

# PHILIPPINE CROP INSURANCE CORPORATION

**CITIZEN'S CHARTER** 2025 (1<sup>st</sup> Edition)



# PHILIPPINE CROP INSURANCE CORPORATION

**CITIZEN'S CHARTER** 2025 (1<sup>st</sup> Edition)



#### I. Mandate

The PCIC's principal mandate is to provide insurance protection to farmers against losses arising from natural calamities, plant diseases and pest infestations of their palay and corn crops as well as other crops.

The corporation also provides protection against damage to or loss of non-crop agricultural assets, including but not limited to machineries, equipment, transport facilities and other related infrastructures due to various perils these are insured for.

#### II. Vision

By 2028, PCIC will be a sustainable, technology-driven agricultural insurance provider for the Filipino farmers and fisherfolk that provides value for money and fosters resiliency.

#### III. Mission

PCIC is a state-owned agricultural insurer committed to developing and implementing insurance programs highly responsive to the needs of small farmers and fisherfolk and other agricultural stakeholders.

#### IV. Service Pledge

The highest satisfaction with our agricultural insurance services among our internal and external stakeholders is our commitment.

We optimize the use of available resources to provide responsive livelihood protection at the appropriate level and right time to the greatest number of marginal farmers and fisherfolk.

We assure this by:

- Empowering the workforce;
- Maintaining and expanding the partnership with public and private entities nationwide;
- Adhering to local and international standards; and
- Integrating risk-based quality management system in the delivery of our products and services toward continual improvement.



# V. List Of Services

I.	Μ	landate	3
II.	V	ision	3
III.	Μ	lission	3
IV.	S	ervice Pledge	3
V.	Li	ist Of Services	4
Hea	ad	Office	6
Ext	erı	nal Services	6
1	•	Request for Certificate of Employment for Retired/Resigned Employees	7
2		Request for Service Record of Retired/Resigned Employees	8
Hea	ad	Office	. 10
Inte	ərn	al Services	.10
1	•	Application for Leave	. 11
2		Processing of Monetization of Leave Credits	.15
3	5.	Processing and Payment of Terminal Leave Benefits	. 18
4		Processing of Posthumous Separation	.22
5	5.	Request for Certificate of Employment	.25
6	<b>.</b>	Request for Service Record	.26
7		Request for Authority to Travel Abroad	.27
8	<b>-</b>	Request for Transportation and Driver Service	.29
9	)_	Request for Common Use Supplies and Equipment	.30
	0. Iot	Request for Non-Common Use Supplies, Equipment and Common Use Supplies Available in Stock	. 32
1	1.	Request for Cash Advance for Official Travel	.35
1	2.	Request for Cash Advance for Operating Expenditures	.37
1	3.	Request for Cash Advance through Petty Cash	.39
1	4.	Liquidation of Cash Advance for Official Travel	.40
1	5.	Liquidation of Cash Advance for Operating Expenditures	.43
1	6.	Liquidation of Cash Advance through Petty Cash	.46
1	7.	Request for Claims Fund Transfer	.47
1	8.	Request for General and Administrative Fund Transfer	.48
Re	gio	nal Office	.49
Ext	eri	nal Services	.49
1	•	Application for Insurance Cover	.50
2		Filing and Processing of Notice of Loss/Claim for Indemnity	55



A. Rice and Corn Crop Insurance	55
B. High-Value Crop Insurance	57
C. Livestock Insurance	60
D. Fisheries Insurance	63
E. Non-Crop Agricultural Asset Insurance (NCAAI)	66
F. Credit and Life Term Insurance (CLTI)	68
3. Reconsideration of Claims	72
4. Processing of Death Benefit Claim	75
5. Processing of Burial Benefit Claim	78
6. Request for Certificate of Employment for Retired/Resigned Employee	81
7. Request for Service Record of Retired/Resigned Employees	82
8. PCIC Procedure on Handling of Feedback and Complaint	83
8.1 Feedback Procedure (Head Office)	83
8.2 Feedback Procedure (Regional Office)	84
8.3 Complaint Handling (Head Office)	
8.4 Complaint Handling (Regional Office)	87
Feedback and Complaints Contact Information	
Regional Office	90
Internal Services	90
1. Application for Leave	91
2. Processing of Monetization of Leave Credits	95
3. Request for Certificate of Employment	98
4. Request for Service Record	
5. Request for the use of Government Vehicle	
6. Request for Common Use Supplies and Equipment	
7. Request for Non-Common Use Supplies, Equipment and Common Use	
Not Available in Stock	
8. Request for Cash Advance for Official Travel	
9. Request for Cash Advance for Operating Expenditures	
10. Request for Cash Advance through Petty Cash	
11. Liquidation of Cash Advance for Official Travel	
12. Liquidation of Cash Advance for Operating Expenditures	
13. Liquidation of Cash Advance through Petty Cash	
VI. Directory of PCIC Offices	



# **Head Office**

# **External Services**



### 1. Request for Certificate of Employment for Retired/Resigned Employee

A certificate of employment (COE) contains relevant information about the employee such as but not limited to job title, job description, salary and other compensation, and duration of employment with PCIC. This document may be requested for whatever legal purpose it may serve a former employee.

Office or Division	):	Human Resource Management Division (HRMD)					
Classification:		Simple					
Type of Transact	ion:	G2C – Government to Citizen					
Who may avail:		Former Head Office I					
		LIST OF REQUIREM	ENTS			IERE TO SECURE	
1. Request Slip (1			HRMD				
1. Authorization Le 2. Valid ID of the re	etter (* eques	requesting retired/re 1 original copy) sting former employee entative (1 Photocopy)	(1 Photocop	y)		employee-applicant	
CLIENT STEPS	A	GENCY ACTIONS	FEES TO BE PAID	PROCE		PERSON RESPONSIBLE	
1. Submits the accomplished Request Slip to the HRMD.	1.1 Receives the accomplished Request Slip.		None	5 Mir	nutes	HRMO II HRMD	
		Prepares the draft COE.	None	4 Hours		HRMO II HRMD	
	-	Reviews the draft COE.	None	3 Ho	ours	Division Chief III HRMD	
		Finalizes the draft COE.	None	20 Mi	nutes	HRMO II HRMD	
	-	Affixes initials to the COE.	None	10 Mi	nutes	Division Chief III HRMD	
	1.65	Signs the COE.	None	10 Mi	nutes	Department Manager III Administrative Department	
	t	Releases the COE to he requesting former employee.	None	5 Minutes		HRMO II HRMD	
2. Acknowledges 2.7 receipt of COE from HRMD.		Files a copy of the COE.	None	10 Mi	nutes	HRMO II HRMD	
	TOT	4L	None	1 [	Day		



# 2. Request for Service Record of Retired/Resigned Employee

A service record is a record or document of a former employee's employment history that includes employment date, position title/s held, date/s of promotion and salary adjustments.

Office or Division: Human Resource Management Division (HRMD)							
Classification:	Simple	0		/			
<b>Type of Transaction</b>	: G2C – Government t	o Citizen					
Who may avail:	Former Head Office						
	KLIST OF REQUIREM	ENTS			RE TO SECURE		
1. Request Slip (1 orig	1. Request Slip (1 original copy) HRMD						
For representatives of requesting retired/resigned employeeFormer employee1. Authorization Letter (1 original copy)Former employee-applicant2. Valid ID of the requesting former employee (1 Photocopy)Former employee-applicant3. Valid ID of the representative (1 Photocopy)Former employee							
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		CESSING	PERSON RESPONSIBLE		
1. Submits accomplished Request Slip to	1.1 Receives the accomplished Request Slip.	None		linutes	HRMO II HRMD		
the HRMD	1.2 Prepares the draft Service Record.	None	4	Hours	HRMO II HRMD		
	1.3 Reviews the draft Service Record.	None	3	Hours	Division Chief III HRMD		
	1.4 Finalizes the draft Service Record.	None	20	Vinutes	HRMO II HRMD		
	1.5 Affixes initials to None the Service Record.		10 Minutes		Division Chief III HRMD		
	1.6 Signs the Service Record.	None	10	Vinutes	Vice President Support Services Group Or Agency Authorized Officer		
	1.7 Releases the Service Record to the requesting former employee.	None	5 N	linutes	HRMO II HRMD		



2. Acknowledges receipt of Service Record from HRMD.	2.1. Files a copy of the Service Record.	None	10 Minutes	HRMO II HRMD
TC	TAL	None	1 Day	



# **Head Office**

# **Internal Services**



#### **1. Application for Leave**

The leave of absence is a right granted to permanently appointed officials and employees not to report for work with or without pay.

Vacation leave refers to a leave of absence granted to officials and employees for personal reasons, the approval of which is contingent upon the necessities of the service.

Sick leave refers to a leave of absence granted on account of sickness or disability on the part of the employee concerned or any member of his immediate family.

Special leave privileges refer to leave of absence which officials and employees may avail of for a maximum of three days annually over and above the vacation, sick, maternity, and paternity leaves to mark personal milestones and/or attend to filial and domestic responsibilities.

Other special leave benefits refer to those allowed under special laws.

Office or Division:	Human Resource Management Division (HRMD)					
Classification:	Simple					
Type of Transaction:	G2G – Government to Government					
Who may avail: Head Office Employees						
CHECK	LIST OF REQUIREMENTS	WHERE TO SECURE				
For Sick Leave and Va	cation Leave					
-	Form (Civil Service Form No. 6 Revised	Employee-applicant				
	ppies: personal copy and HR copy)					
	advance or if exceeding five days					
	Form (Civil Service Form No. 6 Revised	Employee-applicant				
2020) – (2 original co	2020) – (2 original copies: personal copy and HR copy)					
2. Medical Certificate /	Affidavit (if medical consultation was not	Attending Physician/ Clinic /				
availed) - (1 original	·	Employee-applicant				
For Maternity Leave –	105 days (allowable period of leave)	•				
1. Accomplished Leave	Form (Civil Service Form No. 6 Revised	Employee-applicant				
2020) – (2 original co	ppies: personal copy and HR copy)					
2. Accomplished CS Fo	orm No. 6A (Notice of Allocation of	Employee-applicant				
Maternity Leave), if a	Maternity Leave), if applicable (2 original copies)					
3. Proof of pregnancy e.g., ultrasound, doctor's certificate on Hospital / Clinic / Lying						
expected date of deli	expected date of delivery (1 original and 1 photocopy) Attending Physician					
For Paternity Leave – s	seven days (allowable period of leave)					
	Form (Civil Service Form No. 6 Revised	Employee-applicant				
2020) – (2 original co	ppies: personal copy and HR copy)					



2. Proof of child's delivery e.g., birth certificate, medical certificate (1 photocopy)	Hospital / Clinic / Lying–in / Civil Registry / Philippine
(Tphotocopy)	Statistics Authority (PSA)
3. Marriage Certificate / Contract (1 photocopy)	PSA PSA
For Solo Parent Leave – seven days (allowable period of leave)	
<ol> <li>Accomplished Leave Form (Civil Service Form No. 6 Revised 2020) – (2 original copies: personal copy and HR copy)</li> </ol>	Employee-applicant
2. Updated Solo Parent ID (1 photocopy)	Local Government Unit – Social Welfare and Development Office (SWDO)
For Study Leave – up to six months (allowable period of leave)	
<ol> <li>Accomplished Leave Form (Civil Service Form No. 6 Revised 2020) – (2 original copies: personal copy and HR copy)</li> </ol>	Employee-applicant
2. Approved Request for Study Leave (1 original copy)	Employee–applicant / Human Resource Management Division/ Head of Agency
<ol> <li>Proof of acceptance/enrollment in an academic institution / review center (1 photocopy)</li> </ol>	Academic institution / Review Center
4. Service Obligation Contract (1 photocopy)	Human Resource Management Division
<ul> <li>For VAWC (Violence Against Women and Children) Leave – 10 leave)</li> <li>1. Accomplished Leave Form (Civil Service Form No. 6 Revised 2020) – (2 original copies: personal copy and HR copy)</li> </ul>	Employee-applicant
<ol> <li>Any of the following supporting documents (1 certified true copy):</li> </ol>	
Barangay Protection Order (BPO)	Barangay Office
<ul> <li>Temporary / Permanent Protection Order</li> </ul>	Court
<ul> <li>Certification issued by the Punong Barangay/Kagawad or Prosecutor or Clerk of Court for the application for BPO</li> </ul>	Barangay Office or Prosecutor or Clerk of Court
Medico legal report	Government Physician
For Rehabilitation Leave for injuries acquired in the performance	
months (allowable period of leave)	
<ol> <li>Accomplished Leave Form (Civil Service Form No. 6 Revised 2020) – (2 original copies: personal copy and HR copy)</li> </ol>	Employee-applicant
2. Approved Letter Request (1 original copy)	Employee–applicant / Office of the President
3. Police Report, if applicable (1 photocopy)	Police Station (PNP)
4. Medical Certificate on the nature of the injuries, the course of treatment involved, and the need to undergo rest, recuperation, and rehabilitation as the case may be. (1 original copy)	Attending Physician
5. Written concurrence of a government physician should be obtained relative to the recommendation for rehabilitation if the	Government Physician



		s a private practitioner, partic	•	е			
Fo		d of rehabilitation. (1 original efits for Women – up to tw		allov	vable neriod	of leave)	
	Accomplished Leave	e Form (Civil Service Form N opies: personal copy and HR	o. 6 Revised		Employee-a		
2.	Medical Certificate fi e.g. the attending su reflecting the gyneco or was addressed by report; the operative duration of the surge (period of confineme employees estimate original copy)	ry	Attending Ph	nysician / Hospital			
Fo	or Special Emergenc	y (Calamity) Leave – up to	five days (a	allov			
1.		e Form (Civil Service Form N opies: personal copy and HR		ł	Employee-a	pplicant	
	<ol> <li>Declaration of State of Calamity (1 photocopy)</li> <li>Certification of Affected Area (1 original copy)</li> </ol>					Local Government Unit / Municipal Mayor/ Provincial Governor/	
		up to seven days (allowabl			/e)		
1.	•	e Form (Civil Service Form N opies: personal copy and HR		ł	Employee–a	pplicant	
	•	ment Authority (1 certified ph			•	of Social Welfare ment (DSWD)	
	Accomplished Leave	for 30 calendar days or mo Form (Civil Service Form N opies: personal copy and HR	o. 6 Revised	ł	Employee-a	pplicant	
2.	Accomplished Clear original copies)	ance Form (Civil Service For	m No. 7) - (2		Employee-a	pplicant	
	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PR	OCESSING TIME	PERSON RESPONSIBLE	
: ; 1	Submits the accomplished application for leave form including the documentary	1.1 Receives the accomplished application for leave form.	None 5 Minu		5 Minutes	Human Resource Management Officer (HRMO) II HRMD	
	requirements to the HRMD.	1.2 Reviews completeness of documentary requirements.	None	1	5 Minutes	HRMO II HRMD	
		1.3 Certifies availability of leave credits.	None	3	80 Minutes	Division Chief III HRMD	



	1.4 Endorses leave form to the immediate supervisor for recommendation and/or approval/ disapproval.	None	30 Minutes	HRMO II HRMD
	<ul> <li>1.5 Approves/ disapproves the application for leave.</li> <li>If approved, marks the appropriate box and indicates the number of days approved and forwards to employee-applicant.</li> <li>If disapproved, marks the appropriate box and states the reason/s for disapproval and forwards to employee-applicant.</li> </ul>	None	30 Minutes	Supervisor Originating Department
2. Receives the approved/disapprove d application for leave form and returns one (1) copy to the HRMD.	2.1 Records and files the approved application for leave.	None	30 Minutes	HRMO II HRMD
тс	DTAL	None	2 Hours and 20 Minutes	

Note: The Schedule for filing leave per type of application shall be:

- Vacation Leave; Mandatory / Forced Leave; Special Privilege Leave; Solo Parent Leave; Adoption Leave five days before the scheduled leave;
- Sick Leave immediately upon employee's return from such leave;
- Maternity Leave 30 days before Expected Date of Delivery;
- Paternity Leave immediately upon employee's return from such leave;
- Study Leave 30 days before the scheduled leave;
- VAWC leave immediately upon return of employee or in-advance;
- Rehabilitation Leave one week from the time of the accident except when a longer period is warranted;
- Special Leave benefits for Women at least five (5) days. In case of emergency, upon return of employee but during confinement, the agency shall be notified of said surgery; and
- Special Emergency (Calamity) Leave within 30 days from the actual occurrence of the natural calamity/ disaster.



#### 2. Processing of Monetization of Leave Credits

Officials and employees who have accumulated 15 days of vacation leave credits shall be allowed to monetize a minimum of 10 days; provided, that at least five days is retained after monetization and provided further that a maximum of 30 days may be monetized in a given year.

Monetization of 50% of all the accumulated leave credits may be allowed for valid and justifiable reasons, subject to the discretion of the agency head and availability of funds.

