Republic of the Philippines
NATIONAL WATER RESOURCES BOARD
8th Floor, NIA Building, EDSA, Quezon City
Telefax : 920-27-14

APPLICATION FOR INCREASE OF RATES

CASE NO.

PLEASE ACCOMPLISH THIS FORM IN SIX (6) COPIES

NAME OF APPLICANT	MAILING ADDRESS CONTACT NO.	WATER PERMIT NO. SOURCE LOCATION
CITIZENSHIP	TIN	DATE OF OPERATION

SERVICE AREA	Existing CPC/N No., if for renewal	FILLING FEE
Subdivision : Barangay : Municipality :	Provisional Authority Required ☐ Yes ☐ No	a. Amount _____ b. O. R. No. _____ c. Date _____

TYPE OF UTILITY
- [ ] Subdivision / HOA
- [ ] Rural Water & Sanitation Association
- [ ] Cooperative
- [ ] Bulk Water Seller/Peddler
- [ ] Others _____ (specify)

NO. OF CONNECTIONS
a. with water meters _____
b. w/o water meters _____
c. meter tested _____
c.1 tested by _____
c.2 date tested _____
d. for bulk seller /peddler
Average volume of water delivered in cubic meters per day _____

KIND OF WATER SYSTEM
[ ] Draw & Fill [ ] Float [ ] Direct Pumping

LIST OF DOCUMENTARY REQUIREMENTS

NOTE: USE 5- YEAR TARIFF MODEL TO COMPLY ON FINANCIAL REQUIREMENTS

- ( ) Board resolution (for corporations and partnerships) or special power of attorney (for single proprietorships) authorizing the signatory to sign and file the application
- ( ) Copy of Approved Water Permit/s
- ( ) Copy of Official Receipt/s of Annual Water Charges & Supervision & Regulation Fee
- ( ) Copy of Latest Certificate of Potability issued by City/Municipal Health Officer where source is located with Results of Bacteriological, Physical & Chemical
- ( ) Copy of Latest Annual Report

- ( ) Latest Audited Financial Statements [1]
- ( ) Actual Balance Sheet for Water Operations [1]
- ( ) Actual Income Statement for Water Operations [1]
- ( ) List of Existing Assets in Service Subject to Return [1]
- Itemized Projected Financial Statements for Water Operations for 5 years
  - ( ) Income Statements
  - ( ) Funds Flow
  - ( ) Balance Sheet
  - ( ) Assumptions
- ( ) Comparative statements showing revenue based on the present authorized rates and on the proposed increased of rates
- ( ) Business Plan & Itemized List of Required Investments for the Next 5 yrs.
- ( ) Proposed Tariff Schedule
- ( ) Levels of service agreed with consumers commensurate with proposed rates
- ( ) Others

1 If applicant has another operations other than water supply

I HEREBY CERTIFY THAT THE INFORMATION GIVEN ABOVE AND THE DOCUMENTS SUBMITTED ARE TRUE AND CORRECT TO THE BEST OF KNOWLEDGE AND BELIEF

Signature of Water Utility Representative

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS DATE

Notary Public / Administering Officer