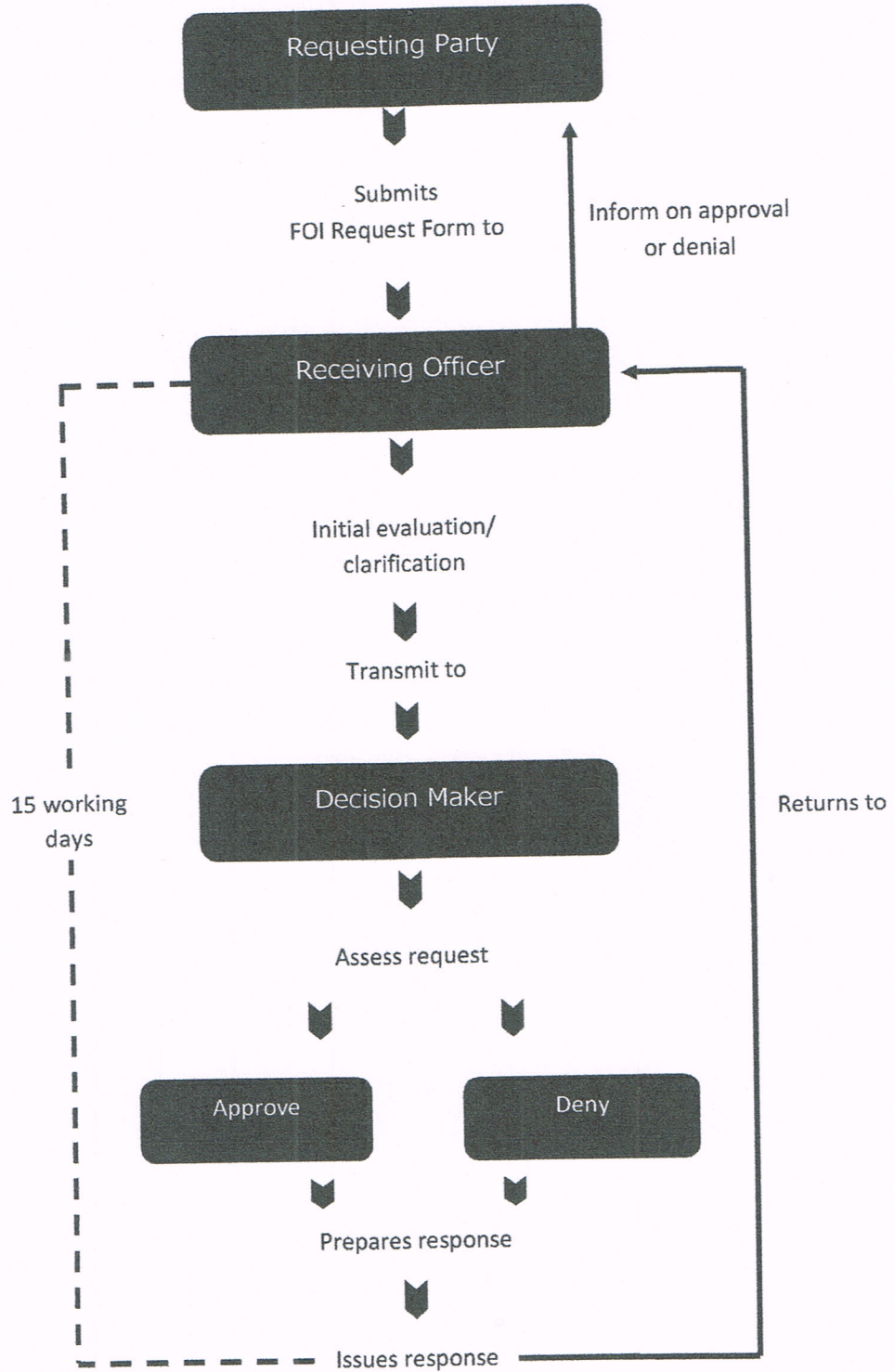


# CABAGAN WATER DISTRICT

## FOI Request Flow Chart



[Empty box for FOI Tracking Number]

**CABAGAN WATER DISTRICT**  
**FREEDOM OF INFORMATION REQUEST FORM**  
(Pursuant to Executive Order No. 2,s. 2016)  
(as of November 2016)

Please read the following information carefully before proceeding with your application. Use blue or black ink. Write neatly and in BLOCK letters. Improper or incorrectly-filled out forms will not be acted upon. Tick or mark boxes with "X" where necessary. Note: ( ◀ ) denotes a MANDATORY field.

**A. Requesting Party**

You are required to supply your name and address for correspondence. Additional contact details will help us deal with your application and correspond with you in the manner you prefer.

1. Title (e.g. Mr, Mrs, Miss)

\_\_\_\_\_

2. Given Name/s (including M.I)

◀ \_\_\_\_\_

3. Surname

◀ \_\_\_\_\_

4. Complete Address (Apt/House Number, Street, City/Municipality, Province)

◀ \_\_\_\_\_

5. Landline/Fax

\_\_\_\_\_

6. Mobile

◀ \_\_\_\_\_

7. Email

\_\_\_\_\_

8. Preferred Mode of Communication

- Landline  Mobile  Number  Email  Postal Address  
(If your request is successful, we will be sending the document to you in this manner.)

9. Preferred Mode of Reply

- Email  Fax  Postal Address  Pick-Up at Agency

10. Type of ID Given (Please ensure your IDs contain your photo and signature)

- Passport  Driver's License  SSS ID  Postal ID  Voter's ID  
 School ID  Company ID  Others \_\_\_\_\_

**B. Requested Information**

11. Agency – Connecting Agency  
(If applicable)

◀ \_\_\_\_\_

12. Title of Document/Record Requested (Please be as detailed as possible)

◀ \_\_\_\_\_

13. Date or Period (DD/MM/YY)

◀ \_\_\_\_\_

14. Purpose

◀ \_\_\_\_\_

15. Document Type

◀ \_\_\_\_\_

16. Reference Numbers (if known)

◀ \_\_\_\_\_

17. Any other Relevant Information

◀ \_\_\_\_\_

