

**NWRB-WUD-12-r2**

Republic of the Philippines <b>NATIONAL WATER RESOURCES BOARD</b> 8 <sup>th</sup> Floor NIA Building, EDSA, Quezon City Telefax (02) 8920-2714				<b>APPLICATION FOR INCREASE OF WATER RATES</b>					
<i>Accomplish this form in six (6) copies. Attach separate sheet if more space is required.</i>				Water Utility (WU) Category <sup>1</sup>		Case Number			
Name of Applicant			Mailing Address			Email Address			
						Contact No.			
Citizenship			TIN			Year Operations Started			
Provisional Authority Required? <input type="radio"/> Yes <input type="radio"/> No				Filing Fee Amount		OR No.	Date Paid		
<b>Location of Service Area</b>									
Subdivision									
Barangay									
Municipality									
Province									
Type of Utility <input type="radio"/> Subdivision / Homeowners' Association <input type="radio"/> Rural Waterworks and Sanitation Association <input type="radio"/> Cooperative <input type="radio"/> Bulk Water Seller / Peddler <input type="radio"/> Others, specify:			Number of Connections With water meters _____ Without water meters _____ Meters tested? <input type="radio"/> Yes <input type="radio"/> No If tested, Tested by _____ Date tested _____			Kind of Water System <input type="radio"/> Draw and Fill <input type="radio"/> Float <input type="radio"/> Direct Pumping For Bulk Water Seller/Peddler, Average volume of water delivered per day (in cu. m.)			
<b>Water Permit Information</b>									
CWP/ Water Permit No.		Source		Latitude		Longitude		Barangay Location of Source	
				Deg. Min. Sec.		Deg. Min. Sec.			
<b>If water is bulk supplied, copy of agreement/contract/receipt</b>									
<i>See back page for pertinent requirements.</i>									
I hereby certify that the information given above and the documents submitted are true and correct to the best of my knowledge and belief.					Subscribed and sworn to before me on this date:				
_____ Signature over printer name of Water Utility Representative					_____ Notary Public / Administering Officer		_____ Date		
<b><sup>1</sup> How to Determine the Water Utility Category</b>									
<b>Category A</b>			<b>Category B</b>			<b>Category C</b>			
Water utilities operating for profit: 1. Privately-owned or privately run WUs; or 2. Government-owned and government-run WUs that opted to be classified or NWRB has classified as Category A; or 3. Community based WUs that: a) Have expanded/ are expanding outside original area of jurisdiction, or b) Opted to be classified or NWRB has classified as Category A			Government-owned or controlled, and government-run WUs that do not opt to be classified as Category "A" or NWRB has classified as Category B			Community based WUs that: 1) Are not operating for profit; 2) Have not expanded/ are not expanding outside their original area of jurisdiction; or 3) Do not opt to be classified as Category "A"/"B" or NWRB has classified as Category "A"			

**APPLICATION FOR  
INCREASE OF WATER RATES**

Name of Applicant		Water Utility Category	Case Number		
Requirements			Cat. A	Cat. B	Cat. C
1	Articles of Incorporation/Partnership or DTI/CDA Registration		<input type="checkbox"/>		<input type="checkbox"/>
2	Authority to sign and file the application ● Board Resolution for corporations and partnerships, or Board Secretary's Certificate ● For single proprietorship, signed by owner or Special Power of Attorney		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Copy of approved Conditional /Water Permit/s If water is bulk supplied, copy of agreement/contract/receipt		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Copy of latest Official Receipts of Annual Water Charge/s		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Copy of latest Official Receipts of Supervision and Regulation Fee		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Copy of recent (within 1 year) Certificate of Potability issued by the City/ Municipal Health Officer where the source is located, with results of bacteriological, physical and chemical impurity tests conducted by a Department of Health accredited laboratory		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Plan duly signed by a licensed Engineer ● Water distribution system ● Elevation and cross-sectional views of tank/reservoir ● Elevation and cross-sectional views of pump house, machinery and equipment for Category C, only sketch plan is required		<input type="checkbox"/>	<input type="checkbox"/>	
8	Copy of latest Annual Report		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Latest audited financial statements		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Simplified Financial Projection Model for Category C (hard/soft copy) with the following data: ● Revenue requirements for one year, composed of: ○ Operating expenses, with breakdown ○ Depreciation ○ Loan amortization due (interest and principal) per year ● Estimated total consumption for one year (cu.m.)				<input type="checkbox"/>
11	Business Plan containing: ● List of existing/required investments consistent with the 10-year business plan ● Proposed Tariff Schedule ● Levels of service (e.g. water quality, water pressure, non-revenue water, number of hours of water supply per day)		<input type="checkbox"/>	<input type="checkbox"/>	
12	Financial Projections Model for Category A/Category B (hard and soft copy)		<input type="checkbox"/>	<input type="checkbox"/>	