Office or Division: Human Resource Management Division (HRMD)							
Classification:		Simple					
Type of Transactio	n:	G2G – Government to Government					
Who may avail:		Head Office Employe					
		OF REQUIREMENTS			E TO SECURE		
For monetization not exceeding 50% of accumulated leave credits							
•		Form (Civil Service Fo	rm No. 6	Employee-app	licant		
Revised 2020) -							
		cess of 50% of accum					
•		Form (Civil Service Fo	rm No. 6	Employee-app	licant		
Revised 2020) -					P 6		
		est to Head of Agency s	•	Employee-app	licant		
		easons (1 original copy		Attending Dhure	isian		
3. Medical Certifica	ite, ii	applicable (1 original c	FEES TO	Attending Phys PROCESSIN	PERSON		
CLIENT STEPS	4	AGENCY ACTIONS	BE PAID	G TIME	RESPONSIBLE		
1. Submits the accomplished leave form including the required documents to		Receives the accomplished application for leave form. Reviews completeness of	None None	5 Minutes 15 Minutes	HRMO II HRMD HRMO II HRMD		
the HRMD.	1.3	documentary requirements. Certifies availability of leave credits.	None	30 Minutes	Division Chief III HRMD		
		Endorses leave form to the immediate supervisor for recommendation and/or approval/ disapproval.	None	30 Minutes	HRMO II HRMD		
	1.5	Approves/ disapproves the application for leave.	None	30 Minutes	Supervisor Originating Department		



-			•	
	<ul> <li>If approved, marks the appropriate box and indicates the number of days approved and forwards to the HRMD.</li> <li>If disapproved, marks the appropriate box and states reason/s for disapproval.</li> </ul>			
- a	Records and files the approved application for leave.	None	30 Minutes	HRMO II HRMD
	Prepares schedule of monetization.	None	30 Minutes	HRMO II HRMD
	Reviews schedule of monetization.	None	30 Minutes	Division Chief III HRMD
	Approves schedule of monetization.	None	30 Minutes	Department Manager Administrative Department
	Generates Numbered Voucher Slip (NVS) through PCIC Financial Management System (PFMS) and attaches required documents in duplicate copies and submits to the Accounting Division.	None	30 Minutes	HRMO II HRMD
1.11 	Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
(	Checks completeness, validity, and reliability of documents.	None	1 Hour	Bookkeeper III Accounting Division
ä	Reviews computation and makes adjustments, if any.	None	1 Hour	Financial Analyst II Accounting Division



	<ul> <li>1.14Prepares journal entries through the PFMS as follows:</li> <li>Debit - Leave Benefits Payable; and</li> <li>Credit - Cash in Bank - General and Administrative Fund (GAF).</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division
	<ul><li>1.15Approves the DV through the PFMS:</li><li>Box A</li></ul>	None	5 Minutes	<i>Supervisor</i> Originating Department
	• Box B	None	5 Minutes	Division Chief III Accounting Division
	• Box C	None	5 Minutes	Department Manager III Finance Department
	• Box D	None	5 Minutes	Class A Signatory and Class B Signatory
	1.16Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
	1.17Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
	1.18Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
2. Acknowledges receipt of cheque.	2.1. Files DV with complete attachments.	None	10 Minutes	Teller II Treasury Division
	TOTAL	None	1 Day, 7 Hours, and 25 Minutes	



# 3. Processing and Payment of Terminal Leave Benefits

Employees who retire or are separated from service with accumulated leave credits may apply for monetization of their terminal leave benefits subject to submission of required documents.

Office or Division: Human Resource Management Division (HRMD)					
Classification:	Complex				
Type of Transaction:	G2G – Government to Govern				
Who may avail:	Retiring/Resigning Employees				
CHECKLIST	OF REQUIREMENTS	WHERE TO SECURE			
1. Memorandum signif	ying intention to retire/resign (1	Employee-applicant			
2. Certificate of Leave service (3 original co	Credits as of last date of opies)	HRMD			
3. Approved Terminal Service Form No. 6 copies)	Leave Application (Civil Revised 2020) - (3 original	Employee-applicant			
No. 7) – (3 original o 5. Updated Service Re	ance Form (Civil Service Form copies) cord with certification of leave bay (LAWOP) - (3 original	HRMD			
6. Sworn Statement of	Assets, Liabilities and Net the last day in government opies)				
7. Copy of Approved A copies)	ppointment (3 certified true				
<ol> <li>Notice of Salary Adj Step Increment (NO received if the salary not the highest (3 ce</li> </ol>	•				
retirees only) - (1 ori copies)	Ombudsman (applicable for ginal and 2 certified true				
	no pending administrative				
<ul> <li>11. Applicant's authorizated deduct all financial of 12. Affidavit of applicanted criminal investigation</li> </ul>	2 certified true copies) ation (in affidavit form) to obligations (3 original copies) that there is no pending n, or prosecution against 9 – Anti–Graft and Corrupt al copies)	Employee-applicant			
13.GSIS Clearance (for (1 original and 2 cer	<b>3</b> /	Government Service Insurance System (GSIS)			



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits memorandum signifying intention to retire/resign to the HRMD	1.1 Receives memorandum and forwards to the Office of the President for approval.	None	30 Minutes	HRMO II HRMD
	1.2 Approves/dis- approves memorandum.	None	1 Day	<i>President</i> Office of the President
	<ul> <li>1.3 Receives approved/disapprov ed memorandum.</li> <li>If approved, prepares memorandum and provides checklist of required documents.</li> <li>If disapproved, prepares memorandum stating reason/s for disapproval.</li> </ul>	None	1 Hour	HRMO II HRMD
2. Submits all required documents to the HRMD.	2.1. Receives all documents and checks accuracy and completeness of all submitted documents.	None	4 Hours	HRMO II HRMD
	2.2. Prepares schedule of terminal leave benefits and memorandum to release terminal leave benefits.	None	30 Minutes	HRMO II HRMD
	2.3. Reviews memorandum, schedule of terminal leave benefits and other documents.	None	30 Minutes	Division Chief III HRMD



2.4. Approves memorandum and schedule of terminal leave benefits and forwards to HRMO II.	None	30 Minutes	Department Manager III Administrative Department
2.5. Generates NVS through the PFMS and attaches required documents in duplicate copies and submits to the Accounting Division.	None	15 Minutes	HRMO II HRMD
2.6. Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
2.7. Checks completeness, validity, and reliability of documents.	None	1 Hour	Bookkeeper III Accounting Division
2.8. Reviews computation and makes adjustments, if any.	None	1 Hour	Financial Analyst II Accounting Division
<ul> <li>2.9. Prepares journal entries through the PFMS as follows:</li> <li>Debit – Leave Benefits Payable</li> <li>Credit - Cash in Bank- GAF</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division
2.10. Approves DV through the PFMS:			
• Box A	None	5 Minutes	Department Manager III Administrative Department
• Box B	None	5 Minutes	Division Chief III Accounting Division
• Box C	None	5 Minutes	Department Manager III Finance Department
• Box D	None	5 Minutes	Class A Signatory and Class B Signatory



	2.11. Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
	2.12. Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
	2.13. Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
<ol> <li>Acknowledges receipt of cheque.</li> </ol>	3.1. Files DV with complete attachments.	None	10 Minutes	<i>Teller II</i> Treasury Division
	TOTAL	None	3 Days 2 Hours and 20 Minutes	



# 4. Processing of Posthumous Separation

PCIC recognizes the right of legal beneficiaries to the benefits due to deceased employee.

Office or Division:	Human Resource Managem	ont Division		וח	
Classification:	Simple			0)	
	nsaction: G2G – Government to Government				
Who may avail:	Legal Beneficiary of the Em				
	KLIST OF REQUIREMENTS			WHE	ERE TO SECURE
	Death Certificate (3 certified true copies)				
2. Certificate of Leave copies)	Credits as of last date of serv	ice (3 origina	al	HRMD	
	Leave Application (Civil Servior riginal copies)	ce Form No.	6	Employ	/ee-applicant
<ul> <li>original copies)</li> <li>5. Updated Service Rewithout pay (LAWOF</li> <li>6. Sworn Statement of the last day in gover</li> <li>7. Copy of Approved A</li> <li>8. Notice of Salary Adju (NOSI) showing the last appointment is r</li> <li>9. Clearance from the original and 2 certifie</li> <li>10. CSC Certification of 2 certified true copie</li> </ul>	<ul> <li>Revised 2020) - (3 original copies)</li> <li>4. Accomplished Clearance Form (Civil Service Form No. 7) - (3 original copies)</li> <li>5. Updated Service Record with certification of leave of absence without pay (LAWOP) - (3 original copies)</li> <li>6. Sworn Statement of Assets, Liabilities and Net Worth (SALN) as of the last day in government service (3 original copies)</li> <li>7. Copy of Approved Appointment (3 certified true copies)</li> <li>8. Notice of Salary Adjustment (NOSA)/Notice of Step Increment (NOSI) showing the highest salary received if the salary under the last appointment is not the highest (3 certified true copies)</li> </ul>				
12. Affidavit of applicant	that there is no pending crim st him/her (RA No. 3019 – Ar	•			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		CESSI TIME	PERSON RESPONSIBLE
<ol> <li>Notifies the corporation of death of employee.</li> </ol>	1.1. Sends letter extending condolences to the aggrieved legal beneficiary, including instructions on processing posthumous separation benefits.	None	30 M	linutes	HRMO II HRMD



2. Submits all required documents to the HRMD.	2.1. Receives all documents and checks accuracy and completeness of all submitted documents.	None	4 Hours	HRMO II HRMD
	2.2. Prepares schedule of terminal leave benefits and memorandum to release terminal leave benefits.	None	30 Minutes	HRMO II HRMD
	2.3. Reviews memorandum, schedule of terminal leave benefits and other documents.	None	30 Minutes	Division Chief III HRMD
	2.4. Approves memorandum and schedule of terminal leave benefits and forwards to HRMO II.	None	30 Minutes	<i>Department Manager III</i> Administrative Department
	2.5. Generates NVS through the PFMS and attaches required documents in duplicate copies and submits to the Accounting Division.	None	15 Minutes	HRMO II HRMD
	2.6. Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
	2.7. Checks completeness, validity, and reliability of documents.	None	1 Hour	Bookkeeper III Accounting Division
	2.8. Reviews computation and makes adjustments, if any.	None	1 Hour	Financial Analyst II Accounting Division
	<ul> <li>2.9. Prepares journal entries through the PFMS as follows:</li> <li>Debit – Leave Benefits Payable</li> <li>Credit - Cash in Bank- GAF</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division



	<ul><li>2.10. Approves DV through the PFMS:</li><li>Box A</li></ul>	None	5 Minutes	<i>Department Manager III</i> Administrative Department
	• Box B	None	5 Minutes	<i>Division Chief III</i> Accounting Division
	• Box C	None	5 Minutes	<i>Department Manager III</i> Finance Department
	• Box D	None	5 Minutes	VP, SVP or President OVP, OSVP or OP
	2.11. Prints Approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
	2.12. Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
	2.13. Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
3. Acknowledges receipt of cheque.	3.1. Files DV with complete attachment.	None	10 Minutes	<i>Teller II</i> Treasury Division
Т	OTAL	None	2 Days 1 Hour and 20 Minutes	



## **5. Request for Certificate of Employment**

A certificate of employment (COE) contains relevant information about the employee such as but not limited to job title, job description, salary and other compensation, and duration of employment with PCIC. This document may be requested for whatever legal purpose it may serve a current employee.

Office or Division	<b>):</b>	Human Resource Management Division (HRMD)				
Classification:		Simple				
Type of Transact	ion:	G2G – Government t	to Governmer	nt		
Who may avail:		Head Office Employe				
	CHECKLIST OF REQUIREMENTS				E TO SECURE	
1. Request Slip (1	origir	nal copy)		HRMD		
1. Authorization Le 2. Valid ID of the r	etter ( eque:	requesting employee 1 original copy) sting employee (1 Pho entative (1 Photocopy	Employee-applica			
CLIENT STEPS	A	GENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submits the accomplished Request Slip to the HRMD.	a	Receives the accomplished Request Slip.	None	5 Minutes	HRMO II HRMD	
	1.2F	Prepares draft COE.	None	4 Hours	HRMO II HRMD	
	-	Reviews the draft COE.	None	3 Hours	Division Chief III HRMD	
	1.4F	inalizes the COE.	None	20 Minutes	HRMO II HRMD	
	-	Affixes initials to the COE.	None	10 Minutes	Division Chief III HRMD	
	1.65	Signs the COE.	None	10 Minutes	Department Manager III Administrative Department	
	t	Releases the COE to he requesting employee.	None	5 Minutes	HRMO II HRMD	
2. Acknowledges receipt of COE from HRMD.		Files a copy of the COE.	None	10 Minutes	HRMO II HRMD	
	TOT	AL	None	1 Day		



# 6. Request for Service Record

A service record is a record or document of a current employee's employment history that includes employment date, position title/s held, date/s of promotion and salary adjustments.

Office or Division:	Human Resource Ma	Human Resource Management Division (HRMD)					
Classification:	Simple		· · · · ·				
Type of Transaction	: G2G – Government t	o Government	t				
Who may avail:	Head Office Employe						
CHECKL	IST OF REQUIREMENT	S	WHERE T	O SECURE			
1. Request Slip (1 orio	ginal copy)		HRMD				
<ol> <li>Authorization Letter</li> <li>Valid ID of the required</li> </ol>	of requesting employed r (1 original copy) esting employee (1 Phot esentative (1 Photocopy)	ocopy)	Employee-applica	nt			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1. Submits accomplished Request Slip to	1.1 Receives the accomplished Request Slip.	None	5 Minutes	HRMO II HRMD			
the HRMD	1.2 Prepares the draft Service Record.	None	4 Hours	HRMO II HRMD			
	1.3 Reviews the draft Service Record.	None	3 Hours	Division Chief III HRMD			
	1.4 Finalizes the Service Record.	None	20 Minutes	HRMO II HRMD			
	1.5 Affixes initials to the Service Record.	None	10 Minutes	Division Chief III HRMD			
	1.6 Signs the Service Record.	None	10 Minutes	Department Manager III Administrative Department			
	1.7 Releases the Service Record to the requesting employee.	None	5 Minutes	HRMO II HRMD			
2. Acknowledges receipt of Service Record from HRMD.	2.1. Files a copy of the Service Record.	None	10 Minutes	HRMO II HRMD			
ТС	TAL	None	1 Day				



# 7. Request for Authority to Travel Abroad

An employee wishing to travel abroad for personal purpose with no cost to the government, shall obtain an authority to travel abroad from the PCIC.

Office or Division	ce or Division: Human Resource Management Division (HRMD)				
Classification:		Simple			
Type of Transacti	on:	G2G – Government to G	overnment		
Who may avail:		PCIC Employees			
CHEC	KLIS	T OF REQUIREMENTS		WHE	RE TO SECURE
Head Office Appli	cant				
1. Memorandum requesting for authority to travel abroad (1			Employee-A	pplicant	
original copy)					
		tion for leave form (1 orig	inal copy)	HRMD	
		is more than 30 days			
-		nce Form (Civil Service Fo	orm No. 7) -	Employee-A	pplicant
(2 Original Copi					
Regional Office A	pplica	ant			
1. Memorandum re	eques	ting for authority to travel	abroad (1	Employee-A	pplicant
original copy)					
2. Accomplished a	pplica	tion for leave form (1 orig	inal copy)	HRMD/AFD	
3. Endorsement of	Regi	<u>onal Manager II (1 origina</u>	I copy)	PCIC Region	nal Office
Additional If travel/	eave	is more than 30 days			
		nce Form (Civil Service Fo	orm No. 7) -	Employee-A	pplicant
(2 Original Copie	es)				
CLIENT STEPS		AGENCY ACTIONS	FEES TO	PROCESS	PERSON
			BE PAID	ING TIME	RESPONSIBLE
1. Submits		Receives request for	None	5 Minutes	HRMO II HRMD
memorandum		authority to travel.			HRMD
requesting for	12	Reviews completeness	None	15 Minutes	HRMO II
authority to		of documentary	i tono		HRMD
travel with		requirements.			
accomplished					
application for leave form to		<u> </u>			
the HRMD.		Certifies availability of	None	30 Minutes	Division Chief III
		leave credits.			HRMD
	1.4	Endorses leave form to	None	30 Minutes	HRMO II
		the immediate			HRMD
		supervisor for			
		recommendation and/or			
		approval/ disapproval.			
		approval/ disapproval.	None	30 Minutes	Supervisor
	1.5	approval/ disapproval. Approves/ disapproves	None	30 Minutes	Supervisor Originating
	1.5	approval/ disapproval. Approves/ disapproves the application for leave.	None	30 Minutes	Originating
	1.5	approval/ disapproval. Approves/ disapproves	None	30 Minutes	•



	<ul> <li>indicates the number of days approved and forwards to the HRMD.</li> <li>If disapproved, marks the appropriate box and states the reason/s for disapproval and forwards to employee- applicant.</li> </ul>			
	1.6 Prepares Travel Authority.	None	30 Minutes	HRMO II HRMD
	<ol> <li>Affixes initials and forwards documents to the Office of the President for approval.</li> </ol>	None	30 Minutes	Division Chief III HRMD
	1.8 Approves/dis-approves Travel Authority.	None	1 Day	<i>President</i> Office of the President
	1.9 Releases the Travel Authority to the requesting employee.	None	5 Minutes	HRMO II HRMD
2. Acknowledges receipt of Travel Authority from HRMD.	2.1. Files a copy of the travel authority.	None	10 Minutes	HRMO II HRMD
	TOTAL	None	1 Day, 3 Hours, and 5 Minutes	

Note: The schedule of filing shall be at least seven calendar days before date of departure.



