa arin man na linya nin tubig asin facilidades can MNWD.
- METER TAMPERING** o dae awtorisado o ilegal na pagmanipular o pag-retoke can arin man na parte nin sarong water meter sa intension na hiroon, paloyahon o pondohon an normal na dalagan can mecanismo caini.
- ILLEGAL REOPENING** o dae awtorisado o ilegal na pag-activar nin sarong pigputol nang linya nin connection o kaya abandonadong linya nin tubig sa intension na maka-sakdo dgdi.
- ILLEGAL SUBCONNECTION** o dae awtorisadong pagkabit sa linya nin sarong konsesyonaryo pagkalihis sa water meter kaini sa intension na makakoa nin tubig sa ilegal na paagui.
- ILLEGAL USE/ VENDING** (a) dae awtorisadong pagsakdo nin tubig gikan sa linya nin sarong konsesyonaryo pagkalihis can sayang water meter para sa komersyal/ industrial na gamit; (b) pagsakdo sa arin man na pampublicong gripo para sa komersyal/ industrial na gamit.

A corresponding fine / penalty shall be imposed to offenders for each count of violation.

REPUBLIC OF THE PHILIPPINES)
City/Municipality of _____) S.S.

AFFIDAVIT OF UNDERTAKING

I, _____, Filipino, of legal age, single/married with residence address at _____, after having been subscribed to an oath, depose and state that:

1. I am an applicant for New Water Service Connection with the Metropolitan Naga Water District (MNWD);
2. I am a tenant of the property where such service connection is to be installed;
3. I am executing this affidavit of undertaking accepting the following responsibilities of my own free will and volition pursuant to the existing rules, regulations and policies of the MNWD in the absence of proof of ownership or title to the property where a service connection is to be installed;
 - Assumption of sole responsibility of paying the water bills incurred, and/or face court action that may later be filed by the lot owner or the MNWD;
 - Raise no objection in the disconnection of the service by the MNWD, in case of request of the legitimate lot owner upon presentation of ownership documents;
4. I am willing to pay the required Guaranty Deposit in full before installation of the water service (per Board Resolution No. 48, S.2019);
5. This document shall form part of the MNWD Water Service Connection Application; and
6. I shall conform to the Revised MNWD Utility Rules and Regulations and Implementing Guidelines of the Metropolitan Naga Water District now existing or which may thereafter be issued or promulgated.

IN WITNESS HEREOF, I hereby set my hand this ____ day of _____, 20____, in _____, Camarines Sur.

Affiant

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20____.
Affiant exhibiting to me his evidence of identity Valid ID No. _____.

NOTARY PUBLIC

Doc. No _____
Page No _____
Book No _____
Series of 20_____