



**OFFICE OF THE ZONING ADMINISTRATOR**

**APPLICATION FORM FOR ZONING CERTIFICATION**

1. Name of Applicant : \_\_\_\_\_

2. Address of Applicant : \_\_\_\_\_

3. Name of Lot Owner(s) : \_\_\_\_\_

4. Location of Lot (s) : \_\_\_\_\_  
\_\_\_\_\_, City of San Pedro, Laguna

5. Total Area of Lot (in square meter) : \_\_\_\_\_

6. Right over Land :  
[ ] Owner [ ] Lessee [ ] Other (specify) : \_\_\_\_\_

7. Preferred mode of release of certification  
[ ] Pick-up : \_\_\_\_\_ [ ] by mail, addressed to : \_\_\_\_\_  
[ ] Applicant [ ] Authorized Representative \_\_\_\_\_

8. Purpose of Certification : \_\_\_\_\_

9. Signature of Applicant : \_\_\_\_\_

10. Signature of Owner: \_\_\_\_\_

11. Requirements

- [ ] Signed & sealed Lot Plan with Vicinity Map (showing the property with landmarks)
- [ ] Transfer Certificate of Title / Right Over Land / Tax Declaration / Real Property Tax

Republic of the Philippines )  
\_\_\_\_\_ ) S.S.

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ in  
the City/Municipality of \_\_\_\_\_, Province of \_\_\_\_\_  
Affiants exhibit to me his/her Identification Card No. \_\_\_\_\_ issued at  
\_\_\_\_\_ on \_\_\_\_\_.

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

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