### 8. Request for Transportation and Driver Service

Provision of transport services to requesting employees on official travel/business. This describes the procedures employed by the Property Management and General Services Division in response to request for transport service on scheduled date and time using PCIC utility motor vehicle by PCIC officials/employees relative to their official functions.

Office or Division:	Property Management and General Services Division (PMGSD)				
Classification:	Simple				
Type of Transaction:	G2G – Government to Government				
Who may avail:	Head Office Employees				
	ST OF REQUIREMENTS		TO SECURE		
	e Vehicle Form (1 original co ial Business Form (3 photoco		PMGSD		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submits Request to Use Office Vehicle Form to the PMGSD.	1.1. Receives accomplished Request to Use Office Vehicle Form.	None	5 Minutes	Motorpool Supervisor PMGSD	
	<ul> <li>1.2. Checks availability of vehicle and driver.</li> <li>If none, inform the requesting employee immediately.</li> <li>If available, assigns vehicle and driver.</li> </ul>	None	30 Minutes	Motorpool Supervisor PMGSD	
	1.3. Prepares Trip Ticket.	None	30 Minutes	Motorpool Supervisor PMGSD	
	1.4. Approves/disapproves Trip Ticket and forwards to motorpool supervisor.	None	30 Minutes	Division Chief III PMGSD	
	1.5. Informs the requesting employee of the approval/ disapproval.	None	15 Minutes	Motorpool Supervisor PMGSD	
2. Receives information on assigned vehicle and driver, and details of the travel.					
Т	DTAL	None	1 Hour and 50 Minutes		



# 9. Request for Common Use Supplies and Equipment

Provision of necessary logistical requirements needed by the employees that would enable them to deliver their services and implement their programs in a timely, effective, efficient, and adequate manner.

Office or Division:	Property Management and General Services Division (PMGSD)						
Classification:	Simple						
Type of Transaction:	G2G – Government to Government						
Who may avail:	v avail: Head Office Employees						
CHECKLIS	T OF REQUIREMENTS		WHERE T	O SECURE			
1. Approved Requisition copies)	and Issue Slip (RIS) - (3	original	PMGSD				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1. Prepares RIS and submits to the	1.1 Receives RIS.	None	5 Minutes	Supply Officer II PMGSD			
PMGSD.	1.2 Reviews and verifies completeness of information.	None	30 Minutes	Supply Officer II PMGSD			
	1.3 Prepares the item/s to be issued and indicates the quantity. If item/s is/are not available, inform requesting employee to fill out a purchase request (PR) form (refer to HO Internal Service Number 10).	None	1 Hour	Supply Officer II PMGSD			
	1.4 Prepares Inventory Custodian Slip (ICS) and Property Sticker for requested semi-expendable items considered as inventories	None	1 Day	Property Officer III PMGSD			
	1.5 Delivers/issues the requested	None	10 Minutes	Supply Officer II for Supplies and			



		supplies or semi- expendable items.			Property Officer III for Semi-
					Expendables PMGSD
2.	Receives supplies requested and signs in the received by portion of the RIS and/or ICS.	2.1 Files copy of RIS/ICS.	None	10 Minutes	Supply Officer II or Property Officer III PMGSD
	ΤΟΤ	AL	None	1 Day 1 Hour and 55 Minutes	



### 10. Request for Non-Common Use Supplies, Equipment and Common Use Supplies Not Available in Stock

Provision of necessary logistical requirements needed by the employees that would enable them to deliver their services and implement their programs in a timely, effective, efficient, and adequate manner.

Office or Division:	Property Management and General Services Division (PMGSD)						
Classification:	Highly Technical						
Type of Transactio	n: G2G – Government te	G2G – Government to Government					
Who may avail:	Head Office Employe						
	LIST OF REQUIREMENT		WHERE TO SECURE				
	ase Request (2 original co nent Plan (APP) – (1 photo	• •	PMGSD				
3. Technical Specif (2 original copies		tions or Terms of Reference (TOR) –		Requesting Division or Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE			
1. Submits approved Purchase Request (PR)	<ol> <li>1.1 Receives PR and assigns control number.</li> </ol>	None	5 Minutes	Supply Officer II PMGSD			
and Technical Specifications/ TOR to the PMGSD.	<ol> <li>1.2 Records and files copy of the PR for Procurement Monitoring.</li> </ol>	None	5 Minutes	Supply Officer II PMGSD			
	<ol> <li>1.3 Reviews and counterchecks items and budget vis-à-vis approved APP.</li> </ol>	None	30 Minutes	Division Chief III PMGSD			
	1.4 Conducts procurement process in accordance with R.A. 9184 and mode of procurement indicated in the APP:						
	Bidding	None	136 Days	BAC/BAC Secretariat			



Negotiated Small Value Procurement	None	21 Days	BAC/BAC Secretariat or Property Officer III / Division Chief III PMGSD
Negotiated Agency to Agency Procurement	None	21 Days	BAC/BAC Secretariat or Property Officer III / Division Chief III PMGSD
Shopping	None	14 Days	Property Officer III / Supply Officer II PMGSD
1.5 Receives delivered goods vis-à-vis Purchase Order or Contract.	None	3 Hours	Property Officer III / Supply Officer II PMGSD
<ol> <li>Inspects delivered goods or services vis-à-vis Purchase Order or Contract.</li> </ol>	None	1 Hour	Designated Inspector Accounting Division
1.7 Accepts delivered goods or services vis-à-vis Purchase Order or Contract.	None	30 Minutes	Property Officer III / Supply Officer II / Property Inspector PMGSD
1.8 Prepares Inspection and Acceptance Report and other documents needed for the payment of goods.	None	10 Minutes	Supply Officer II PMGSD
1.9 Prepares DV for the payment.	None	5 Minutes	Supply Officer II / Property Officer III PMGSD
1.10 Prepares property sticker and ICS for issuance to end- user.	None	15 Minutes	Supply Officer II / Property Officer III PMGSD
1.11 Delivers/ Issues the requested goods.	None	15 Minutes	Supply Officer II / Property Officer III PMGSD



2.	Receives	2.1. Files copy of	None	10 Minutes	Supply Officer II or
	goods	documents.			Property Officer III
	requested and				PMGSD
	signs in the				
	received by				
	portion of the				
	appropriate				
	document				
	TOTAL FOR SHOPPING		None	14 Days, 6	
			Hours and		
				5 Minutes	
ТС	TOTAL FOR NEGOTIATED SMALL VALUE		None	21 Days, 6	
A	AND NEGOTIATED AGENCY TO AGENCY			Hours and	
	PROC	UREMENT		5 Minutes*	
TOTAL FOR BIDDING		None	136 Days, 6		
				Hours and	
		undar D.A. No. 0404 Coversionant D		5 Minutes*	

\*Service is covered under R.A. No. 9184 Government Procurement Reform Act and its Revised IRR.



## **11. Request for Cash Advance for Official Travel**

Special cash advances granted to permanent officials and employees for travel expenditures including transportation fare, hotel room/lodging expenses, travel allowances, and other incidental expenses incurred in connection with the official travel.

Office or Division: Finance Department					
Classification: Simple					
Type of Transaction:	Type of Transaction: G2G – Government to Government				
Who may avail:	Head Office Employe	Head Office Employees			
CHECKLIST O	F REQUIREMENTS			WHERE 1	TO SECURE
	ginal and 1 photocopy)			ninistrative Departr	
	1 original and 1 photoco			ninistrative Departr	nent
3. Disbursement Vou	cher (DV) - (1 original co		PFN	IS	
CLIENT STEPS	AGENCY ACTIONS	то	ES BE AID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Secures approved Travel Order and Itinerary of Travel.</li> </ol>	<ul> <li>1.1 Approves/Disappr oves Travel Order and Itinerary of Travel.</li> <li>If approved returns to requesting employee for processing of DV.</li> <li>If disapproved, notifies requesting employee.</li> </ul>	None		10 Minutes	Department Manager III Originating Department
2. Generates NVS through PFMS, attaches required	2.1 Receives copy of NVS with required documents.	None		5 Minutes	Bookkeeper III Accounting Division
documents in duplicate copies and submits to the Accounting Division.	2.2Checks completeness, validity, and reliability of documents.	No	one	1 Hour	Bookkeeper III Accounting Division
2.3Reviews computation and makes adjustments, if needed.		No	one	1 Hour	Financial Analyst II Accounting Division



		<ul> <li>2.4 Prepares journal entries through the PFMS as follows:</li> <li>Debit – Advances to Officers and Employees</li> <li>Credit - Cash in Bank-GAF</li> <li>2.5 Approves DV</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division
		through the PFMS			
		• Box A	None	5 Minutes	Department Manager III Originating Department
		• Box B	None	5 Minutes	Division Chief III Accounting Division
		• Box C	None	5 Minutes	Department Manager III Finance Department
		• Box D	None	5 Minutes	Class A Signatory and Class B Signatory
		2.6 Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
		2.7 Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
		2.8 Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
3.	Acknowledges receipt of cheque.	3.1 Files DV with complete attachments.	None	10 Minutes	<i>Teller II</i> Treasury Division
	TO	TAL	None	1 Day 3 Hours and 15 Minutes	



## **12. Request for Cash Advance for Operating Expenditures**

A cash advance granted to duly designated disbursing officers and employees for current operating expenditures or of the activity of the office undertaken when it is impractical to pay the same by check.

Office or Division: Classification: Type of Transaction:	Finance Department Simple G2G – Government to Government			
Who may avail:	Head Office Employees		ι	
	REQUIREMENTS		WHERE TO	O SECURE
<ol> <li>Cash Advance Form photocopy)</li> <li>Disbursement Vouc</li> </ol>	1. Cash Advance Form (1 original copy and 1 photocopy)		g Division	
copy)		PFMS		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Secures approved Cash Advance Form.	1.1 Issues approved Cash Advance Form.	None	5 Minutes	Department Manager III Originating Department
	1.2 Receives approved Cash Advance Form.	None	5 Minutes	Financial Analyst II Accounting Division
2. Generates NVS through PFMS, attaches required documents in	2.1. Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
documents in duplicate copies, and submits to the Accounting Division.	2.2. Checks completeness, validity, and reliability of documents.	None	1 Hour	Bookkeeper III Accounting Division
	2.3. Reviews computations and makes adjustments, if needed.	None	1 Hour	Financial Analyst II Accounting Division



	<ul> <li>2.4. Prepares journal entries through the PFMS as follows:</li> <li>Debit – Advances to Officers and Employees; and</li> <li>Credit – Cash in Bank-GAF</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division
	2.5. Approves DV through the PFMS • Box A	None	5 Minutes	Department Manager III
	• Box B	None	5 Minutes	Originating Department Division Chief III Accounting Division
	• Box C	None	5 Minutes	Department Manager III Finance Department
	• Box D	None	5 Minutes	Class A Signatory and Class B Signatory
	2.6. Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
	2.7. Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
	2.8. Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
3. Acknowledges receipt of cheque.	3.1. Files DV with complete attachments.	None	10 Minutes	<i>Teller II</i> Treasury Division
то	TAL	None	1 Day 3 Hours & 15 Minutes	



## 13. Request for Cash Advance through Petty Cash

Petty cash is a revolving fund granted to disbursing officers primarily to service petty and emergency cash needs of various head office departments/office/units which cannot be paid conveniently by check or are required to be paid immediately.

Office or Division:	Finance Departme	Finance Department			
Classification:	Simple				
Type of Transaction:	G2G – Governmen	t to Governr	ment		
Who may avail:	Head Office Emplo	Head Office Employees			
CHECKLIST OF R	EQUIREMENTS		WHERE TO	SECURE	
<ol> <li>Petty Cash Advance Form (1 original copy)</li> </ol>		Requesting Department through PFMS			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Accomplishes Petty Cash Advance Request through PFMS.	1.1 Approves Petty Cash Advance Request.	None	15 Minutes	Supervisor Originating Department	
2. Prints approved Petty Cash Advance Request and submits to the Treasury Division.	2.1 Releases the requested amount to the employee.	None	15 Minutes	Cashier II Treasury Division	
3. Acknowledges receipt of cash.	3.1 Files petty cash advance form.	None	10 Minutes	Cashier II Treasury Division	
TOT	AL	None	40 Minutes		



## 14. Liquidation of Cash Advance for Official Travel

A cash advance should be settled and liquidated by submitting the details of the expenses incurred supported by proper receipts and other evidence/s of payment.

Office or Division:	Finance Department			
Classification:	Simple			
Type of Transaction:	G2G – Government to	Governm	ent	
Who may avail:	Head Office Employee	S		
CHECKLIST OF F	REQUIREMENTS		WHERE TO	SECURE
1. Travel Order (1 origi	inal and 1 photocopy)	Adminis	trative Department	t
2. Itinerary of Travel (1	original and 1	Adminis	trative Department	t
photocopy)		_		
-	ation (1 original and 1	Request	ing Department	
photocopy)	renee (1 eriginal and 1	A 10 10 10 00 10		<b>N#</b> :
4. Certificate of Appear photocopy)	rance (1 original and 1	Appropri	iate Government C	Jmice
5. Evidence of paymen	nt such as Official	Appropri	ate Government C	Office or Private
Receipt, Ticket, etc.		Compan		
photocopy)			,	
		FEES	PROCESSING	PERSON
CLIENT STEPS	AGENCY ACTIONS	TO BE	TIME	RESPONSIBLE
		PAID		
1. Submits the	1.1 Receives the	None	5 Minutes	Financial Analyst II
approved	approved			Accounting Division
Statement of	Statement of			
Liquidation with the	Liquidation with			
required documents	supporting			
to the Accounting Division.	documents.	Nana	20 Minutes	Financial Analyst II
DIVISION.	1.2 Checks	None	30 Minutes	Financial Analyst II Division Chief III
	completeness			Accounting Division
	and accuracy of documents.			/ loocanting Emilian
	1.3Processes the	None	5 Minutes	Financial Analyst II
	documents. If	NONE	5 Minutes	Accounting Division
	there is a refund			
	Oľ			
	reimbursement,			
	advises the			
	employee and			
	returns the			
	documents.			



S S Li th de re	2. <u>For Refund:</u> Submits the Statement of Liquidation with the required documents and returns unused	2.1 Receives the Statement of Liquidation with supporting documents and accepts the returned amount.	None	5 Minutes	Financial Analyst II Division Chief III Accounting Division
	mount to the reasury Division.	2.2 Issues Official Receipt (OR) and forwards the Statement of Liquidation and required documents to the Accounting Division.	None	10 Minutes	<i>Cashier II</i> Treasury Division
		2.3 Prepares the accounting entry for the liquidation and keep them for submission to COA.	None	10 Minutes	Financial Analyst II Accounting Division
R	<u>for</u> Reimbursement Generates NVS	3.1 Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
at de de	nrough the PFMS, ttaches required ocuments in uplicate copies nd submits to the	3.2 Checks completeness, validity, and reliability of documents.	None	30 Minutes	Bookkeeper III Accounting Division
	ccounting livision.	3.3 Reviews computations and makes adjustments, if needed.	None	30 Minutes	Financial Analyst II Accounting Division
		<ul> <li>3.4 Prepares journal entries through the PFMS as follows:</li> <li>Debit – Travelling Expenses;</li> <li>Credit – Advances to Officers and Employees; and</li> </ul>	None	15 Minutes	Financial Analyst II Accounting Division



	<ul> <li>Credit – Cash in Bank – GAF.</li> </ul>			
	3.5 Approves DV through the PFMS • Box A	None	5 Minutes	Department Manager III
	• Box B	None	5 Minutes	Originating Department Division Chief III Accounting Division
	• Box C	None	5 Minutes	Department Manager III Finance Department
	• Box D	None	5 Minutes	Class A Signatory and Class B Signatory
	3.6 Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
	3.7 Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
	3.8 Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
<i>4.</i> Acknowledges receipt of cheque.	4.1 Files DV with complete attachments.	None	10 Minutes	<i>Teller II</i> Treasury Division
ТОТ	ΓAL	None	1 Day 3 Hours and 10 Minutes	



## 15. Liquidation of Cash Advance for Operating Expenditures

A cash advance should be settled and liquidated by presenting the details of the items paid in accordance with the purpose for which the cash advance was granted and supported by proper receipts and other evidence of payment.

