

CLIENT SERVICE REQUEST FORM

To: EMILY G. BARADIDAN, C.E., R.E.A.
Municipal Assessor
Solsona, Ilocos Norte

Request No. _____

Date: _____

Request for: (please check)

- a. Issuance of Certified Copy:
Tax Decl./ARP No. _____
- b. Issuance of Certification:
 Real Property Ownership
 Aggregate Area of Landholdings
 With or Without Improvement
 Latest Revision
 With or Without Annotation
- c. Annotation of Document:
 Mortgages
 Others (please specify)
- d. Processing of Document
 Transfer of Ownership
 Subdivision / Consolidation
 Others (please specify) _____
- e. Field Inspection
 Land Inspection
 Building Inspection
- f. Others (Please specify) _____

Printed Name & Signature of Requesting Party Date

Address : _____