

Republic of the Philippines  
**NATIONAL WATER RESOURCES BOARD**  
 8th Floor, N.I.A. Buildin, E.D.S.A., Quezon City  
 Telefax No. 920-2654  
**MONITORING AND ENFORCEMENT DIVISION**

## Memorial Park Certification Request Form

Project Name	: _____	Area:	has. _____
Location	: _____		
Owner	: _____		
Mailing Address	: _____		
Tel No.	: _____	Fax No.:	_____ e-mail: _____
Developer	: _____		
Office Address	: _____		
Tel No.	: _____	Fax No.:	_____ e-mail: _____
Contact Person	: _____	Mobile No.:	_____ Tel. No.: _____
Name of Office/Agency requiring NWRB certification: _____			
Source of Water for the Construction, Operation and Maintenance of the Proposed Memorial Park:			
[ ] Groundwater [ ] Surfacewater [ ] Water District [ ] Mun./Brgy. Waterworks [ ] Others, pls. specify _____			
_____ <i>SIGNATURE</i>			
_____ <i>NAME OF AUTHORIZED REPRESENTATIVE</i>			
_____ <i>DATE</i>			

**REQUIREMENTS:**

- [ ] Project profile including the area (hectares), boundaries, type/number/area of lots, amenities, type of dev't, etc.
- [ ] Site Development Plan / Scheme
- [ ] Topographic Map (plot existing well/s or borehole/s, if any)
- [ ] Location Plan with Vicinity Map
- [ ] Result of actual water table depth measurement conducted by the **DPWH-District Eng'g Office**.  
*(Request/Endorsement letter to conduct actual measurement to be prepared by NWRB)*
- [ ] **If applicable**, Water Permit Application, if the source of water is to be developed/constructed by the applicant for the construction, operation and maintenance of the proposed memorial park

### ORDER OF PAYMENT

[ ] P 5,000 Certification for Memorial Park

\_\_\_\_\_ MED, Enforcement Section

**(TO BE FILLED UP BY THE CASHIER)**

Official Receipt No. : \_\_\_\_\_

Date Issued : \_\_\_\_\_

Cashier Section : \_\_\_\_\_