



ILOCOS SUR ELECTRIC COOPERATIVE, INC.
Bigbiga, Santiago, Ilocos Sur



4Ps LIFELINER APPLICATION FORM
(New Application)

Date: _____

Application Form No.: _____

(To be filled-up by the applicant)

Applicant Name: _____
Surname First Name Middle Name

Maiden Name (if applicable): _____

Address: _____
House No./Zone/Sitio Barangay City/Municipality
ILOCOS SUR REGION I
Province Region Postal Code

Date of Birth: _____ Contact No.: _____

Marital Status: mm/dd/yyyy
() Single () Married () Widowed

Spouse Name: _____ Date of Birth: _____

Account No: _____ Account Name: _____

4Ps Household ID No. (from DSWD): _____

Ownership: () Owned () Rented () Others (please specify): _____

(To be accomplished by Processing Personnel)

Documentary Requirements Checklist (Please check)	Other Supporting Documents (Please check)
_____ 1. Duly accomplished application form.	If electric service not registered under the name of the applicant: _____ 1. Proof of residence.
_____ 2. Most-recent electricity bill for service being applied for.	If application filed through a representative: _____ 1. Letter of Authority _____ 2. Valid government-issued ID (with signature) of the representative.
_____ 3. Valid government-issued ID containing the signature and address of the consumer. Valid ID: _____ ID No.: _____	Evaluation: () Approved Validity Period: Until indicated in the DSWD Certified List () Disapproved Reason for Disapproval: _____

Sa pagpirma ko, ako ay:

1. Nagpapatuinay na ang lahat ng impormasyon nakasulat dito ay tama base sa aking pinakamahusayna kaalaman.
2. Pumapayag na gamitin ang aking personal na impormasyon sa pagproseso ng aking aplikasyon, sa kondisyong nakapailalim sa Data Privacy Act of 2012.
3. Ang diskwetno ay naka-depende sa aking magiging konsumo.

(Printed Name & Signature of Applicant)

Processed by:

Checked and Evaluated by:

Approved by:

(Printed Name & Signature)

CWDO

Sub-Area Manager