Office or Division:	Finance Departmer	Finance Department				
Classification:	Simple					
Type of Transaction	G2G – Governmen	t to Governm	ient			
Who may avail:	Head Office Employ	yees				
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE		
1. Liquidation Repor photocopy)	1. Liquidation Report (1 original and 1		g Department			
the nature of expe	<ol> <li>Appropriate documents depending on the nature of expenses incurred (1 original and 1 photocopy)</li> </ol>		g Department			
<ol> <li>Evidence of paym invoice, official re- photocopy)</li> </ol>	ent such as sales ceipt (1 original and 1		e Government Offi	ce or Private Company		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submits the approved Liquidation Report with required	1.1 Receives the approved Liquidation Report with the required documents.	None	5 Minutes	Financial Analyst II Accounting Division		
documents to the Accounting Division	1.2Checks completeness and accuracy of documents.	None	30 Minutes	Financial Analyst II Division Chief III Accounting Division		
	1.3 Processes the documents. If there is a refund or reimbursement advises the employee and returns the documents to the employee.	None	5 Minutes	Financial Analyst II Accounting Division		
2. <u>For Refund:</u> Submits the Liquidation Report with the required documents and	2.1. Receives the Liquidation Report with support documents and accepts the returned.	None	5 Minutes	Cashier II Treasury Division		



Issues the Official Receipt and forwards the Liquidation Report with required documents to the Accounting Division. Prepares the accounting entry	None	10 Minutes	<i>Cashier II</i> Treasury Division
accounting entry	None		
for the liquidation and keep them for submission to COA.		10 Minutes	Financial Analyst II Accounting Division
Receives copy of NVS with required documents.	None	5 Minutes	Bookkeeper III Accounting Division
Checks completeness, validity, and reliability of documents.	None	30 Minutes	Bookkeeper III Accounting Division
Reviews computations and makes adjustments, if needed.	None	30 Minutes	Financial Analyst II Accounting Division
Prepares journal entries through the PFMS as follows: • Debit – Expense Account • Credit - Advances to Officers and Employees • Credit - Cash in Bank - GAF	None	15 Minutes	Financial Analyst II Accounting Division
<ul><li>Approves DV</li><li>through the PFMS</li><li>Box A</li></ul>	None	5 Minutes	Department Manager III Originating Department
• Box B	None	5 Minutes	Division Chief III Accounting Division
	for the liquidation and keep them for submission to COA. Receives copy of NVS with required documents. Checks completeness, validity, and reliability of documents. Reviews computations and makes adjustments, if needed. Prepares journal entries through the PFMS as follows: • Debit – Expense Account • Credit - Advances to Officers and Employees • Credit - Cash in Bank - GAF Approves DV through the PFMS • Box A	for the liquidation and keep them for submission to COA. Receives copy of NVS with required documents. Checks completeness, validity, and reliability of documents. Reviews computations and makes adjustments, if needed. Prepares journal entries through the PFMS as follows: • Debit – Expense Account • Credit - Advances to Officers and Employees • Credit - Cash in Bank - GAF Approves DV through the PFMS • Box A None	for the liquidation and keep them for submission to COA. Receives copy of NVS with required documents. Checks completeness, validity, and reliability of documents. Reviews computations and makes adjustments, if needed. Prepares journal entries through the PFMS as follows: • Debit – Expense Account • Credit - Advances to Officers and Employees • Credit - Cash in Bank - GAF Approves DV through the PFMS • Box A None S Minutes



		• Box C	None	5 Minutes	Department Manager III Finance Department
		• Box D	None	5 Minutes	Class A Signatory and Class B Signatory
		3.6. Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller II</i> Treasury Division
		3.7. Secures signature of authorized signatories.	None	1 Day	<i>Teller II</i> Treasury Division
		3.8. Releases cheque to payee.	None	5 Minutes	<i>Teller II</i> Treasury Division
4.	Acknowledges receipt of cheque.	4.1. Files DV with complete attachments.	None	10 Minutes	<i>Teller II</i> Treasury Division
	ТС	DTAL	None	1 Day 3 Hours and 10 Minutes	



## 16. Liquidation of Cash Advance through Petty Cash

A cash advance should be settled and liquidated by presenting the details of the items paid in accordance with the purpose for which the cash advance was granted and supported by proper receipts and other evidence of payment.

Office or Division:	Finance Departme	ent			
Classification:	Simple				
Type of Transaction	: G2G – Governmer	nt to G	overnr	ment	
Who may avail:	Head Office Emplo	oyees			
CHECKLIST (	CHECKLIST OF REQUIREMENTS			WHERE T	O SECURE
	ments depending on th		Admi	nistrative Departm	nent
	s incurred (Canvass S				
	se Request) – (1 origin	al			
and 1 photocopy)					
	ent such as Sales Invo			•	nt Office or Private
	original and 1 photoco		Comp		
	ce Liquidation Form (1				t via PCIC Financial
original and 1 pho		unnli		agement System	
For liquidation of petty cash advance of supplies           1. Inspection and Acceptance Report (2 original Administrative Department				pent	
copies)	ceptance rreport (2 on	ginai	Aum		lent
	ent such as Sales Invo	ice.	Appro	opriate Governme	nt Office or Private
	original and 1 photoco		Comp	•	
	ce Liquidation Form (1				t via PCIC Financial
original and 1 pho				agement System	
CLIENT STEPS	AGENCY ACTIONS		S TO	PROCESSING	PERSON
			PAID	TIME	RESPONSIBLE
1. Liquidates Petty Cash Advance	1.1 Receives and check	INC	ne	5 Minutes	Cashier II and Division Chief III
through the	completeness of				Treasury Division
PFMS and	documents.				
submits required		Na			Cashier II
documents to the	1.2 Settles the	INC	ne	10 Minutes	Treasury Division
Treasury Division	liquidation through the				
and return	PFMS.				
unused amounts	TTMO.				
if any.					
2. For Refund,	2.1. Receives the	Nc	ne	5 Minutes	Cashier II
pays the amount	Liquidation				Treasury Division
to the Treasury	Statement with				
Division.	the required				
	documents and				
	issues the				
	Official Receipt				
TO		No	ne	20 Minutes	
for the refund.		No	no	20 Minutos	



## **17. Request for Claims Fund Transfer**

Claims Fund are funds used for payment of insurance claims/indemnity that are transferred from the Head Office to the Regional Offices as scheduled.

Office or Division	: Finance Departme	ent		
Classification:	Simple			
Type of Transacti	ion: G2G – Governme	nt to Governm	nent	
Who may avail:	Regional Offices			
CHECKLIST (	OF REQUIREMENTS		WHERE TO	SECURE
<ol> <li>Claims Fund R 1 photocopy)</li> </ol>	equest Form (1 original,	Regional C		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits the accomplished Claims Fund Request to the Office of the Senior Vice	3.1 Receives the Claims Fund Request and prepares summary of requests of various regional offices.	s None	30 Minutes	Technical Assistant B OSVP
President (OSVP).	3.2 Signs summary of claims fund transfer requests.	None	30 Minutes	Senior Vice President OSVP
	3.3 Reviews and approves summary of claims fund transfer requests and forwards to Treasury Division.	None	30 Minutes	Department Manager III Finance Department
	3.4 Prepares Bank Authorization Letter for fund transfer.	None	30 Minutes	<i>Division Chief III</i> Treasury Division
	3.5 Signs Authorization Letter.	None	10 Minutes	Department Manager III Finance & Vice President Support Services Group (SSG)
	3.6Transmits Authorization Letter to the bank.	None	30 Minutes	Cashier II Treasury Division
	3.7 Files copy of documents.	None	10 Minutes	<i>Cashier II</i> Treasury Division
	TOTAL	None	2 Hours and 50 Minutes	



## 18. Request for General and Administrative Fund Transfer

General and Administrative Fund (GAF) are funds used for general and administrative expenses, payroll, remittances to BIR and other agencies, financial expenses and other related expenditures that are transferred from the Head Office to the Regional Offices as scheduled.

Office or Division:	Finance Department	Finance Department			
Classification:	Simple	-			
Type of Transactio		to Governm	nent		
Who may avail:	Regional Offices				
CHECKLIST O	<b>REQUIREMENTS</b>		WHERE TO	SECURE	
1. General and Adr	ninistrative Fund	Requestin	g Regional Office		
Request (1 origir	nal and 1 photocopy)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Submits the GAF Request to the Finance Department</li> </ol>	1.1. Receives GAF Request and prepares summary of GAF transfer requests of various regional offices.	None	30 Minutes	Financial Analyst II Accounting Division	
	1.2. Reviews and approves summary of GAF transfer requests and forwards to Treasury Division.	None	30 Minutes	Department Manager III Finance Department	
	1.3. Prepares Bank Authorization Letter for fund transfer.	None	30 Minutes	<i>Division Chief III</i> Treasury Division	
	1.4. Signs Authorization Letter.	None	10 Minutes	Department Manager III Finance & Vice President SSG	
	1.5. Transmits Authorization Letter to the bank.	None	30 Minutes	<i>Cashier</i> II Treasury Division	
	1.6. Files copy of documents.	None	10 Minutes	Cashier II Treasury Division	
T	DTAL	None	2 Hours and 20 Minutes		



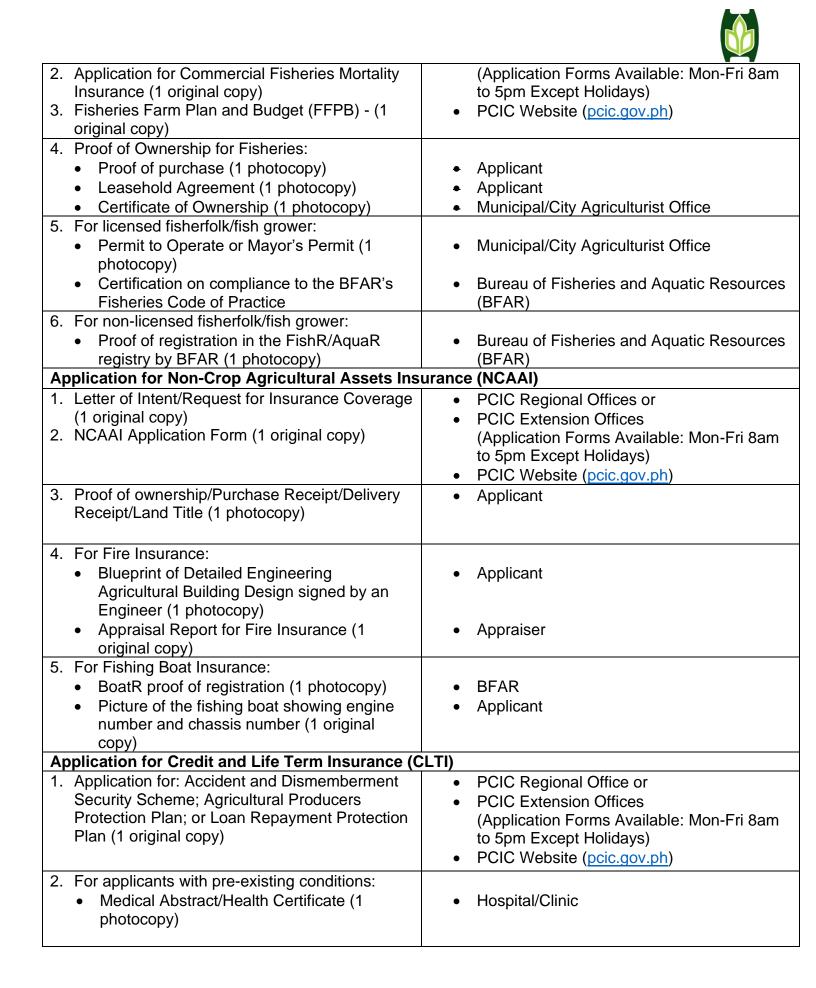
# **Regional Office** External Services



## 1. Application for Insurance Cover

The process of availing oneself of insurance cover where the farmer or fisherfolk submits the required documents and pays premium.

Office or Division:	Marketing and Sales Divisi	on (MSD)
Classification:	Simple	
	G2C – Government to Citiz	zen
Who may avail:	Farmers and Fisherfolk	
Type of Client	Walk-in/Individual	
	REQUIREMENTS	WHERE TO SECURE
	d Corn Crop Insurance	
<ol> <li>Application for Crop I original copy)</li> <li>Individual Farm Plan original copy)</li> </ol>		<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Application Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> <li>PCIC Website (pcic.gov.ph)</li> </ul> </li> </ul>
Application for High-Va	alue Crop (HVC) Insurance	
<ol> <li>Application for High-V original copy)</li> <li>Farm Plan and Budg</li> </ol>	Value Crop Insurance (1 et (FPB) - (1 original copy)	<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Application Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> <li>PCIC Website (pcic.gov.ph)</li> </ul> </li> </ul>
3. Historical damage an	d loss report	Applicant
Application for Livesto		
1. Application for PCIC Insurance (1 original	Livestock Mortality	<ul> <li>PCIC Regional Office or</li> <li>PCIC Extension Offices         <ul> <li>(Application Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> </ul> </li> <li>PCIC Website (pcic.gov.ph)</li> </ul>
2. Proof of Ownership for	or Livestock	
_	attle/Carabao/Horse: ership of Large Animal copy)	<ul> <li>Municipal/City Agriculturist/Treasurer's/ Veterinary's Office</li> </ul>
<ul><li>For Other Livestock:</li><li>Certification from Barangay Chairman</li></ul>	Municipal Agriculturist/ an (1 photocopy)	<ul> <li>Municipal/City Agriculturist Office, Veterinary's Office, or Barangay Office</li> </ul>
-	t or Memorandum Receipt ojects (1 photocopy)	<ul> <li>Originating Agency for the Dispersal Program</li> </ul>
<ol> <li>Application for Fisher original copy)</li> </ol>		<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices</li> </ul>





CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Farmer/fisherfolk submits Application for Insurance, Farm Plan and</li> </ol>	1.1 Receives underwriting documents (UD) and forwards to the Insurance Processor.	None	10 Minutes	<i>Officer of the Day</i> AFD
Budget, and other requirements (as specified in the checklist above) to the PCIC RO/PEO.	<ul> <li>1.2 Checks completeness of UD:</li> <li>If complete, proceeds to processing of application.</li> <li>If incomplete, returns application documents to the client and informs him/her on the lacking data/ documents.</li> </ul>	None	10 Minutes	Insurance Processor MSD
	1.3For Rice and Corn, proceeds to computation of premium as follows:	None	10 Minutes	Insurance Processor MSD
	Rice Insurance	Total Premiu	m = (Amount of C Rate)	Cover x Premium
		(see An	nex for complete	list of fees)
	Corn Insurance		m = (Amount of C Rate)	
		(see An	nex for complete	list of fees)
	1.4For HVC, Livestock (for commercial), NCAAI and Fisheries, IU conducts pre coverage inspection.	None	1 Day	Insurance Underwriter MSD
	1.5 Prepares report with recommended amount of cover and premium as follows:	None	30 Minutes	Insurance Underwriter MSD
	<ul> <li>High-Value Crop Insurance</li> </ul>		m = (Amount of C nentary Stamp Ta	Cover x Premium ax + Premium Tax
		(see An	nex for complete	list of fees)
	Livestock Mortality     Insurance	Total Premiu	m = (Amount of C	
		(see An	nex for complete	list of fees)
	<ul> <li>Non-Crop Agricultural Assets:</li> </ul>			



	<ul> <li>Fire Insurance</li> </ul>			Cover x Premium ix + Premium Tax + ax				
		(see Annex for complete list of fees)						
	<ul> <li>Other Non-Crop Agricultural Asset</li> </ul>		•	Cover x Premium ax + Premium Tax				
	Insurance	,	nex for complete					
	Fisheries			Cover x Premium ax + Premium Tax				
		(see An	nex for complete	e list of fees)				
	Credit and Life Term     Insurance		m = (Amount of ( + Documentary \$	Cover x Premium Stamp Tax				
		(see An	nex for complete	e list of fees)				
	1.6 Reviews IU inspection report and recommends approval/disapproval/ adjustment of amount of cover and premium rate.	None	30 Minutes	Division Chief III MSD				
	<ul> <li>1.7 Approves/disapproves application for insurance:</li> <li>If approved, proceeds to processing of application.</li> <li>If disapproved, returns to MSD for notification of the farmer.</li> </ul>	None	30 Minutes	Regional Manager II ORM				
2. Farmer/fisherfolk pays premium fees and other charges at the Teller I, Administrative and Finance Division (AFD).	2.1 Issues official receipt (OR) and forwards UD to Insurance Processor (IP) for processing.	Total Premium = (Amount of Cover x Premium Rate) + Applicable Taxes	20 Minutes	<i>Teller I</i> AFD				
	2.2 Assigns Certificate of Insurance Cover/Policy Number.	None	10 Minutes	Insurance Processor MSD				



	2.3Logs in the PCIC Automated Business System (PABS) Logbook Module.	None	30 Minutes	Insurance Processor MSD
	2.4 Encodes Insurance Records.	None	30 Minutes	Insurance Processor MSD
	2.5 Verifies encoded data and forwards UD to Chief of MSD.	None	30 Minutes	Insurance Processor MSD
	2.6 Evaluates Insurance Coverage.	None	1 Hour	Division Chief III MSD
	<ul> <li>If found to have deficiencies, instructs Insurance Processor to prepare deficiency letter and transmits to farmer.</li> </ul>			
	<ul> <li>If no deficiencies found, proceeds to printing of UD (steps 3.1).</li> </ul>			
3. Farmer/fisherfolk accomplishes/ addresses deficiencies and submits to PCIC Office.	3.1 Prints UW Processing Sheet, Certificate of Insurance Cover and Acknowledgement Letters.	None	2 Hours	Insurance Processor MSD
	3.2 Signs Certificate of Insurance Cover and Acknowledgement Letters.	None	1 Hour	Division Chief III MSD
	3.3 Issues/transmits Certificate of Insurance Cover/Insurance Policy and Letters to Farmer.	None	1 Day	Insurance Processor MSD
	TOTAL	Total Premium = (Amount of Cover x Premium Rate) + Applicable Taxes	3 Working Days	

