



## APPLICATION FOR ZONE OF SIGNIFICANT PORT INTEREST (ZSPI)

### APPLICANT PROFILE

Name of Company:		Tracking No.:	
Name of Applicant/Authorized Representative:			
Address 1 (Office Address)		Telephone Number 1:	
Address 2 (Billing Address)		Telephone Number 1:	
E-mail Address:		Fax Number	
Tax Identification Number (TIN)		SEC Reg. No.:	DTI Reg. No.:
		CDA Reg. No.:	
Business Type: <input type="checkbox"/> Single Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Joint Venture <input type="checkbox"/> Cooperative			
Nature of Business:			

### ZSPI PROFILE

<input type="checkbox"/> Existing <input type="checkbox"/> Revision/Amendment <input type="checkbox"/> New		
Port Facility/Structure/s to be put-up including its dimensions:		
Project Cost/Capital Investment:	Intended use/purpose:	
Location/Site of Private Port: Barangay _____ Municipality _____ Province _____		
Zone of Significant Port Interest (Port Control) – Area Size (in sq. m.)		

### DOCUMENTARY REQUIREMENTS

(Put (✓) if submitted, (x) if not available)

<i>NEW</i>	<i>Revision/Amendment</i>
<input type="checkbox"/> 1. Duly filled-out application form and Notarized Omnibus Undertaking	<input type="checkbox"/> 1. Duly filled-out application form and Notarized Omnibus Undertaking
<input type="checkbox"/> 2. Original Secretary's Certificate designating the authorized representative to transact business with the Authority	<input type="checkbox"/> 2. Original Secretary's Certificate designating the authorized representative to transact business with the Authority
<input type="checkbox"/> 3. Hydro-topographic survey	<input type="checkbox"/> 3. Revised Hydro-topographic survey, if any
<input type="checkbox"/> 4. ZSPI Plan	<input type="checkbox"/> 4. Revised ZSPI Plan considering the design parameters stipulated in <b>Section 2</b> of this Annex
	<input type="checkbox"/> 5. Certified True Copy of DTI/SEC/CDA Registration or JV Agreement, whichever is applicable (applicable for new private port applicants only).

### VALIDATION FOR PPA USE ONLY

<input type="checkbox"/> Filing Fee  <input type="checkbox"/> O.R. No. Date  Received by:  ESD/Authorized Personnel:  _____ Printed name & Signature	Remarks:  <input type="checkbox"/> Endorse to Head Office/CSD <input type="checkbox"/> Return to Applicant Reason/s: _____ _____  Noted by the Port Manager:  _____ Printed Name & Signature
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**OMNIBUS UNDERTAKING  
(SWORN AFFIDAVIT)**

REPUBLIC OF THE PHILIPPINES)  
CITY/MUNICIPALITY OF \_\_\_\_\_) S.S.

**A F F I D A V I T**

I, (Name of Applicant/Authorized Representative), of legal age, (Civil Status), (Position/Title), (Name of Company/Address), after having been duly sworn in accordance with law, do hereby depose and state that;

I hereby apply for the Authority's issuance of **Approved ZSPI Plan** of private port located at (Address of the Applied Private Port).

As port applicant/port owner/operator/duly authorized representative of the company, I have fully power and authority to do, execute and perform any and all acts necessary to represent it in seeking from PPA the corresponding **ZSPI Plan** being applied for.

I have complied and secured all the necessary government clearances/permits necessary to operate my business.

I hereby authorize your duly authorized official/employee to verify the statements/documents and information submitted herewith, to substantiate my eligibility as an applicant for a private port permit.

It is understood that I have complied with the requirements of other concerned government agencies prior to the construction of the private port and I am fully responsible and accountable in complying with the said requirements.

I hereby acknowledge that I have full knowledge of pertinent law, regulation covering private port construction.

I hereby acknowledge that I have fully read the information supplied in the application and any false or misleading information provided therein shall be a ground for the cancellation of the **Approved ZSPI Plan** issued, without prejudice to the filing of appropriate administrative, civil and criminal action against me and/or the company/entity I represent.

I hereby hold PPA free from all liens, encumbrances and liabilities resulting from non-compliance therewith.

I am executing this Omnibus Sworn Statement to attest to the veracity of the foregoing statements in support of the above-cited application.

**IN WITNESS WHEREOF**, I have hereunto set my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in the City of \_\_\_\_\_, Philippines.

\_\_\_\_\_  
Applicant/Authorized Representative

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in the City of \_\_\_\_\_ Philippines.

\_\_\_\_\_  
(Notary Public)

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_

