



APPLICATION FOR PERMIT TO OPERATE OF TURNED OVER PRIVATE PORTS

APPLICANT PROFILE

Name of Company:		Tracking No.: PTO-001-2021	
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:			

PRIVATE PORT PROFILE

Port Facility/Structure/s to be put-up including its dimensions:			
Estimated Cost of the Project:		Intended use/purpose:	
Location/Site of Private Port: Barangay _____ Municipality _____ Province _____			
Zone of Significant Port Interest	Area size (in sq.m.) (PortControl)	TCT No. and Owner (Back-Up Area)	Area Size (sq.m.)
Environmental Compliance Certificate (ECC) No.			

DOCUMENTARY REQUIREMENTS

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

Note: Documentary requirements shall be filed in three (3) clear legible copies including the original

- ☐ 1. Letter of Intent
- ☐ 2. Duly filled-out application form and Notarized Omnibus Undertaking
- ☐ 3. Original Secretary's Certificate designating the authorized representative of the company to transact business with the Authority
- ☐ 4. Certified True Copy of DTI/SEC/CDA Registration or JV Agreement, whichever is applicable
- ☐ 5. Certified True Copy of Turned-Over Documents and appropriate tenurial instruments and ECC, if applicable
- ☐ 6. Certification of Structural Soundness of port facilities certified by a Licensed Civil Engineer

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 **Permit to Operate (PTO) of Turned-over Private Ports** 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 **PTO** 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 **PTO** 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 _____