



Republic of the Philippines
CITY ASSESSOR'S OFFICE



Civic Center B Building, City Hall Compound, Quezon City

REQUEST FOR CERTIFICATION/TAX MAP/PROPERTY IDENTIFICATION

Control No. _____

Date: _____

Authorization attached: _____

Requesting Party _____ **Relationship to Owner:** _____

Address _____

Property Owner _____

PURPOSE: () BIR () RD () CTO-Transfer Tax/Tax Clearance **Year of Death:** _____

(Please check) () Bank Loan () Others - Please specify: _____

ACTION REQUESTED FOR:

Property Reference
(Tax Dec. No./PIN/TCT)

Attachments (please check)

<input type="checkbox"/>	Tax Map	_____
<input type="checkbox"/>	Certification of Adjoining Lot Owners	_____
<input type="checkbox"/>	Property Location based on Tax Map	_____

<input type="checkbox"/>	Photo-cop of Valid ID
<input type="checkbox"/>	Copy of TCT/CCT
<input type="checkbox"/>	Authorization/ SPA

Signature of requesting party:
Signature over Printed Name
ID NO. :
Valid Contact No.
Email Address:

ACTION TAKEN
() Approved
() Disapproved

Certification fee
OR No.
Additional fees
Amount (Php)

I DECLARE UNDER THE PENALTIES OF PERJURY that all information contained in this application are true and correct based on my personal knowledge and all its attachments are authentic records submitted to the City Assessor's Office. Further, I give my consent to the processing of all personal information as defined under the Data Privacy Act of 2012 (R.A. No. 10173) and its IRR for legitimate and lawful purposes and agrees that real property related accounts or records with Quezon City Government may be processed, profiled or shared to requesting parties or for the purpose of any court, legal process, examination, inquiry and audit or investigation of any authority. (If signed by an Authorized Representative, indicate Valid ID, email and attach Notarized SPA/authorization letter).