

Republic of the Philippines
Province of Nueva Ecija
San Jose City-3121
-oOo-

(Date)

CHRISTOPHER R. PABALAN

Chairman
Safety Seal Certification Team
San Jose City

Dear Sir:

After conducting self assessment of our establishment and compliance of the checklist provided by your office, we now respectfully request for the inspection and validation to be qualified for a Safety Seal Certification.

Name of Establishment : _____
Owner : _____
Location : _____

Status of Certification: New
 Renewal
 Reinstatement

(Signature over Printed Name of the Owner/President/Manager)