



SUBIC BAY METROPOLITAN AUTHORITY ECOLOGY CENTER

Regulatory Bldg., Labitan St. cor. Rizal Highway, Subic Bay Freeport Zone, Philippines 2222
Tel 047.252.4656/4059; Fax 047.252-4157; email: ecology@sbma.com

General Quality Form

ECD-RPD-20

Revision No.: 06

Effectivity Date: 9/16/19

REQUEST TO CONDUCT ENVIRONMENTAL ACTIVITY IN TERRESTRIAL AND/OR MARINE ECOSYSTEM

Part 1. This portion to be filled out by the Applicant

- A. Name of Applicant: _____ No. of pax: _____ Application Date: _____
- B. Company/Agency: _____
- C. Address: _____ Contact No.: _____ e-mail address: _____
- D. Request permit to conduct bird watching scientific research/study/thesis* field exercises/practicum**
 collection of limited sample of (identify specimen) _____
 photo/video documentation
- E. Proposed Location/s: _____
- F. Date/s of Activity: _____
- G. Reason/s for the above request: _____
- H. Do you wish to get a Field/Ayta Guide? Yes No

Applicant's/Authorized Representative's Printed Name and Signature

LEGEND:

- * - Attach Research Proposal
 ** - Attach Methodology

IMPORTANT REMINDERS/REQUIREMENTS:

- If the Applicant opted to pay the Research Permit fees thru bank (if not paying personally to the SBMA Cashier), please **use bank telegraphic transfer to SBMA Account at Landbank of the Phils. with Account no. 1572-2220-00**. Kindly use the number indicated on the upper right corner of the billing/general assessment form as the "Reference number" when paying at Land Bank using Landbank's **ONCOLL PAYMENT SLIP**.
- After paying, the Applicant should immediately provide/email the proof of payment to Ecology Center (ecology@sbma.com) and Ecology Center will send the scanned copy of the Research Permit. **The same scanned copy of the Research Permit shall be returned to Ecology Center later on thru fax or email after the Applicant has signed on the Conforme part of the permit.**
- Each application will be charged with a *Permit fee* of Php 200.00 and a *Research fee* of Php 100.00 per individual. The Applicant is required to submit electronic copies of related photos and videos taken during the activity. For scientific research/thesis/field exercises, the Applicant shall submit a copy of the report to Ecology Center. Compliance to this requirement will serve as basis for the approval of the Applicant's succeeding research requests. **NOTE: No photos/videos/report, no Research permit to be granted on the next request.**
- If the target area of research is at Hill 394, the Applicant needs to coordinate first with Mr. Homer Raña of Orica Phils. (Mobile no. 0917-873-5345) prior to the conduct of the approved activity near their facility.

Part 2. This portion to be filled out by Ecology Center's Protected Area Division (PAD) personnel

Request Received by: _____ Date/Time Received: _____

Remarks (describe attachment, if any): _____

Recommendation: Process Permit? YES NO W/ SPECIAL INSTRUCTIONS (see below)

Special Instructions: _____

Evaluated by: _____ Date/Time Evaluation Completed: _____

NOTED BY:

MARY ANN R. TORRES
Chief, Protected Area Division

Part 3. This portion to be filled out by Ecology Center's Regulatory Permitting Division (RPD) personnel

FOR BILLING PURPOSES

1. Fees/Payments:

Pls. Check	Nature of Collection	No. of pax or application	Amount (Php)
	Permit fee (Php 200.00 per application)		
	Research fee (Php 100.00 per pax/head)		
		TOTAL FEES	Php

2. Note: Please indicate this in the Billing Assessment Form - "T/F Research Fee"

3. Assisted by: _____ Date _____
RPD Personnel