ANNEX. Fees to be Paid per Hectare for Rice and Corn Insurance

Covered Crop/Variety/Policy	Amount of Cover Ceiling per Hectare (PhP)	Premium Rate (%)	Fees to be Paid per Hectare (PhP) [1] [2]
RICE			
Commercial Production (Self- Financed Farmers)			
Inbred Varieties	41,000.00	10%	4,100.00
Hybrid Varieties	50,000.00	10%	5,000.00
Commercial Production (Borrowing Farmers)			
Inbred Varieties	67,000.00	10%	6,700.00
Hybrid Varieties	78,000.00	10%	7,800.00
Seed Production			
Inbred Varieties	50,000.00	10%	5,000.00
Hybrid Varieties	120,000.00	10%	12,000.00
CORN			
Commercial Production (Self- Financed Farmers)			
Open-Pollinated Varieties	34,000.00	10%	3,400.00
Hybrid Varieties	50,000.00	10%	5,000.00
Commercial Production (Borrowing Farmers)			
Open-Pollinated Varieties	57,000.00	10%	5,700.00
Hybrid Varieties	61,000.00	10%	6,100.00
Seed Production			
Open-Pollinated Varieties	68,000.00	10%	6,800.00
Hybrid Varieties	76,000.00	10%	7,600.00

Note:

[1] Fees to be paid is equal to the Amount of Cover multiplied by the Premium Rate

[2] No fees to be paid for RSBSA and Agri-Agra Insurance Program

#### ANNEX. Fees to be Paid per Hectare for High-Value Crop Insurance

	Amount of Cover	Tota	al Fees to be	Paid (PHP) pe	er Hectare per	Premium Ra	te [1][2]
Covered Crop/Variety/Policy	Ceiling per Hectare (PhP)		3.00%	4.00%	5.00%	6.00%	7.00%
Abasa Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Abaca Insurance Policy Adlai Insurance Policy	30,000.00	675.00	1,012.50	1,350.00	4,500.00	2,025.00	2,362.50
Anahaw Tree Mortality Insurance Policy	55,000.00	1,237.50	1,856.25	2,475.00	3,093.75	3,712.50	4,331.25
Anthurium Ornamental Insurance Policy	150,000.00	3,375.00	5,062.50	6,750.00	8,437.50	10,125.00	11,812.50
Asparagus Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Avocado Tree Mortality Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Green Beans Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Bamboo Tree Mortality Insurance Policy	35,000.00	787.50	1,181.25	4,050.00	1,968.75	2,362.50	2,756.25
Banana Tree Mortality Insurance Policy	300,000.00	6,750.00	10,125.00	13,500.00	16,875.00	20,250.00	23,625.00
Ampalaya Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Ampalaya seed production Insurance	90,000.00	2,025.00	3,037.50	4,030.00	5,002.50	0,075.00	7,007.50
Policy	120,000.00	2,700.00	4,050.00	5,400.00	6,750.00	8,100.00	9,450.00
Arrowroot Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Black Pepper Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Bell Pepper Insurance Policy	200,000.00	4,500.00	6,750.00	9,000.00	11,250.00	13,500.00	15,750.00
Bottle Gourd (Upo) Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Bottle Gourd (Upo) Seed Production Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Broccoli Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Buri Palm Tree Mortality Insurance Policy	55,000.00	1,237.50	1,856.25	2,475.00	3,093.75	3,712.50	4,331.25
Breadfruit Tree Mortality Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Cabbage Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Cacao Tree Mortality Insurance Policy	94,000.00	2,115.00	3,172.50	4,230.00	5,287.50	6,345.00	7,402.50
Cacao Seedling/Nursery Mortality Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25
Calamansi Tree Mortality Insurance Policy	46,000.00	1,035.00	1,552.50	2,070.00	2,587.50	3,105.00	3,622.50
Carrot Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Cashew Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Cassava Insurance Policy	76,000.00	1,710.00	2,565.00	3,420.00	4,275.00	5,130.00	5,985.00
Castor Bean Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Cauliflower Insurance Policy	85,000.00	1,912.50	2,868.75	3,825.00	4,781.25	5,737.50	6,693.75
Celery Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Chayote Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Chico Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Chinese Pechay Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Chinese Melon Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Citronella Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Chrysantemum Insurance Policy	300,000.00	6,750.00	10,125.00	13,500.00	16,875.00	20,250.00	23,625.00
Coconut Tree Mortality Insurance Policy	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Coconut Seedling/Nursery Mortality	20,000.00	450.00	675.00	900.00	1,125.00	1,350.00	1,575.00
Insurance Policy		1 010 50	2,868.75				
Coffee Tree Mortality Insurance Policy Commercial Tree Mortality Insurance	85,000.00 60,000.00	1,912.50 1,350.00	2,868.75	3,825.00 2,700.00	4,781.25 3,375.00	5,737.50 4,050.00	6,693.75 4,725.00
Policy	-						
Cotton Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Santol Tree Mortality Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Cucumber Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Cucumber Seed Production Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Dishrag Gourd (Patola) Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Dragonfruit Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Durian Tree Mortality Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Eggplant Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00

Amount of Cover Total Fees to be Paid (PHP) per Hectare per Premium						Premium Rat	te <sup>[1][2]</sup>
Covered Crop/Variety/Policy	Ceiling per Hectare (PhP)		3.00%	4.00%	5.00%	6.00%	7.00%
Falcata Tree Mortality Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Garlic Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Gerbera Insurance Policy	150,000.00	3,375.00	5,062.50	6,750.00	8,437.50	10,125.00	11,812.50
Ginger Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Gladioli Insurance Policy	200,000.00	4,500.00	6,750.00	9,000.00	11,250.00	13,500.00	15,750.00
Gmelina Tree Mortality Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Grapevine Mortality Insurance Policy	170,000.00	3,825.00	5,737.50	7,650.00	9,562.50	11,475.00	13,387.50
Guava Tree Mortality Insurance Policy	160,000.00	3,600.00	5,400.00	7,200.00	9,000.00	10,800.00	12,600.00
Honeydew Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Jackfruit (Langka) Tree Mortality Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Jathropa Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Saluyot (Jute) Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Lady's Finger (Okra) Insurance Policy	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Lanzones Tree Mortality Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Lauan (Shorea) Tree Mortality Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Lemon	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Lettuce Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Lima Bean (Patani)	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Mahogany Tree Mortality Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Malabar Spinach (Alugbati) Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25
Malunggay Tree Mortality Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Mango Tree Mortality Insurance Policy	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Mango Fruit Insurance Policy	85,000.00	1,912.50	2,868.75	3,825.00	4,781.25	5,737.50	6,693.75
Mangosteen Tree Mortality Insurance Policy	120,000.00	2,700.00	4,050.00	5,400.00	6,750.00	8,100.00	9,450.00
Terap (Marang) Tree Mortality Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Mungbean Insurance Policy	25,000.00	562.50	843.75	1,125.00	1,406.25	1,687.50	1,968.75
Mushroom Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Mulberry Tree Mortality Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Muskmelon/Cantaloupe Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Mustard Greens (Mustasa) Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Napier Grass Insurance Policy	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Narra Tree Mortality Insurance Policy	80,000.00	1,800.00	2,700.00	3,600.00	4,500.00	5,400.00	6,300.00
Nipa Palm Tree Mortality Insurance Policy	55,000.00	1,237.50	1,856.25	2,475.00	3,093.75	3,712.50	4,331.25
Oil Palm Tree Mortality Insurance Policy	65,000.00	1,462.50	2,193.75	2,925.00	3,656.25	4,387.50	5,118.75
Onion Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Orange	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Pak-choi Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Papaya Tree Mortality Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Paper Tree	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Peanut Insurance Policy	30,000.00	675.00	1,012.50	1,350.00	1,687.50	2,025.00	2,362.50
Pechay Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Pili Tree Mortality Insurance Policy	45,000.00	1,012.50	1,518.75	2,230.00	2,531.25	3,037.50	3,543.75
Pineapple Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Pomelo Tree Mortality Insurance Policy	95,000.00	2,137.50	3,206.25	4,275.00	5,343.75	6,412.50	7,481.25
Radish Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Rambutan Tree Mortality Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Rose Insurance Policy	300,000.00	6,750.00	10,125.00	13,500.00	16,875.00	20,250.00	23,625.00
Rubber Tree Mortality Insurance Policy	55,000.00	1,237.50	1,856.25	2,475.00	3,093.75	3,712.50	4,331.25

	Amount of Cover	Tota	al Fees to be l	Paid (PHP) pe	r Hectare per	Premium Rat	e <sup>[1][2]</sup>
Covered Crop/Variety/Policy	Ceiling per Hectare (PhP)	2.00%	3.00%	4.00%	5.00%	6.00%	7.00%
Sesame (Linga) Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Shallot Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25
Snap Beans	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50
Sorghum Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Soursop (Guyabano) Tree Mortality Insurance Policy	75,000.00	1,687.50	2,531.25	3,375.00	4,218.75	5,062.50	5,906.25
Soybean Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Squash Insurance Policy	65,000.00	1,462.50	2,193.75	2,925.00	3,656.25	4,387.50	5,118.75
Squash Seed Production Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Star apple Tree Mortality Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Strawberry Insurance Policy	95,000.00	2,137.50	3,206.25	4,275.00	5,343.75	6,412.50	7,481.25
String Beans (Sitao) Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Sugarcane Insurance Policy	76,000.00	1,710.00	2,565.00	3,420.00	4,275.00	5,130.00	5,985.00
Sugarcane ratoon	53,000.00	1,192.50	1,788.75	2,385.00	2,981.25	3,577.50	4,173.75
Summer Squash (Zucchini)	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Sunflower Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Sweet Pea/Beans Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Sweet Potato Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Hot Chili/Hot Pepper Insurance Policy	120,000.00	2,700.00	4,050.00	5,400.00	6,750.00	8,100.00	9,450.00
Tobacco Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Tobacco Seedling Insurance Policy	10,000.00	225.00	337.50	450.00	562.50	675.00	787.50
Taro (Gabi) Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
Tiger Grass Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25
Tomato Insurance Policy	120,000.00	2,700.00	4,050.00	5,400.00	6,750.00	8,100.00	9,450.00
Turmeric Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Turnips	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Water Spinach (Upland Kangkong) Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50
Watermelon Insurance Policy	45,000.00	1,012.50	1,518.75	2,025.00	2,531.25	3,037.50	3,543.75
White Potato Insurance Policy	100,000.00	2,250.00	3,375.00	4,500.00	5,625.00	6,750.00	7,875.00
Winged Bean Insurance Policy	60,000.00	1,350.00	2,025.00	2,700.00	3,375.00	4,050.00	4,725.00
Yacon Bean Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Yam Insurance Policy	90,000.00	2,025.00	3,037.50	4,050.00	5,062.50	6,075.00	7,087.50
Yam Bean (Singkamas) Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00
Zuchini/Summer Squash Insurance Policy	70,000.00	1,575.00	2,362.50	3,150.00	3,937.50	4,725.00	5,512.50

Note:

[1] Fees to be paid is equal to the basic premium (Amount of Cover x Premium Rate) plus the cost of the Documentary stamp tax (12.5% of Basic Premium (as per BIR Tax Code Section 184)) subject to premium tax

[2] No fees to be paid for RSBSA, Agri-Agra Insurance Program, and CFITF-CIP for Coconut Insurance

#### ANNEX. Fees to be Paid for Fisheries Insurance Premium Costs

	Amount of				Tota	al Fees to b	e Paid (PHF	) per Policy	y <sup>[1][2]</sup>			
Covered Crop/Variety/Policy	Cover per Policy (PhP)	2.00%	3.00%	4.00%	5.00%	6.00%	7.00%	8.00%	9.00%	10.00%	11.00%	12.00%
Shrimp and Prawn Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50	4,500.00	5,062.50	5,625.00	6,187.50	6,750.00
Milkfish (Bangus) Insurance Policy	44,000.00	990.00	1,485.00	1,980.00	2,475.00	2,970.00	3,465.00	3,960.00	4,455.00	4,950.00	5,445.00	5,940.00
Nile Tilapia Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25	3,150.00	3,543.75	3,937.50	4,331.25	4,725.00
Red Tilapia Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25	3,150.00	3,543.75	3,937.50	4,331.25	4,725.00
Bighead Carp Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25	3,150.00	3,543.75	3,937.50	4,331.25	4,725.00
Green Mussel (Tahong) Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00	3,600.00	4,050.00	4,500.00	4,950.00	5,400.00
Grouper (Lapu-Lapu) Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50	4,500.00	5,062.50	5,625.00	6,187.50	6,750.00
Lobster Insurance Policy	30,000.00	675.00	1,012.50	1,350.00	1,687.50	2,025.00	2,362.50	2,700.00	3,037.50	3,375.00	3,712.50	4,050.00
Rabbitfish (Malaga) Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50	4,500.00	5,062.50	5,625.00	6,187.50	6,750.00
Mudcrab Insurance Policy	32,000.00	720.00	1,080.00	1,440.00	1,800.00	2,160.00	2,520.00	2,880.00	3,240.00	3,600.00	3,960.00	4,320.00
Native Catfish (Hito) Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25	3,150.00	3,543.75	3,937.50	4,331.25	4,725.00
Oyster (Talaba) Insurance Policy	40,000.00	900.00	1,350.00	1,800.00	2,250.00	2,700.00	3,150.00	3,600.00	4,050.00	4,500.00	4,950.00	5,400.00
Pangasius Insurance Policy	35,000.00	787.50	1,181.25	1,575.00	1,968.75	2,362.50	2,756.25	3,150.00	3,543.75	3,937.50	4,331.25	4,725.00
Seacucumber (Balatan) Insurance Policy	65,000.00	1,462.50	2,193.75	2,925.00	3,656.25	4,387.50	5,118.75	5,850.00	6,581.25	7,312.50	8,043.75	8,775.00
Seaweed Insurance Policy	20,000.00	450.00	675.00	900.00	1,125.00	1,350.00	1,575.00	1,800.00	2,025.00	2,250.00	2,475.00	2,700.00
Asian Seabass (Apahap) Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50	4,500.00	5,062.50	5,625.00	6,187.50	6,750.00
Trevally Jack (Talakitok) Insurance Policy	50,000.00	1,125.00	1,687.50	2,250.00	2,812.50	3,375.00	3,937.50	4,500.00	5,062.50	5,625.00	6,187.50	6,750.00

Note:

[1] Fees to be paid is equal to the basic premium (Amount of Cover x Premium Rate) plus the cost of the Documentary stamp tax (12.5% of Basic Premium (as per BIR Tax Code Section 184))

[2] No fees to be paid for RSBSA and Agri-Agra Insurance Program

## ANNEX. Fees to be Paid for Livestock Insurance Premium Costs (Non-Commercial)

Purpose/Type/Age of Animal	Sum Insured (PhP) per head	Premium Rate (%)	Basic Premium Cost (PhP)	Documentary Stamp Tax Cost (PhP)	Fees to be Paid per head (PhP)
Non-Commercial Cattle and Carabac	)		•		•
7 mos to 5 y.o.		4.00	280.00	35.00	315.00
6 Yrs. Old		4.25	297.50	37.19	334.69
7 Yrs. Old		4.50	315.00	39.38	354.38
8 Yrs. Old		4.75	332.50	41.56	374.06
9 Yrs. Old	7,000.00	5.00	350.00	43.75	393.75
10 Yrs. Old		5.25	367.50	45.94	413.44
11 Yrs. Old		5.50	385.00	48.13	433.13
12 Yrs. Old		5.75	402.50	50.31	452.81
13–17 Yrs. Old		5.75	402.50	50.31	452.81
7 mos to 5 y.o.		4.00	360.00	45.00	405.00
6 Yrs. Old		4.25	382.50	47.81	430.31
7 Yrs. Old		4.50	405.00	50.63	455.63
8 Yrs. Old		4.75	427.50	53.44	480.94
9 Yrs. Old	9,000.00	5.00	450.00	56.25	506.25
10 Yrs. Old		5.25	472.50	59.06	531.56
11 Yrs. Old		5.50	495.00	61.88	556.88
12 Yrs. Old		5.75	517.50	64.69	582.19
13–17 Yrs. Old		5.75	517.50	64.69	582.19
7 mos to 5 y.o.		4.50	495.00	61.88	556.88
6 Yrs. Old		4.75	522.50	65.31	587.81
7 Yrs. Old		5.00	550.00	68.75	618.75
8 Yrs. Old		5.25	577.50	72.19	649.69
9 Yrs. Old	11,000.00	5.50	605.00	75.63	680.63
10 Yrs. Old		5.75	632.50	79.06	711.56
11 Yrs. Old		6.00	660.00	82.50	742.50
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA
7 mos to 5 y.o.		5.00	650.00	81.25	731.25
6 Yrs. Old		5.25	682.50	85.31	767.81
7 Yrs. Old		5.50	715.00	89.38	804.38
8 Yrs. Old	_	5.75	747.50	93.44	840.94
9 Yrs. Old	13,000.00	6.00	780.00	97.50	877.50
10 Yrs. Old	_	6.25	812.50	101.56	914.06
11 Yrs. Old		N/A	N/A	N/A	NA
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA
7 mos to 5 y.o.		5.50	1,100.00	137.50	1,237.50
6 Yrs. Old	_	5.75	1,150.00	143.75	1,293.75
7 Yrs. Old		6.00	1,200.00	150.00	1,350.00
8 Yrs. Old		6.25	1,250.00	156.25	1,406.25
9 Yrs. Old	20,000.00	6.50	1,300.00	162.50	1,462.50
10 Yrs. Old		N/A	N/A	N/A	NA
11 Yrs. Old		N/A	N/A	N/A	NA
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA

Purpose/Type/Age of Animal	Sum Insured (PhP) per head	Premium Rate (%)	Basic Premium Cost (PhP)	Documentary Stamp Tax Cost (PhP)	Fees to be Paid per head (PhP)
Non-Commercial Cover Horse			+		•
7 mos to 5 y.o.		4.00	280.00	11.20	291.20
6 Yrs. Old		4.25	297.50	12.64	310.14
7 Yrs. Old		4.50	315.00	14.18	329.18
8 Yrs. Old		4.75	332.50	15.79	348.29
9 Yrs. Old	7,000.00	5.00	350.00	17.50	367.50
10 Yrs. Old		5.25	367.50	19.29	386.79
11 Yrs. Old		5.50	385.00	21.18	406.18
12 Yrs. Old		5.75	402.50	23.14	425.64
13–17 Yrs. Old		5.75	402.50	23.14	425.64
7 mos to 5 y.o.		4.00	360.00	14.40	374.40
6 Yrs. Old		4.25	382.50	16.26	398.76
7 Yrs. Old		4.50	405.00	18.23	423.23
8 Yrs. Old		4.75	427.50	20.31	447.81
9 Yrs. Old	9,000.00	5.00	450.00	22.50	472.50
10 Yrs. Old		5.25	472.50	24.81	497.31
11 Yrs. Old		5.50	495.00	27.23	522.23
12 Yrs. Old		5.75	517.50	29.76	547.26
13–17 Yrs. Old		5.75	517.50	29.76	547.26
7 mos to 5 y.o.		4.50	495.00	22.28	517.28
6 Yrs. Old		4.75	522.50	24.82	547.32
7 Yrs. Old		5.00	550.00	27.50	577.50
8 Yrs. Old		5.25	577.50	30.32	607.82
9 Yrs. Old	11,000.00	5.50	605.00	33.28	638.28
10 Yrs. Old		5.75	632.50	36.37	668.87
11 Yrs. Old		N/A	N/A	N/A	NA
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA
7 mos to 5 y.o.		5.00	650.00	32.50	682.50
6 Yrs. Old		5.25	682.50	35.83	718.33
7 Yrs. Old		5.50	715.00	39.33	754.33
8 Yrs. Old		5.75	747.50	42.98	790.48
9 Yrs. Old	13,000.00	6.00	780.00	46.80	826.80
10 Yrs. Old		N/A	N/A	N/A	NA
11 Yrs. Old		N/A	N/A	N/A	NA
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA
7 mos to 5 y.o.		5.50	1,100.00	60.50	1,160.50
6 Yrs. Old		5.75	1,150.00	66.13	1,216.13
7 Yrs. Old		6.00	1,200.00	72.00	1,272.00
8 Yrs. Old		6.25	1,250.00	78.13	1,328.13
9 Yrs. Old	20,000.00	N/A	N/A	N/A	NA
10 Yrs. Old		N/A	N/A	N/A	NA
11 Yrs. Old		N/A	N/A	N/A	NA
12 Yrs. Old		N/A	N/A	N/A	NA
13–17 Yrs. Old		N/A	N/A	N/A	NA

Purpose/Type/Age of Animal	Sum Insured (PhP) per head	Premium Rate (%)	Basic Premium Cost (PhP)	Documentary Stamp Tax Cost (PhP)	Fees to be Paid per head (PhP)
Non-Commercial Goat and Sheep			•		
Fattener	1,000.00	10.00%	100.00	12.50	112.50
Breeder - Buck	1,000.00	10.00%	100.00	12.50	112.50
Breeder - Buck	2,500.00	10.00%	250.00	31.25	281.25
Breeder - Buck	6,000.00	10.00%	600.00	75.00	675.00
Breeder - Doe	1,000.00	10.00%	100.00	12.50	112.50
Breeder - Doe	2,500.00	10.00%	250.00	31.25	281.25
Breeder - Doe	6,000.00	N/A	N/A	N/A	NA
Non-Commercial Swine			•		•
Fattener					
Fattener - Normal Cover	10,000.00	1.50%	150.00	18.75	168.75
Fattener - Natural Calamities	10,000.00	1.75%	175.00	21.88	196.88
Fattener - Natural Calamities and Other Diseases	10,000.00	3.75%	375.00	46.88	421.88
Breeder					
Breeder - Normal Cover - F1	14,500.00	3.00%	435.00	54.38	489.38
Breeder - Natural Calamities - F1	14,500.00	3.50%	507.50	63.44	570.94
Breeder- Natural Calamities and Other Diseases - F1	14,500.00	5.50%	797.50	99.69	897.19
Breeder - Normal Cover - Parent Stock	34,000.00	3.00%	1,020.00	127.50	1,147.50
Breeder - Natural Calamities - Parent Stock	34,000.00	3.50%	1,190.00	148.75	1,338.75
Breeder- Natural Calamities and Other Diseases - Parent Stock	34,000.00	5.50%	1,870.00	233.75	2,103.75
Breeder - Normal Cover - GP Stock	72,500.00	3.00%	2,175.00	271.88	2,446.88
Breeder - Natural Calamities - GP Stock	72,500.00	3.50%	2,537.50	317.19	2,854.69
Breeder- Natural Calamities and Other Diseases - GP Stock	72,500.00	5.50%	3,987.50	498.44	4,485.94

Note:

[1] Fees to be paid is equal to the basic premium (Amount of Cover x Premium Rate) plus the cost of the Documentary stamp tax (12.5% of Basic Premium (as per BIR Tax Code Section 184)) subject to premium tax

[2] No fees to be paid for RSBSA and Agri-Agra Insurance Program

#### ANNEX. Fees to be Paid for Livestock Insurance Premium Costs (Commercial)

Purpose/Type of Animal	Sum Insured (PhP) per Head	Premium Rate (%)	Basic Premium Cost (PhP)	Documentary Stamp Tax Cost (PhP)	Fees to be Paid per Head [1][2] (PhP)
Commercial Cattle, Cara	bao, and Horse				
		5%	500.00	62.50	562.50
	10,000.00	6%	600.00	75.00	675.00
		7%	700.00	87.50	787.50
		5%	750.00	93.75	843.75
	15,000.00	6%	900.00	112.50	1,012.50
		7%	1,050.00	131.25	1,181.25
		6%	1,200.00	150.00	1,350.00
Cattle Carabaa and	20,000.00	7%	1,400.00	175.00	1,575.00
Cattle, Carabao, and Horse		8%	1,600.00	200.00	1,800.00
Horse		7%	1,750.00	218.75	1,968.75
	25,000.00	8%	2,000.00	250.00	2,250.00
		9%	2,250.00	281.25	2,531.25
		8%	2,400.00	300.00	2,700.00
	30,000.00	9%	2,700.00	337.50	3,037.50
	,	10%	3,000.00	375.00	3,375.00
	50,000.00	10%	5,000.00	625.00	5,625.00
Commercial Goat and Sh	eep				
Breeder	20,000.00	12%	2,400.00	300.00	2,700.00
Fattener	1,000.00	10%	100.00	12.50	112.50
Commercial Swine <sup>[3]</sup>	1,000.00	1070	100100	12.00	
Fattener - Normal Cover	10,000.00	1.50%	150.00	18.75	168.75
Fattener - Natural Calamities	10,000.00	1.75%	175.00	21.88	196.88
Fattener - Natural Calamities and Other Diseases	10,000.00	3.75%	375.00	46.88	421.88
Breeder - Normal Cover - F1	14,500.00	3.00%	435.00	54.38	489.38
Breeder - Natural Calamities - F1	14,500.00	3.50%	507.50	63.44	570.94
Breeder- Natural Calamities and Other Diseases - F1	14,500.00	5.50%	797.50	99.69	897.19
Breeder - Normal Cover - Parent Stock	34,000.00	3.00%	1,020.00	127.50	1,147.50
Breeder - Natural Calamities - Parent Stock	34,000.00	3.50%	1,190.00	148.75	1,338.75
Breeder- Natural Calamities and Other Diseases - Parent Stock	34,000.00	5.50%	1,870.00	233.75	2,103.75

Purpose/Type of Animal	Sum Insured (PhP) per Head	Premium Rate (%)	Basic Premium Cost (PhP)	Documentary Stamp Tax Cost (PhP)	Fees to be Paid per Head [1][2] (PhP)
Breeder - Normal Cover - GP Stock	72,500.00	3.00%	2,175.00	271.88	2,446.88
Breeder - Natural Calamities - GP Stock	72,500.00	3.50%	2,537.50	317.19	2,854.69
Breeder- Natural Calamities and Other Diseases - GP Stock	72,500.00	5.50%	3,987.50	498.44	4,485.94
Commercial Poultry [4]					
Poultry - Broilers under Indepent Grower	100.00	1.29%	1.29	0.16	1.45
Poultry - Broilers under Contract Grower	30.00	1.29%	0.39	0.05	0.44
Poultry - Broilers under Poultry Integrator	70.00	1.29%	0.90	0.11	1.02
Poultry - Pullets/Layers	450.00	2.60%	11.70	1.46	13.16
Quail Pullets/Layers	56.00	2.60%	1.46	0.18	1.64

Note:

[1] Fees to be paid is equal to the basic premium (Amount of Cover x Premium Rate) plus the cost of the

Documentary stamp tax (12.5% of Basic Premium (as per BIR Tax Code Section 184)) subject to premium tax [2] No fees to be paid for RSBSA and Agri-Agra Insurance Program

[3] For commercial swine, sum insured shall be up to 70% of the prevailing market value or same as those in Non-Commercial

[4] For commercial pullets/layers, sum insured shall be up to 70% of the prevailing market value (not to exceed 56 PhP for Quail Pullet Layers)

#### ANNEX. Fees to be Paid for Non-Crop Agricultural Asset Insurance

Insurance Product/Covered Property	Amount of Cover <sup>[1]</sup> (PhP)	Premium Rate (%)	Basic Premium (PhP)	Documentary Stamp Tax (PhP)	Fees to be Paid <sup>[2][3]</sup> (PhP)
FIRE					
Class A Construction	1,000,000.00	0.269%	2,690.00	336.25	3,026.25
Class A - with Typhoon, Flood, and Earthquake Rider Peril	1,000,000.00	0.419%	4,190.00	523.75	4,713.75
Class B Construction	1,000,000.00	0.461%	4,610.00	576.25	5,186.25
Class B - with Typhoon, Flood, and Earthguake Rider Peril	1,000,000.00	0.611%	6,110.00	763.75	6,873.75
PROPERTY FLOATER					
Floater	1,000,000.00	1.00%	10,000.00	1,250.00	11,250.00
COMMERCIAL CAR	· ·				
Third Party Liability					
Light/Medium Trucks	100,000.00	0.61%	610.00	76.25	686.25
Heavy Trucks	100,000.00	1.20%	1,200.00	150.00	1,350.00
Trailers	100,000.00	0.25%	250.00	31.25	281.25
CONSTRUCTION ALL RISK (CAR)/ER	ECTION ALL RISK (EA	R)			
CAR					
Residential Risk	1,000,000.00	0.175%	1,750.00	218.75	1,968.75
High Rise Risk	1,000,000.00	0.250%	2,500.00	312.50	2,812.50
Factory/Warehouse	1,000,000.00	0.300%	3,000.00	375.00	3,375.00
Bridges (Wet Risk)	1,000,000.00	1.000%	10,000.00	1,250.00	11,250.00
EAR	1,000,000.00	0.300%	3,000.00	375.00	3,375.00
FISHING BOAT					
Motorized Fishing Boat	40,000.00	2.00%	800.00	100.00	900.00
Non-Motorized Fishing Boat - Fiberglass	15,000.00	3.00%	450.00	56.25	506.25
Non-Motorized Fishing Boat - Hardwood	10,000.00	3.00%	300.00	37.50	337.50
FISHING GEAR					
FG Attached to Motorized Fishing Boat	100,000.00	2.00%	2,000.00	250.00	2,250.00
FG Attached to Non-Motorized Fishing Boat or Standalone	100,000.00	3.00%	3,000.00	375.00	3,375.00
FISH CAGE/PEN/POND			:		
Fish Cage/Pen/Pond	300,000.00	7.00%	21,000.00	2,625.00	23,625.00

Note:

[1] Sum Insured/Amount of Cover for Fire, Property Floater, Fishing Gear, and Fish Cage/Pen/Pond insurance shall be calculated based on the actual cash/sound value or the replacement value of the property. For CAR/EAR, sum insured shall be the full value of the project upon completion of the construction/erection inclusive of freight, custom duties, erection cost, material or items supplied (Part 3, Sec. 5.7 PCIC NCAAI Operations Manual). Figures shown above are for computation purposes only.

[2] Fees to be paid is equal to the basic premium (Amount of Cover x Premium Rate) plus the cost of the Documentary stamp tax (12.5% of Basic Premium (as per BIR Tax Code Section 184))

[3] No fees to be paid for RSBSA and Agri-Agra Insurance Program

#### ANNEX. Fees to be Paid for Credit and Life Term Insurance

Insurance Product/Plan/Term	Amount of Cover Ceiling per Individual <sup>[1]</sup> (PhP)	Premium Rate (%)	Net Premium <sup>[2]</sup> (PhP)	Documentary Stamp Tax <sup>[2]</sup> (PhP)	Total Fees to be Paid (PhP)
AGRICULTURAL PRODUCERS PROT	ECTION PLAN (AP3)				
AP3	100,000.00	0.750%	750.00	0.00	750.00
ACCIDENT AND DISMEMBERMENT S	CHEME (ADSS)				
		0.100%	100.00	0.00	100.00
		0.200%	200.00	0.00	200.00
Individual and Group Plan	100,000.00	0.300%	300.00	0.00	300.00
		0.400%	400.00	0.00	400.00
	Ē	0.500%	500.00	0.00	500.00
Family Plan	105,000.00	0.357%	375.00	20.00	395.00
LOAN REPAYMENT PROTECTION PL	AN (LRPP)		-		
Term of Loan					
3 months and below	500,000.00	0.375%	1,875.00	50.00	1,925.00
4 months	500,000.00	0.500%	2,500.00	50.00	2,550.00
5 months	500,000.00	0.625%	3,125.00	50.00	3,175.00
6 months	500,000.00	0.750%	3,750.00	50.00	3,800.00
7 months	500,000.00	0.875%	4,375.00	50.00	4,425.00
8 months	500,000.00	1.000%	5,000.00	50.00	5,050.00
9 months	500,000.00	1.125%	5,625.00	50.00	5,675.00
10 months	500,000.00	1.250%	6,250.00	50.00	6,300.00
11 months	500,000.00	1.375%	6,875.00	50.00	6,925.00
12 months	500,000.00	1.500%	7,500.00	50.00	7,550.00

Note:

[1] Amount of cover is up to PhP 50,000.00 for farmers with ages 66 to 80 years old.

[2] Net Premium Cost is inclusive of premium tax and subject to applicable Documentary stamp tax as per BIR Tax Code Section 183.



### 2. Filing and Processing of Notice of Loss/Claim for Indemnity

The process where farmer or fisherfolk files claims for indemnity (CI) or notice of loss (NL) for claims verification and settlement by PCIC. The claimant may file the NL/CI through text message, official E-mail, and official FB Messenger to the PCIC RO/PEO and must contain at least the name and address of the assured, type of insurance, date and cause of loss, provided that a written NL/CI shall be submitted thereafter.

