

REPUBLIC OF THE PHILIPPINES
CITY OF ILOILO
PURSUANT TO THE PROVISIONS OF
ORDINANCE NO. 399, SERIES OF 1993, AS
AMENDED

PERMIT IS HEREBY GRANTED:

(Name)

(Address)

to act as: _____

Date: _____

JERRY P. TREÑAS
City Mayor

By Authority of the City Mayor:

FRANCIS T. CRUZ
Executive Assistant IV

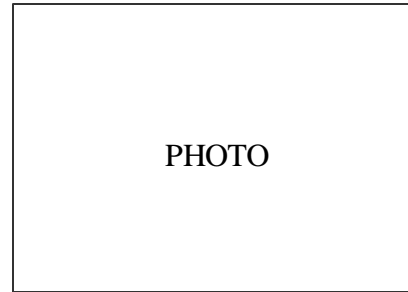
Noted:

LERMA P. ESPAÑOLA
Licensing Officer IV

Witness as to Age:

Signature/Manager/Employer/Operator

This PERMIT must be renewed on January every year



PHOTO

(Signature)

Native Place: _____

Age: _____ C.S. _____

Citizenship: _____

Comm. Tax Cert. No. _____

Date Issued: _____

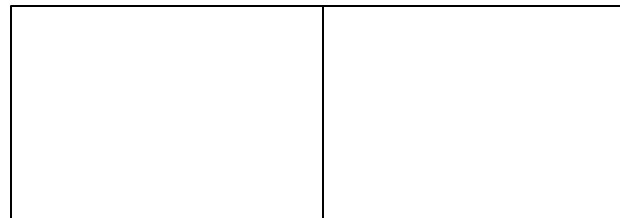
Place Issued: _____

O.R. No. _____

Amount Paid: _____

Date: _____

THUMBMARK



(LEFT)

(RIGHT)

New/Renewal

PERMIT NO. _____

(PLACE OF EMPLOYMENT)

(Address)

RECORD OF PHYSICAL & PHYSICIAN EXAMINATIONS:

General Physical Features: _____

Lungs: _____

Heart: _____

Skin Diseases: _____

Venereal Diseases: _____

Clearance from Communicable and Condition Disease:

Remarks: _____

(Signature)

(Name of Examining Physician)

APPROVED:

CITY HEALTH OFFICER

NOTE: This record Physician and Medical Examination will not be valid unless signed by examining Physician and approved by the City Health Officer.