

## APPLICATION FOR WORKING PERMIT

	Date:
I respectfully apply for a permit to be em	iployed as
In	_ at
(Department/ Company)	(Place of Work)
	Name of Applicant & Signature
	Contact No.:
CTC No.:	
Issued at:	
Issued on:	

## 1<sup>st</sup> Endorsement

Respectfully referred to the City Health Officer, the above mentioned person for medical examination recommendation.

Dra. Ivy Marie C. Yrastorza
City Health Officer

## 2<sup>nd</sup> Endorsement

Respectfully referred to the City Mayor, the above mentioned person have been medically examined and found to be physically fit to work and/or fit to engaged in the business.

Mayor's Permit and Health Permit is hereby GRANTED to the applicant.

Lani Mercado-Revilla
City Mayor