#### Office or Division: Claims and Adjustment Division (CAD) **Classification:** Highly Technical Types of Transaction: G2C - Government to Citizen Who may avail: Farmers Type of Client Walk-in/Individual **CHECKLIST OF REQUIREMENTS** WHERE TO SECURE 1. Claim for Indemnity Form (1 original copy) PCIC Regional Offices or PCIC Extension Offices (Claims Forms Available: Mon-Fri 8am to 5pm Except Holidays) PCIC Website (pcic.gov.ph) For claiming of indemnity payments upon approval of insurance claims 2. Any two (2) of the following Valid IDs of the • Claimant Assured Farmer: o SSS ID Social Security System (SSS) o UMID SSS/Government Service Insurance System (GSIS) Employee's ID / Office ID • Employer • Driver's License Land Transportation Office (LTO) Professional Regulation Commission (PRC) ID o PRC • Passport Department of Foreign Affairs (DFA) Senior Citizen ID Office of Senior Citizen's Affairs (OSCA) COMELEC / Voter's ID / COMELEC Commission on Election (COMELEC) Certification • Philippine Identification (PhilID / ePhilID) Philippine Statistics Authority (PSA) o TIN ID • Bureau of Internal Revenue (BIR) Pag-ibig ID • PAGIBIG Person's With Disability (PWD) ID Mayor's Office/Barangay Office Solo Parent ID Department of Social Welfare Development (DSWD) Pantawid Pamilya Pilipino Program (4Ps) ID o DSWD Barangay ID Barangay Office • Philippine Postal ID Philippine Postal Corporation (PhilPost) o Phil-health ID • Philippine Health Insurance Corporation Local Government Unit (LGU) Issued ID Mayor's Office/LGU

#### A. Rice and Corn Crop Insurance



	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.	Farmer-Claimant submits duly	1.1 Receives CI and forwards to the Claims Processor.	None	10 Minutes	Officer of the Day AFD
	accomplished Claim for Indemnity (CI) using the prescribed form to the Administrative and Finance Division (AFD).	<ul> <li>1.2 Reviews CI for completeness and compliance with rules and regulations.</li> <li>If compliant, proceeds to processing of claim.</li> <li>If not compliant, notifies farmer of non-compliance /denial.</li> </ul>	None	30 Minutes	Claims Processor CAD
		<ul> <li>1.3 Verifies insurance coverage in the PCIC Automated Business System (PABS).</li> <li>If no insurance coverage, prints denial letter and sends to farmer.</li> <li>If with insurance coverage, encodes claims data in PABS Claims Logbook.</li> </ul>	None	1 Day	Claims Processor CAD
		1.4 Assigns Notice of Claims Investigation Assignment (NCIA) to Insurance Adjuster.	None	1 Day and 50 Minutes	Division Chief III CAD
		1.5 Prints NCIA.	None	30 Minutes	Claims Processor CAD
		1.6 Conducts field adjustment and uploads Claims Adjustment and Verification Report (CAVR) to PABS.	None	6 Days	Insurance Adjuster CAD
		1.7 Downloads, counterchecks, and processes CAVR and forwards claims documents to Chief of CAD.	None	1 Day and 3 Hours	Claims Processor CAD
		1.8 Reviews CAVR and indemnity computation in PABS and recommends approval or denial of claims to Regional Manager II (RM).	None	1 Day and 3 Hours	Division Chief III CAD



1.9 RM approves or denies claims.	None	1 Day	Regional Manager II
If denied, instructs			ORM
Claims Processor to			
print and transmit			
denial letter to farme	er.		
<ul> <li>If approved, returns</li> </ul>			
claims documents to	)		
Claims Processor fo	r		
the preparation of D	V.		
1.10 Receives approv	ved None	2 Days	Claims
claims and prepar	es/		Processor
generates DV.			CAD
1.11 Reviews clai	ms None	2 Days and 7	Division Chief III /
documents and certif	ies	Hours	Accounts Analyst
availability of funds			AFD
	and None	1 Hour	Division Chief III
forwards clai			CAD and
documents to teller	for		Regional Manager
cheque preparation.			II
			ORM
1.13 Prints clai	ms None	2 Days and 7	Teller I
documents, DV, chec	lue	Hours	AFD
and acknowledgem	ent		
receipt.			
1.14 Releases indemr	•	1 Hour	Teller I
	and		AFD
requires farmer	to		
acknowledge receipt.			
TOTAL	None	20 Working	
		Days	

## B. High-Value Crop Insurance

Office or Division:	Claims and Adjustment Di	vision (CAD)	
Classification:	Highly Technical		
Types of Transaction:	G2C - Government to Citiz	zen	
Who may avail:	Farmers		
Type of Client	Walk-in/Individual		
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE	
<ol> <li>Notice of Loss (NL) - (1 c</li> <li>Claim for Indemnity (CI)</li> </ol>	original copy)  • PCIC Regional Offices or		
In case of large-scale commercial plantations, the following additional requirements may also be requested by the RO			



2 Droduction and Llas	wast Paparta (1 shataasay)	. ^	red Former	
<ol> <li>Production and Har</li> <li>Loss Records (1 ph</li> </ol>	• ASSI	ured Farmer		
For claiming of inden	nnity payments upon approval	of insura	ance claims	
For claiming of indemnity payments upon approval         5. Any two (2) of the following Valid IDs of the Assured Farmer:         • SSS ID         • UMID         • Employee's ID / Office ID         • Driver's License         • Professional Regulation Commission (PRC) ID         • Passport         • Senior Citizen ID         • COMELEC / Voter's ID / COMELEC         Certification         • Philippine Identification (PhilID / ePhilID)         • TIN ID         • Person's With Disability (PWD) ID         • Solo Parent ID         • Pantawid Pamilya Pilipino Program (4Ps) ID         • Philippine Postal ID         • Philippine Postal ID		<ul> <li>Claimant</li> <li>Social Security System (SSS)</li> <li>SSS/Government Service Insurance System (GSIS)</li> <li>Employer</li> <li>Land Transportation Office (LTO)</li> </ul>		
<ul> <li>Local Governm</li> </ul>	ent Unit (LGU) Issued ID	○ Mayor's Office/LGU		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Farmer-Claimant submits duly accomplished	1.1 Receives NL/CI and forwards to the claims processor.	None	10 Minutes	Officer of the Day AFD
NL/CI using the prescribed form to the Administrative and Finance Division (AFD).	<ul> <li>1.2 Reviews NL/CI for completeness and compliance with rules and regulations.</li> <li>If compliant, proceeds to processing of claim.</li> <li>If not compliant, notifies farmer of non-compliance /denial.</li> </ul>	None	4 Hours	Claims Processor CAD
	<ul> <li>1.3 Verifies insurance coverage in the PCIC Automated Business System (PABS).</li> <li>If no insurance coverage, prints Denial</li> </ul>	None	4 Hours	Claims Processor CAD



		-			
		<ul> <li>Letter and sends to farmer.</li> <li>If with insurance coverage, prepares letter of advice requiring submission of other documents and sends to farmer.</li> </ul>			
		1.4 Assigns Notice of Claims Investigation Assignment (NCIA) to Insurance Adjuster.	None	7 Hours and 40 Minutes	Claims Processor CAD
		1.5 Prints NCIA.	None	10 Minutes	Claims Processor CAD
2.	Farmer-Claimant submits other required claims	2.1 Conducts field adjustment and submits CAVR to Claims Processor.	None	6 Days	Insurance Adjuster CAD
	documents.	2.2 Receives and counterchecks submitted CAVR and forwards claims documents to Chief of CAD.	None	4 Hours	Claims Processor CAD
		2.3Reviews CAVR and indemnity computation (Claims Settlement Sheet). Issues recommendations to the RM.	None	2 Days and 4 Hours	Division Chief III CAD
		<ul> <li>2.4RM approves or denies claim.</li> <li>If denied, instructs Claims Processor to print and transmit denial letter to farmer.</li> <li>If approved, returns claims documents to Claims Processor for the preparation of DV.</li> </ul>	None	1 Day	Regional Manager II ORM
		2.5 Receives approved claims and prepares/ generates other claims documents and DV.	None	2 Days	Claims Processor CAD
		2.6 Reviews claims documents and certifies availability of funds.	None	2 Days and 7 Hours	Division Chief III/ Accounts Analyst AFD
		2.7 Approves DV and forwards claims documents to teller for cheque preparation.	None	1 Hour	Division Chief III CAD and Regional Manager II ORM



2.8Prints claims documents, DV, cheque and acknowledgement receipt.	None	2 Days and 7 Hours	<i>Teller I</i> AFD
2.9 Releases indemnity cheque to farmer and requires farmer to acknowledge receipt.	None	1 Hour	Teller I AFD
TOTAL	None	20 Working Days	

#### C. Livestock Insurance

Office or Division:	Claims and Adjustment Division (CAD)				
Classification:	Highly Technical				
Types of Transaction:	G2C - Government to Citizen				
Who may avail:	Farmers/Livestock Owner				
Type of Client	Walk-in/Individual				
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE			
<ol> <li>Notice of Loss (1 original</li> <li>Loss Report (1 original</li> </ol>		<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Claims Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> <li>PCIC Website (pcic.gov.ph)</li> </ul> </li> </ul>			
the identifying marks	ad animal/s clearly showing (1 original copy) e (if any) - (1 original copy)	Assured Farmer			
<ul> <li>5. If loss is due to diseases:</li> <li>6. Veterinary Disease Report, duly signed by Municipal/City Veterinary's Office or Livestock Technician/Inspector or any private Veterinary Practitioner (1 original copy) If performed:</li> <li>Necropsy / Laboratory Reports duly signed by Municipal/City Veterinary's Office or Livestock Technician/Inspector or any private Veterinary Practitioner (1 original copy)</li> </ul>		<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Claims Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> <li>PCIC Website (pcic.gov.ph)</li> </ul> </li> </ul>			
<ul> <li>7. If loss is not due to dis</li> <li>Notarized affidavit persons (1 original</li> </ul>	sease: of two disinterested I copy)	<ul> <li>Office of the Municipal Mayor or Notary Public</li> </ul>			
<ul> <li>8. Additional for Large Animals Cattle/Carabao/Horse:</li> <li>Livestock Death Certificate (1 original copy)</li> </ul>		<ul> <li>Municipal/City Agriculturist/Veterinary's Office or Private Veterinary Practitioner</li> </ul>			
·		<ul> <li>Municipal/City Agriculturist/ Veterinary's Office</li> </ul>			
10. Additional for poultry:					



-	Weekly loss report (1 original copy)		ured Farmer	
Farm Management Chart/Daily Mortality Chart				
(1 original copy)				
11. Any two (2) Government Issued ID of the		• Go	vernment Agency	issuing valid ID
Assured Farmer				
	nnity payments upon approval			
Assured Farmer:	ollowing Valid IDs of the	Claima	int	
<ul> <li>SSS ID</li> </ul>		- Sooir	al Socurity System	
• UMID			al Security Systen	. ,
			em (GSIS)	
○ Employee's ID	/ Office ID	o Empl	. ,	
<ul> <li>Driver's Licens</li> </ul>			Transportation C	office (LTO)
<ul> <li>Professional R</li> </ul>	egulation Commission (PRC) ID			
<ul> <li>Passport</li> </ul>			artment of Foreign	Affairs (DFA)
<ul> <li>Senior Citizen</li> </ul>		<ul> <li>Office</li> </ul>	e of Senior Citizer	n's Affairs (OSCA)
	oter's ID / COMELEC	o Com	mission on Election	on (COMELEC)
Certification			_	
<ul> <li>Philippine Identification (PhillD / ePhillD)</li> </ul>			ppine Statistics Au	
○ TIN ID			au of Internal Rev	enue (BIR)
<ul> <li>Pag-ibig ID</li> <li>Person's With I</li> </ul>	Disability (PWD) ID	• PAG	-	ov Office
<ul> <li>Solo Parent ID</li> </ul>		<ul> <li>Mayor's Office/Barangay Office</li> <li>Department of Second Walfare</li> </ul>		
		<ul> <li>Department of Social Welfare Development (DSWD)</li> </ul>		
<ul> <li>Pantawid Pami</li> </ul>	lya Pilipino Program (4Ps) ID	<ul> <li>DCVC</li> <li>DSW</li> </ul>		
<ul> <li>Barangay ID</li> </ul>	·) ··· ··· ··· ··· ··· ··· ··· ··· ···		ngay Office	
<ul> <li>Philippine Post</li> </ul>	al ID			oration (PhilPost)
<ul> <li>Phil-health ID</li> </ul>		<ul> <li>Philip</li> </ul>	pine Health Insu	rance Corporation
<ul> <li>Local Governm</li> </ul>	ent Unit (LGU) Issued ID		or's Office/LGU	
		FEES	PROCESSING	PERSON
CLIENT STEPS	AGENCY ACTIONS	TO BE	TIME	RESPONSIBLE
1. Farmer-Claimant	1.1 Receives NL and forwards	PAID	10 Minutes	Officer of the Day
submits duly	to the Claims Processor.	None	TO Minutes	AFD
accomplished	1.2 Reviews NL for	None	7 Hours and	Claims Processor
Notice of Loss	completeness and	None	50 Minutes	CAD
(NL) using the	compliance with rules and			
prescribed form to	regulations.			
the Administrative	• If compliant, proceeds			
and Finance	to processing of claim.			
Division (AFD).	<ul> <li>If not compliant,</li> </ul>			
	notifies farmer of non-			
	compliance /denial.			<b>•</b> •••
	1.3 Verifies insurance	None	1 Day	Claims Processor
	coverage in the PCIC			CAD
	Automated Business			CAD
	5			CAD



	<ul> <li>If no insurance coverage, prints denial letter and forwards to farmer.</li> <li>If with insurance coverage, prepares letter of advice requiring submission of other required documents and transmits to farmer.</li> </ul>			
2. Farmer Claimant Submits Loss Report and other required claims documents to the	2.1 Receives and counterchecks submitted loss report and other claims documents and forwards to Chief of CAD.	None	1 Day	Claims Processor CAD
PCIC RO/PEO.	2.2 Reviews claims documents and indemnity computation (Claims Settlement Sheet). Issues recommendations to the RM.	None	2 Days	Division Chief III CAD
	<ul> <li>2.3RM approves or denies claim.</li> <li>If denied, instructs Claims Processor to print and transmit denial letter to farmer.</li> <li>If approved, returns claims documents to Claims Processor for the preparation of DV.</li> </ul>	None	2 Days	Regional Manager II ORM
	2.4 Receives approved claims and prepares/ generates other claims documents and DV.	None	2 Days	Claims Processor CAD
	2.5 Reviews claims documents and certifies availability of funds.	None	2 Days and 7 Hours	Division Chief III / Accounts Analyst AFD
	2.6 Approves DV and forwards claims documents to teller for cheque preparation.	None	1 Hour	Division Chief III CAD and Regional Manager II ORM
	2.7 Prints claims documents, DV, cheque and acknowledgement receipt.	None	2 Days and 7 Hours	<i>Teller I</i> AFD



2.8 Releases indemnity cheque to farmer and requires farmer to acknowledge receipt	None	1 Hour	Teller I AFD
TOTAL	None	15 Working Days	

#### **D.** Fisheries Insurance

Office or Division:	Claims and Adjustment Divisi	on (CAD)		
Classification:	Highly Technical			
Types of Transaction:				
Who may avail:	Fisherfolk			
Type of Client	Walk-in/Individual			
CHECKLIST O	F REQUIREMENTS		WHERE TO SE	CURE
<ol> <li>Notice of Loss (NL) -</li> <li>Claim for Indemnity (</li> </ol>	Cl) - (1 original copy)	<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Claims forms available: Mon-Fri 8am to 5pm except Holidays)</li> </ul> </li> </ul>		
<ul> <li>Passport</li> <li>Senior Citizen ID</li> <li>COMELEC / Vote Certification</li> <li>Philippine Identifi</li> <li>TIN ID</li> <li>Pag-ibig ID</li> <li>Person's With Distingtion</li> <li>Solo Parent ID</li> <li>Pantawid Pamilyst</li> <li>Barangay ID</li> <li>Philippine Postal</li> <li>Phil-health ID</li> </ul>	Office ID Julation Commission (PRC) ID er's ID / COMELEC fication (PhiIID / ePhiIID) sability (PWD) ID a Pilipino Program (4Ps) ID	<ul> <li>PCIC Website (pcic.gov.ph)</li> <li>I of insurance claims</li> <li>Claimant         <ul> <li>Social Security System (SSS)</li> <li>SSS/Government Service Insurance System (GSIS)</li> <li>Employer</li> <li>Land Transportation Office (LTO)</li> </ul> </li> </ul>		ffice (LTO) Affairs (DFA) a's Affairs (OSCA) on (COMELEC) Athority (PSA) enue (BIR) ay Office Velfare
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



1. Fisherfolk- Claimant submits duly	1.1 Receives NL/CI and forwards to the Claims Processor.	None	10 Minutes	Officer of the Day AFD
accomplished Notice of Loss (NL)/Claim for Indemnity (CI) using the prescribed form.	<ul> <li>1.2 Reviews NL/CI for completeness and compliance with rules and regulations.</li> <li>If compliant, proceeds to processing of claim.</li> <li>If not compliant, notifies farmer of non-compliance /denial.</li> </ul>	None	4 Hours	Claims Processor CAD
	<ul> <li>1.3 Verifies insurance coverage in the PCIC Automated Business System (PABS).</li> <li>If no insurance coverage, prints Denial Letter and sends to fisherfolk.</li> <li>If with insurance coverage, prepares letter of advice requiring submission of other required documents and transmits to fisherfolk.</li> </ul>	None	4 Hours	Claims Processor CAD
	1.4 Assigns Notice of Claims Investigation Assignment (NCIA) to Insurance Adjuster.	None	7 Hours and 40 Minutes	Division Chief III CAD
	1.5 Prints NCIA.	None	10 Minutes	Claims Processor CAD
2. Fisherfolk- Claimant submits other required claims documents.	2.1 Conducts loss assessment/inspection and submits Claims Adjustment and Verification Report (CAVR) to Claims Processor.	None	6 Days	Insurance Adjuster CAD
	2.2 Receives and counterchecks submitted CAVR and forwards claims documents to Chief of CAD.	None	4 Hours	Claims Processor CAD



2.3 Reviews		lone	2 Days and	Division Chief III
(Claims Sheet). Is recomme	y computation Settlement ssues endations to the Manager II		4 Hours	CAD
<ul> <li>2.4 RM approving claim.</li> <li>If deniered Claims print an letter to</li> <li>If approving claims of Claims the preparity of the pr</li></ul>	oves or denies N d, instructs Processor to d transmit denial fisherfolk. ved, returns documents to Processor for paration of ement Voucher	lone	1 Day	Regional Manager II ORM
generate	approved N nd prepares/ s other claims nts and DV.	lone	2 Days	Claims Processor CAD
	claims N Its and certifies ty of funds.	lone	2 Days and 7 Hours	Division Chief III / Accounts Analyst AFD
2.7 Approves forwards documer	s DV and N	lone	1 Hour	Division Chief III CAD and Regional Manager II ORM
DV, chec	,	lone	2 Days and 7 Hours	Teller I AFD
requires	s indemnity No fisherfolk and fisherfolk to edge receipt.	lone	1 Hour	Teller I AFD
TOTAL	N	lone	20 Working Days	



