



Republic of the Philippines  
**CITY OF SANTA ROSA**  
Province of Laguna  
**CITY ENGINEERING OFFICE**



Application No. \_\_\_\_\_

<b>APPLICATION FOR EXCAVATION PERMIT</b>	
1.0 Name of Owner / Applicant (Last, First, Middle)	1.1 Address of Applicant / Contact No.
2.0 Name of Company/Utility/Agency/Contractor	2.1 Address of Company/Utility/Agency/Contractor / Contact No.
3.0 Name of Authorized Representative	3.1 Address of Authorized Representative/ Contact No.
4.0 Name of Project	4.1 Specific Location of the Project
5.0 Project Type (Private/Government)	6.0 Duration of Work/ No. of Calendar Days
7.0 Project Nature/ Scope of Work <input type="checkbox"/> House Connection <input type="checkbox"/> Trench <input type="checkbox"/> Pipe Laying <input type="checkbox"/> Pole Erection <input type="checkbox"/> Aerial <input type="checkbox"/> Repair & Maintenance <input type="checkbox"/> Others _____	
8.0 Requirements <input type="checkbox"/> Fully accomplished Application Form for Excavation Permit <input type="checkbox"/> Letter of Intent/Authority of Signing Official of the Applicant (issued by the President of the Company or Board Resolution) <input type="checkbox"/> Sketch Plan/Map showing the location of the Project, type of underground or aerial facility/structure to be installed and other related appurtenances. <input type="checkbox"/> Timetable of the proposed work in the form of Bar/Gantt Chart or PERT-CPM Chart showing duration of excavation and restoration. <input type="checkbox"/> Typical Section & Specifications, type and total area of pavement to be excavated, type and extent of work to be undertaken and name/ address of contractor (if by Contract) <input type="checkbox"/> Program of works with corresponding detailed estimates for the cost of materials, cost of excavations, including the restoration cost. Bill of Materials/ Bill of Quantities <input type="checkbox"/> Traffic Clearance or receiving copy of the request letter for Traffic Clearance from the City Traffic Management and Enforcement Office <input type="checkbox"/> Health Clearance (Negative Test Result for Covid-19) <input type="checkbox"/> DPWH Region IV-A Clearance if project is located at National Road <input type="checkbox"/> Contractor's Tax (if by Contract)/ Business Permit if business is within Santa Rosa (photocopy only) <input type="checkbox"/> Photocopy of at least Third Party (TPL) Insurance. <input type="checkbox"/> Certification signed by the agency head that the project will be undertaken by administration (for government entity or instrumentality only) <input type="checkbox"/> Affidavit of Undertaking	
9.0 Signature of Applicant / Authorized Representative	10.0 Date Submitted (Complete Requirements):

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*DO NOT FILLED OUT THIS PORTION (FOR CITY ENGINEERING OFFICE PERSONNEL ONLY).*

11.0 Reviewed by:  _____  Date Filed: _____	12.0 Remarks
13.0 Evaluated by:  _____  Date: _____	14.0 Remarks  Date of Inspection: