

Annex E September 2022

## Application for Issuance of License to Operate LPG Refiller

Date
_, please be informed of this
CERTIFIED TRUE (  CAN IN INTELLIGION OF THE Supply Admin. Of These
nal() Renewal()
4 for compliance.
LPG facility and code of safety ards/codes based on the latest epted codes or standards.
ì

	Name, designat authorized repr	tion & signature of applicant o
eminders/Instructions;		
<ol> <li>This application shall be made per company an</li> <li>Submit this application form with complete de operate (LTO) before the start of commercial o</li> <li>Pay the application fee based on the OIMB/F( actual DOE treasury counter payment payable to Issuance of License to operate shall not be lated.</li> <li>OIMB/FO may further require a presentation o</li> <li>Refer to Section 31 of this Department Circular</li> </ol>	ocumentary attachments to OIMB/FO for peration.  O order of payment and via bank transfer, to the Department of Energy; It than twenty (20) working days from rece on the details of application in a pre-application in a pre-application.	the issuance of the required License ( , postal money order/manager's check ( cipt of application; ation conference; and
AC	KNOWLEDGMENT	L'ERTIFIED TRI
EPUBLIC OF THE PHILIPPINES CITY/MUNICIPALITY OF	) ) s.s	IMELDA M. R. Supyg Admin. (
SEFORE ME, a Notary Public for and in the f 20, personally appeared p	resenting his/her identification,  Competent Evidence of Identity	, this da to wit:  Date & Place of Issue
	luentry	
nown to me and to me known to be the samplication, which he/she acknowledged be with full authority to sign in that capacity. This application consisting of	efore me as his/her own free ar  original copy/ies submit	nd voluntary act and deed, an
	NOTA	RY PUBLIC
Doc No. Page No. Book No. Series of 20		

Very truly yours,

Annex E-1 September 2022

# CHECKLIST OF REQUIREMENTS LPG REFILLER APPLICATION FOR ISSUANCE OF LICENSE TO OPERATE (LPG)

Company Name:	Contact Details (email and tel #):
Prepared By:	Approved By:
(Position and Signature over Printed Name)	(Position and Signature over Printed Name)
REQUIREMENTS	SUBMITTED (Y/N)/REMARKS
). Notarized application form - Annex E;	
2. Checklist of requirements - Annex E-1;	
3. Company profile form - Annex E-2:	
4. Refilling plant profile form - Annex E-3;	
5. List of transport motor vehicle per total company basis with supporting documents - Annex E-4; and	
6. Attached supporting documents:	
6.1. Executive briefer of operation;	
6.2. Scaled layout plan per establishment;	
6.3. Business registration for the applied business activity from the Securities and Exchange Commission or Department of Trade and Industry or Cooperative Development Authority (whichever is applicable);	
6.4. Articles of Incorporation if SEC registered or its equivalent if DTI registered;	
6.5. Latest GIS if SEC registered or its equivalent if DTI registered;	
6.6. Business permit for the applied business activity from the Local Government Unit or PEZA Certificate of Registration;	
6.7. Bureau of Internal Revenue registration for the applied business activity;	
6.7. Certificate of registration and official receipt per motor vehicle from LTO with corresponding picture of the front of vehicle with plate number	er;
6.8. Bureau of Fire Protection conveyance permit per motor vehicle;	
6.9. Calibration certificate per bulk motor vehicle (forry tank) from DOST.	
6.10. Pire safety inspection certificate per establishment from the Bureau of Fire Protection;	TRUE COPY
6.11. Occupancy permit per establishment from the Local Government Unit;	CERTIFICATION
6.12. Permit to operate unfired pressure vessel per tank for LPG business from the Department of Labor and Employment (DOLE);	-av 10/13/
6.13. Environmental compliance certificate per establishment from the Department of Environment and Natural Resources;	TO DAM BOXAS
6.14. List of qualified service personnel with attached certificate of training conducted by DOE recognized training organization;	- Aller O'Clicer
6.15. Latest digital photographs (5R Size with date/time stamp) showing the following:	320-5
6.15.1. Full and front and back views of the establishment;	
6.15.2. Weighing scale device/s:	
6.15.3. LPG cylinders;	
6.15.4. Safety and informational signs; and	
6.15.5. Display board showing the Facility registered business name and address.	
6.16. Fire prevention and response manual;	
6.17. LPG spill prevention and response manual;	
6.18. Clearance certificate from the Legal Services - No pending penalty or prohibition to engage in DOI activity;	
6.19. Notarized company secretary's certificate for authorized representative and signatory; and	
6.20. Proof of payment of application fee.	

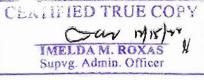
## Reminder/Instruction:

1. Submit one (1) Certified True Copy of all the required supporting documents.

Annex E-2
IED TRUE COPY September 2022

## COMPANY PROFILE

## LPG REFILLER

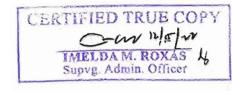


APPLICATION FOR ISSUANCE OF LICENSE TO OPERATER (LPG)

Company Name:		Contact Details (email	As c	of (mm/dd/yyyy):		
Prepared By:		Approved By:				
m : 4 - 18						
(Designation and Signature over Printed Name)		(Designation and Sign	ature over Printed N	lame)		
L COMPANY BACKGROUND						
Business Address (Number, street, barangay, municipality/city, province at	nd region):	GPS Coordinates:	Longitude:	Latitude:		
Telephone (landline) No.:		E-mail Address:				
President/CEO:						
Authorized Representative/s to transact business with DOE:						
Type of Ownership:	( ) Single Proprietorship (	) Partnership		( ) Corporation	(	) Cooperative
Registered Owner / Partners / Incorporator / Board of Directors:						
Name				Nationality		
		<del></del>				
*add row/s as necessary						
Executive Management Organizational Structure: Name						
Name		<del></del>		Designation/Position		
*add row/s os necessary						
Number of employee/s: (attach Organizational Structure and indicate numb	er of staffernologies per position per facility including oppourced	employee/s)				
II. DESCRIPTION OF BUSINESS PORTFOLIO						
Background						
History of operations and investments in the Philippines						
Expansion Program/s						
LPG Brand/s and Size/s (Owned):						
LPG Source:						
Name of sup	plier		Location	where the product will be sourced		
add rows as necessary						

## COMPANY PROFILE

## LPG REFILLER



APPLICATION FOR ISSUANCE OF LICENSE TO OPERATER (LPG)

Company Name:					Contact Details (email and tel #):			As of (mm/dd/yyyy):	
Prepared By:					Approved By:				
					}				
(Designation and Signature	over Printed Name)				(Designation and Signatur	e over Printed Name)			
III. FACILITIES - Refilling Plants and Authorized Dealers and Retailers Outlets									
				Location or Address			License to Operate No.	Valid Until	
Type of Facility	Name	Region	Province	Municipality/City	Barangay	Street	(For LPG)	(dd/mm/yyyy)	
A. Company Owned and (	Operated								
				L					
*add row/s as necessary									
B. Company Owned but P	rivately Operated								
					<u>_</u>				
"add row/s as necessary									
C. Privately Owned and O	perated								
*add row/s as necessary									
IV. COST OF INVESTME	ENT (Company Owned)								
	Details			Cost in Phil	ippine Peso		Number of Manpower Req	mirement per plant/facility	
A. Refilling Plants									
B. Dealer Outlets									
C. Retailer Outlets									
C. Total Operational Cos									
add row/s as necessary	TOTAL								
	TOTAL								

Department of Energy Oil Industry Management Bureau (ODMB)							Anses EJ September 2032	
			REFILLING	PLANT PROFILE				
			LPC	REFULLER				
			APPLICATION FOR ISSUANCE	OF L(CENSE TO OPERATER (LPC)				
Company Name:				Contact Octails (email and tel #);			As of (enan/deb) yyy):	
Prepared By:				Approved By:				
				]				
(Donigration and Signature over Printed Name)				(Designation and Signature over Prin	ted Name)			
L ESTABLISHMENT PROFILE								
Establishment Business Name;				GPS Coordinates:				
Business Address (Number, Street, Brgy, MunCity, Province and Region):				Longitude;		Latitude:		
Telephone (landing) No.:				Email Address:				
Date Commissioned: Date of Start of Operation:								
Cost of Investment (PhP):							<del></del> _	
Type of Ownerstupe	( ) Single Proprietorship	( ) Partoership		( ) Corporation	( ) Cooperative			
Total Number of Personnel in the Facility:	7,550	7		700,000	( )/			
IL EXECUTIVE MANAGEMENT ORGANIZAT	TIONAL STRUCTURE							
	Name					Designation		
*add run/s as necessary			<del></del>					
IIL REFILLING FACILITIES								
Yotal Plans Area (19.40.) 1								
Specifications								
	Storage Tani	k			R	Alling Equipment		
Type (e.g. Spherical or Cylindrical)	Type of lextallation (e.g. Aboveground or Mounded/Lindersmund)	Number of Tanks/Serial Number	Capacity (MT)	Filling Typ∈	No. of DupensonFilling Heads	Val. Thruput (kg/day)	Total Vol. Throput (kg/month)	

"add raw's as moessary

IV. FIRE PROTECTION/PREVENTION

O. Forewall (if any)
H. Safety and Informational Signs

A Water Tank Capacity:
B. Fire Extinguisher
C. Pessonal Protective Equipment
D. Eurorgeopy Shutdown System
E. Eurorgeopy Evacuation Area
F. Oss Detector

Particulars

No. of Units

CERTIFIED TRUE COPY

/W 12/15/24

IMELDAM. ROXAS

Supvg. Admin. Officer

Location

Remarks

Type / Class

#### RETILLING PLANT PROFILE

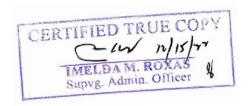
#### LPC REFILLER

#### APPLICATION FOR ISSUANCE OF LICENSE TO OPERATER (LPG)

APPLICATION FOR ISSUANCE OF LICENSE TO OPERATER (LPG)									
Company Name:				Control Double (cross) and tel #):	As of (our/dd/yyyy):				
			ł						
2 -47									
Prepared By:				Approved By:					
				J					
(Designation and Signature over Printed Name)				(Designation and Signature over Prin	ted (Name)				
V. GENERATOR SET									
A. For bacing power									
B. For fire pump									
VL LIST OF QUALIFIED SERVICE PERSO	MNEL								
Name			Destgration	Professional Competenter					
					<del></del>				
		· · · · · · · · · · · · · · · · · · ·			<del></del>				
Other Observations/Information:									

#### Reminder/Instruction

1. Submission of this report shall be on a per establishment basis.



Cri Industry Management Burn	нь гооди												Annes E-I September 2027
LIST OF TRUNSPORT MOTOR VEHICLE													
LPC REFILLER													
APPLICATION FOR ISSUANCE OF LICENSE TO OPERATER (LPG)													
Company Name:			Contact DetAils (empil a	and tel #);								As of (sam/dd/yyyy)	
Properced By			Approved By:										
(Position and Signapure over Pr	rinted Name)		(Position and Signature	over Printed Name)									
ža.	nd Trussportation Office (LTO) Certificate of Registration		Land Transports Official	cion Office (LTO) Receipt	Bareso of Fire Protect	Bureas of Fire Protectics Conveyance Permit  Department of Science and Technology Cultbration  Certificate		y Calibration Perdentan					
Type of Vehicle	Plais / Mosor Vehicle File Number	Larrend Drete	OR Number	Valid Ualil	Essued Duic	Vuid Uses	Issued Date	Valid Upti)	Bolk Transport or In Cylinder or Cartridge	Company-Owned or Contracted	ff Contracted, Company Name of the Independent Flauler	lf Contracted, Independent Hauter LTO Number	LTO Validity
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						_		!				<del></del>	
	<del> </del>												
								<del>                                     </del>					
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Supporting Documents - Certified true topy of the followings

1. Cartificate of registration and official receipt per motor vehicle from LTO with corresponding secture of the treat of vehicle with plate number;
2. Conveyance Permit per motor vehicle from the Bureau of Fite Protection; and
3. Calibration cartificate per bulk motor vehicle (long tank) from DOST.

