

A Documents	B For Initial	C For Renewal
10. List of Equipment/ Instrument (use attached form)		
11. Location Map for the ambulatory surgical clinic building		
12. Photographs of the exterior and interior of the ambulatory surgical clinic		
13. Photocopy of DOH Permit to Construct		
14. DTI/ SEC Registration (for private clinic) OR Issuance or Board Resolution (for government clinic)		
15. Contract of Lease (if clinic is rented)		
16. Memorandum of Agreement with the nearest Level 3 or Level 4 Hospital		
17. Letter of Intent to comply with the evidence-based clinical practice guidelines		

Acknowledgement

REPUBLIC OF THE PHILIPPINES)
CITY/ MUNICIPALITY OF _____) S.S.

I, _____, _____, of legal age, _____, a resident of
Name *Civil Status* *Age*
 _____, after having been sworn in accordance with law hereby depose and
Address
 say that I am executing this affidavit to attest to the completeness and truth of the foregoing information and the attached documents required for the Registration and Licensure of Ambulatory Surgical Clinics in the Philippines pursuant to Administrative Order No. 183 s. 2004 "Rules and Regulations Governing the Licensure and Registration of Ambulatory Surgical Clinics".

Signature

Before me, this _____ day of _____ 2007 in the City/ Municipality of _____, Philippines, personally appeared

Owner
Community Tax Number
Issued at/ on

known to me to be the same person/s who executed the foregoing instrument and they acknowledge to me that the same is their free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hands this _____ day of _____ 2007.

Doc. No. _____
 Page No. _____
 Book No. _____
 Series of _____

NOTARY PUBLIC
 My Commission Expires
 Dec. 31. 200__

