

	METROPOLITAN NAGA WATER DISTRICT		Document Code: CSDFO6	
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	NEW WATER SERVICE CONNECTION APPLICATION (NWSCA)		Effectivity Date:	March 2017
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Republic of the Philippines
METROPOLITAN NAGA WATER DISTRICT
 40 J. Miranda Avenue, Naga City

APPLICATION FOR NEW WATER SERVICE CONNECTION
 Date : _____ AIO No. 2017 - _____

Last Name	First Name	Middle Name
Applicants:		
Home Address:		
Spouse:		Contact No.:
I hereby apply for a water service connection located at _____		Type of Service Connection: <input type="checkbox"/> Tapping <input type="checkbox"/> Sub - Connection
_____	_____	_____
Signature of Applicant	Lot Owner's Signature over Printed Name	Bldg. Owner's Signature over Printed Name
Sketch of Service Connection Location:		

CUSTOMER SERVICES DIVISION Checklist of Requirements	CUSTOMER ACCOUNTS DIVISION Verification Report
<p><u>(PHOTOCOPY ONLY)</u></p> <p><input type="checkbox"/> 1. Any valid I.D. w/ picture of the Applicant or his/ her authorized representative and three specimen signatures.</p> <p><input type="checkbox"/> 2. Any valid I.D. w/ picture of the Lot Owner or his/ her authorized representative and three specimen signatures.</p> <p><input type="checkbox"/> 3. Any of the following Proof of Ownership; <input type="checkbox"/> Original Certificate of Title (OCT) <input type="checkbox"/> Transfer Certificate of Title (TCT) <input type="checkbox"/> Tax Declaration (TD), latest or current year <input type="checkbox"/> Deed of Sale w/ OCT, TCT or TD in the name of the previous owner <input type="checkbox"/> Contract to sell (for Subdivisions only) <input type="checkbox"/> Deed of Donation w/ OCT, TCT or TD in the name of the Donor <input type="checkbox"/> Original Certificate of Award for "Urban Poor" Project Sites <input type="checkbox"/> Others: (Pls. Specify) _____</p> <p>Checked by: _____</p>	<p>Account Number : _____</p> <p>Classification of Water Service Connection: <input type="checkbox"/> Residential No. of Occupants : _____ <input type="checkbox"/> Public Faucet No. Of Household to be served : _____ <input type="checkbox"/> Government <input type="checkbox"/> Commercial / Industrial Sub- Class <input type="checkbox"/> 175% <input type="checkbox"/> 150% <input type="checkbox"/> 125%</p> <p>Nature of Business: _____ _____ _____</p> <p>Remarks : _____ _____ _____</p> <p>Verified by: <div style="text-align: center;"> ALEX DS. MORALES Utilities/ Customer Service Officer A OIC, Investigation Section </div> <p>Approved : <div style="text-align: center;"> VIRGINIA I. NERO Division Manager A </div> </p></p>