



PHILIPPINE  
PORTS  
AUTHORITY



**REQUEST FOR COPY OF RECORDS  
PPA-HEAD OFFICE**

Form No: PM-APC-PPA-CDI-FM-07

Revision No: 02

Date of Effectivity: July 10, 2019

Date of Request :		Request No.
Name of Requesting Entity		
Name of Representative		
Title/Type of Record		
Purpose		
<input type="checkbox"/> Photocopy Record <input type="checkbox"/> Soft Copy <input type="checkbox"/> Others, pls. specify		
 _____ (Signature Over Printed Name) Requesting Entity/Representative		 <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Reason for Disapproval _____ _____ Name & Signature of Port Manager or Duly Authorized Representative
<b>Instruction to OPR-Records</b>		<b>For Request/s of Archived Records</b>
<input type="checkbox"/> Release copy of requested record/s <input type="checkbox"/> Remarks _____ _____ _____		<input type="checkbox"/> Retrieve requested copy from storage area <input type="checkbox"/> Release copy of requested record/s _____ Name & Signature of PMO/HO Records Officer
<b>ACKNOWLEDGEMENT RECEIPT</b>		
Released By: _____ Name & Signature of Releasing Officer	Received By: _____ Name & Signature of Requesting Entity/Representative	
Date : _____	Date & Time : _____	