



Republic of the Philippines  
**LOCAL  
 WATER  
 UTILITIES  
 ADMINISTRATION**

**APPLICATION  
 FOR  
 REGISTRATION OF RWSA**

PLEASE PRINT OR TYPE ANSWER

<p>Name of Applicant _____</p> <p>Barangay _____          Municipality _____</p> <p>Province _____</p> <p>Proposed Level of Water Service To be Undertaken</p> <p><input type="checkbox"/> Level II                      <input type="checkbox"/> Level III</p> <p>Documents Submitted                      No. of Copies</p> <p><input type="checkbox"/> Articles of Incorporation                      <input type="checkbox"/></p> <p><input type="checkbox"/> By-Laws                      <input type="checkbox"/></p> <p><input type="checkbox"/> Minutes of Meeting                      <input type="checkbox"/></p> <p><input type="checkbox"/> Minutes of 1<sup>st</sup> Board Meeting                      <input type="checkbox"/></p> <p><input type="checkbox"/> Approved Water Permit                      <input type="checkbox"/></p> <p><input type="checkbox"/> _____</p>	<p>General Information:</p> <p>Date of Organization _____</p> <p>Total No. of Members _____</p> <p>Potential No. of Members _____</p> <p>Membership Fee _____</p> <p>Is Electricity Available in the Community?</p> <p><input type="checkbox"/> Yes                      <input type="checkbox"/> No</p> <p>Is There an Existing Water in the Community?</p> <p>Yes                      No</p> <p>Name of Water District _____</p> <p>Source of Income</p> <p><input type="checkbox"/> Farming                      <input type="checkbox"/> Carpentry</p> <p><input type="checkbox"/> Fishing                      <input type="checkbox"/> Others _____</p>
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**Board of Directors**

Position	Name	Occupation	Age	Educational Attainment
Chairman				
Vice-Chairman				
Secretary				
Treasurer				
Director				

**Barangay Council**

I hereby certify that the information given above and the documents submitted are true and correct.

\_\_\_\_\_  
 Barangay Captain                      Date

**Water District**

I respectfully endorse this Application and documents herewith to LWUA for its appropriate action.

\_\_\_\_\_  
 General Manager                      Date

**FOR LWUA USE**

Received By:

Reviewed & Evaluated to Be in Conformance With Executive Order No. 577, as amended

\_\_\_\_\_  
 WD Advisor                      Date

\_\_\_\_\_  
 Manager, WDD Luzon                      Date

Recommending Approval:

\_\_\_\_\_  
 Senior Deputy Administrator

\_\_\_\_\_  
 Date

Approved:

\_\_\_\_\_  
 Administrator

\_\_\_\_\_  
 Date