## E. Non-Crop Agricultural Asset Insurance (NCAAI)

Office or Division: Claims and Adjustment Division (CAD)				
Classification:	Highly Technical			
	G2C - Government to Citizen			
Who may avail:	Farmers and Fisherfolk			
Type of Client	Walk-in/Individual			
	F REQUIREMENTS	WHERE TO SECURE		
1. Notice of Loss (NL) /	Claim for Indemnity (CI)/ ort (ILR) /Personal Accident	<ul> <li>PCIC Regional Offices or</li> <li>PCIC Extension Offices         <ul> <li>(Claims Forms Available: Mon-Fri 8am to 5pm Except Holidays)</li> <li>PCIC Website (pcic.gov.ph)</li> </ul> </li> </ul>		
2. Photograph of damage	ged property (1 original copy)	<ul> <li>Assured Farmer//Fisherfolk</li> </ul>		
	ce Report/Motor Vehicle of Loss/Report or Police y)	<ul> <li>Barangay Office (for Barangay Certificate) or Police Station (for Police Report)</li> </ul>		
<ol> <li>Notarized Affidavit of original copy)</li> </ol>	two disinterested persons (1	<ul> <li>Office of the Municipal Mayor or Notary Public</li> </ul>		
<ul><li>5. For Property Floater:</li><li>Official Receipt (1</li></ul>		Assured Farmer/Fisherfolk		
copy)	time Police Report (1 original	Philippine Coast Guard or Police Station – Maritime Group		
	repair (1 original copy)	Assured Fisherfolk		
<ul> <li>7. Any two (2) of the fol Assured Farmer: <ul> <li>SSS ID</li> <li>UMID</li> </ul> </li> <li>Employee's ID / 0</li> <li>Driver's License</li> <li>Professional Reg</li> <li>Passport</li> <li>Senior Citizen ID</li> <li>COMELEC / Vote Certification</li> </ul>	Office ID Julation Commission (PRC) ID er's ID / COMELEC cation (PhiIID / ePhiIID)	<ul> <li>Claimant</li> <li>Social Security System (SSS)</li> <li>SSS/Government Service Insurance System (GSIS)</li> <li>Employer</li> <li>Land Transportation Office (LTO)</li> <li>PRC</li> <li>Department of Foreign Affairs (DFA)</li> <li>Office of Senior Citizen's Affairs (OSCA)</li> <li>Commission on Election (COMELEC)</li> <li>Philippine Statistics Authority (PSA)</li> <li>Bureau of Internal Revenue (BIR)</li> <li>PAGIBIG</li> <li>Mayor's Office/Barangay Office</li> <li>Department of Social Welfare Development (DSWD)</li> </ul>		



<ul> <li>Pantawid Pamilya Pilipino Program (4Ps) ID</li> <li>Barangay ID</li> <li>Philippine Postal ID</li> <li>Phil-health ID</li> <li>Local Government Unit (LGU) Issued ID</li> </ul>		<ul> <li>DSWD</li> <li>Barangay Office</li> <li>Philippine Postal Corporation (PhilPos</li> <li>Philippine Health Insurance Corporation</li> <li>Mayor's Office/LGU</li> </ul>		. , ,
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits duly accomplished Notice of Loss (NL) using the prescribed form to the	<ul> <li>1.1 Receives NL and forwards to the Claims Processor.</li> <li>1.2 Reviews NL for completeness and compliance with rules and regulations.</li> <li>If compliant, proceeds to processing of claim.</li> </ul>	None None	10 Minutes 4 Hours	Officer of the Day AFD Claims Processor CAD
Administrative and Finance Division	If not compliant, notifies     farmer of non-compliance     /denial.			
(AFD).	<ul> <li>1.3 Verifies insurance coverage in the PCIC Automated Business System (PABS).</li> <li>If no insurance coverage, prints Denial Letter and forwards to the client.</li> <li>If with insurance coverage, prepares letter of advice requiring submission of other required documents and transmits to the client.</li> </ul>	None	4 Hours	Claims Processor CAD
	1.4 Assigns Notice of Claims Investigation Assignment (NCIA) to Insurance Adjuster.	None	7 Hours and 40 Minutes	Division Chief III CAD
	1.5 Prints NCIA.	None	10 Minutes	Claims Processor CAD
2. Client submits proof of loss/affidavit of loss and other required	2.1 Conducts claims adjustment and submits Claims Adjustment and Verification Report (CAVR) to Claims Processor.	None	6 Days	Insurance Adjuster CAD
claims documents.	2.2 Receives and counterchecks submitted CAVR and forwards claims documents to Chief of CAD.	None	4 Hours	Claims Processor CAD
	2.3Reviews CAVR and indemnity computation (Claims Settlement Sheet). Issues recommendations to	None	2 Days and 4 Hours	Division Chief III CAD



the Regional Mana (RM).	ger II		
<ul> <li>2.4 RM approves or de</li> <li>If denied, instruct Processor to print transmit denial less</li> <li>If approved, return documents to Class</li> <li>Processor for the preparation of D</li> </ul>	ts Claims t and tter to ms claims aims	1 Day	Regional Manager II ORM
2.5 Receives approved and prepares/ gene other claims docum DV.	claims None erates	2 Days	Claims Processor CAD
2.6 Reviews claims doe and certifies availal funds.		2 Days and 7 Hours	Division Chief III / Accounts Analyst AFD
2.7 Approves DV and f claims documents cheque preparation	o teller for	1 Hour	Division Chief III CAD and Regional Manager II ORM
2.8 Prints claims docur cheque and acknowledgement		2 Days and 7 Hours	Teller I AFD
2.9 Releases indemnity to the client and red client to acknowled	cheque None nuires the	1 Hour	<i>Teller I</i> AFD
TOTAL	None	20 Working Days	

## F. Credit and Life Term Insurance (CLTI)

Office or Division:	Claims and Adjustment Divis	ion (CA	AD)
Classification:	Highly Technical		
Types of Transaction:	G2C - Government to Citizer	ו	
Who may avail:	Farmers and Fisherfolk		
Type of Client	Walk-in/Individual		
CHECKLIST OF	F REQUIREMENTS		WHERE TO SECURE
1. Notice of Claim/Death	n (1 original copy)	•	PCIC Regional Offices or
		•	PCIC Extension Offices
	(Claims Forms Available: Mon-Fri 8am		(Claims Forms Available: Mon-Fri 8am
			to 5pm Except Holidays)
		•	PCIC Website (pcic.gov.ph)



2. Death Certificate (1 original copy)	<ul> <li>Hospital where assured was admitted</li> <li>LGU - Municipal Local Civil Registrar</li> </ul>
3. Medical Abstract and Complete Medical Records (1 original copy)	Hospital where assured was admitted
4. Official Receipt of Medical Expenses (1 original copy)	
5. Marriage Contract (if beneficiary is the legal	LGU - Municipal Local Civil Registrar
spouse) - (1 original or certified photocopy if	Philippine Statistics Authority (PSA)
original was presented)	
6. Birth Certificate of Assured (1 original or certified	
photocopy if original was presented)	
7. Birth Certificate of Beneficiary (if beneficiary is the	
child) - (1 original or certified photocopy if original	
was presented)	
8. Police or Barangay Report, in case of accident (1	Police Station or Barangay Office
original copy)	
9. Government Issued ID (of the insured farmer and	<ul> <li>Any Government Agency issuing valid</li> </ul>
beneficiary) Additional for ADSS as needed	ID
8. Notarized affidavit of two disinterested persons (1	Beneficiary
original copy) in case of death and medical	
reimbursement due to accidents	
Additional for AP3 as needed	
9. Notarized affidavit of two disinterested persons (1	Beneficiary
original copy) in case of medical reimbursement	Denonolary
due to accidents	
Additional for LRPP as needed	
10. Claimant's Statement Form; Loan Ledger (1	Lending Conduit
original copy)	5
11. Promissory Note (1 original copy)	
For claiming of indemnity payments upon approva	l of insurance claims
12. Any two (2) of the following Valid IDs of the	Claimant
Insured Farmer and Beneficiary:	
○ SSS ID	<ul> <li>Social Security System (SSS)</li> </ul>
◦ UMID	<ul> <li>SSS/Government Service Insurance</li> </ul>
	System (GSIS)
<ul> <li>Employee's ID / Office ID</li> </ul>	○ Employer
• Driver's License	<ul> <li>Land Transportation Office (LTO)</li> </ul>
<ul> <li>Professional Regulation Commission (PRC) ID</li> <li>Deservert</li> </ul>	
<ul> <li>Passport</li> <li>Senior Citizen ID</li> </ul>	<ul> <li>Department of Foreign Affairs (DFA)</li> <li>Office of Senior Citizen's Affairs (OSCA)</li> </ul>
<ul> <li>Senior Citizen ID</li> <li>COMELEC / Voter's ID / COMELEC</li> </ul>	<ul> <li>Office of Senior Citizen's Affairs (OSCA)</li> <li>Commission on Election (COMELEC)</li> </ul>
Certification	<ul> <li>Commission on Election (COMELEC)</li> </ul>
<ul> <li>Philippine Identification (PhilID / ePhilID)</li> </ul>	<ul> <li>Philippine Statistics Authority (PSA)</li> </ul>
• TIN ID	<ul> <li>Bureau of Internal Revenue (BIR)</li> </ul>
<ul> <li>Pag-ibig ID</li> </ul>	<ul> <li>PAGIBIG</li> </ul>
<ul> <li>Person's With Disability (PWD) ID</li> </ul>	<ul> <li>Mayor's Office/Barangay Office</li> </ul>
<ul> <li>Solo Parent ID</li> </ul>	
	1



<ul> <li>Pantawid Pamilya Pilipino Program (4Ps) ID</li> <li>Barangay ID</li> <li>Philippine Postal ID</li> <li>Phil-health ID</li> <li>Local Government Unit (LGU) Issued ID</li> </ul>		Deve DSW Barat Philip Mayo	artment of Social W lopment (DSWD) D ngay Office opine Postal Corpo ppine Health Insura or's Office/LGU	pration (PhilPost)
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits duly	1.1 Receives NC and forwards to the Claims Processor.	None	10 Minutes	Officer of the Day AFD
accomplished Notice of Claim (NC) using the prescribed form to the Administrative and Finance Division (AFD).	<ul> <li>1.2 Reviews NC for completeness and compliance with rules and regulations.</li> <li>If compliant, proceeds to processing of claim.</li> <li>If not compliant, notifies farmer of non- compliance /denial.</li> </ul>	None	7 Hours and 50 Minutes	Claims Processor CAD
	<ul> <li>1.3 Verifies insurance coverage in the PCIC Automated Business System (PABS).</li> <li>If no insurance coverage, prints disapproval letter and forwards to the client.</li> <li>If with insurance coverage, prepares letter of advice requiring submission of other required documents and transmits to the client.</li> </ul>	None	1 Day	Claims Processor CAD
	1.4 <b>For LRPP</b> : Prepares NCIA and Conducts claims validation.	None	6 Days	Insurance Adjuster CAD
<ol> <li>Client submits the supporting document within the reglementary period.</li> </ol>	<ul> <li>2.1 Receives and reviews the submitted/required documents.</li> <li>If compensable, computes indemnity for burial benefits (for AP3 and ADS2) and in-hospital medical reimbursement, if any.</li> </ul>	None	4 Hours	Claims Processor CAD



Claim. Issues recommendations to the Regional Manager II (RM).HoursCAD2.3 RM approves or denies claim.None1 DayRegional Manage ORM2.3 RM approves or denies claim.None1 DayRegional Manage ORM.If denied, instructs Claims Processor to print and transmit denial letter to client.None1 DayRegional Manage ORM.If approved, returns claims documents to Claims Processor for the preparation of Disbursement Voucher (DV).None2 DaysClaims Processo CAD2.4 Receives approved claims and prepares/ generates other claims documents and DV.None2 Days and 7 HoursDivision Chief II Accounts Analy AFD2.5 Reviews claims documents and DV.None1 HourDivision Chief II Accounts Analy AFD2.6 Approves DV and forwards claims documents to teller for cheque preparation.None1 HourDivision Chief II Accounts Analy AFD2.7 Prints claims documents, DV, cheque and acknowledgement receipt.None1 HourTeller I AFD2.8 Releases indemnity cheque to the client and requires the client to acknowledge receipt.None1 HourTeller I AFD				
Claim. Issues recommendations to the Regional Manager II (RM).HoursCAD2.3 RM approves or denies claim.None1 DayRegional Manage ORM2.3 RM approves or denies claim.I f denied, instructs Claims Processor to print and transmit denial letter to client.None1 DayRegional Manage ORM. If denied, instructs Claims Processor to print and transmit denial letter to client.None1 DayRegional Manage ORM. If approved, returns claims documents to Claims Processor for the preparation of Disbursement Voucher (DV).None2 DaysClaims Processo CAD2.4 Receives approved claims and prepares/generates other claims documents and DV.None2 Days and 7 HoursDivision Chief II Accounts Analy AFD2.5 Reviews claims documents and DV.None1 HourDivision Chief II Accounts Analy AFD2.6 Approves DV and forwards claims documents to teller for cheque preparation.None1 HourDivision Chief II Accounts Analy AFD2.7 Prints claims documents, DV, cheque and acknowledgement receipt.None1 HourTeller I AFD2.8 Releases indemnity cheque to the client and requires the client to acknowledge receipt.None1 HourTeller I AFD2.8 Releases indemnity cheque to the client and requires the client to acknowledge receipt.None1 HourTeller I AFD	prepares disapproval letter and forwards to			
claim.If denied, instructs Claims Processor to print and transmit denial letter to client.ORM• If approved, returns 	Claim. Issues recommendations to the	None	•	Division Chief III CAD
and prepares/ generates other claims documents and DV.NoneCAD2.5 Reviews claims documents and certifies 	<ul> <li>2.3 RM approves or denies claim.</li> <li>If denied, instructs Claims Processor to print and transmit denial letter to client.</li> <li>If approved, returns claims documents to Claims Processor for the preparation of Disbursement Voucher</li> </ul>	None	1 Day	Regional Manager II ORM
documents and certifies availability of funds.HoursAccounts Analy AFD2.6 Approves DV and forwards claims documents to teller 	and prepares/ generates other claims documents	None	2 Days	Claims Processor CAD
2.6 Approves DV and forwards claims documents to teller for cheque preparation.None1 HourDivision Chief I. CAD 	documents and certifies	None	•	Division Chief III / Accounts Analyst AFD
DV, cheque and acknowledgement receipt.HoursAFD2.8 Releases indemnity cheque to the client and requires the client to acknowledge receipt.None1 HourTeller I AFD	2.6 Approves DV and forwards claims documents to teller	None	1 Hour	and Regional Manager II
cheque to the client and requires the client to acknowledge receipt.     AFD	DV, cheque and	None	-	
TOTAL None 20 Working	cheque to the client and requires the client to acknowledge receipt.	None	1 Hour	
Days	TOTAL	None	20 Working Days	

Note: In case of widespread calamity or outbreak of pests and diseases or Regional Office receives an average of 500 or more CI's per month, the time or duration of claims processing shall be extended. The Regional Office shall inform the client about the extension.



## 3. Reconsideration of Claims

If an assured farmer is not satisfied with the Corporation's decision on claims payment, the assured can file a request for reconsideration in writing at three levels: first with the PCIC RO, next with the PCIC President, and then lastly with the PCIC Board. However, the RO can elevate the same immediately to the PCIC President if the case for reconsideration is determined to be novel, difficult, or controversial.

Office or Division:		Claims and Adjustment Division (CAD)					
Classification:		Highly Technical					
Type of Transaction:		G2C – Government to Citizen					
Who may avail:		Farmer and Fisherfolk					
		REQUIREMENTS			WHERE TO	SECURE	
1. Letter request for re	cons	ideration (1 original cop	oy)	Clair	mant		
CLIENT STEPS	A	GENCY ACTIONS	FEES BE P		PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Files the letter request for reconsideration to the PCIC Regional Office.</li> </ol>		Receives the letter request for reconsideration, stamps the date of receipt, records the receipt in the logbook for incoming letters.	Nor	ne	10 Minutes	<i>Officer of the Day</i> AFD	
		Retrieves the records from the PCIC Automated Business System (PABS) and other necessary documents and forwards to the Chief of CAD.	Noi	ne	2 Days	Claims Processor CAD	
		<ul> <li>Reviews the request for reconsideration.</li> <li>If the request has merit, endorses the claims documents to the Regional Manager II.</li> <li>If the request does not have merit, instructs the Claims Processor to prepare a letter</li> </ul>	Nor	ne	2 Days	Division Chief III CAD	



			1	
	sustaining the denial of the claim, for endorsement to the Regional Manager II. If the request warrants validation, assigns it to the Insurance Adjuster.			
	.4. Conducts adjustment/verificatio n of claims and prepares Validation Report	None	7 Days	Insurance Adjuster CAD
1.	.5. Reviews Validation Report and issues recommendation.	None	1 Day	Division Chief III CAD
1.	.6. Evaluates the documents, approves/denies the request for reconsideration and forwards to claims processor.	None	1 Day	Regional Manager II ORM
1.	<ul> <li>.7. Receives approved/denied request for reconsideration.</li> <li>If approved, proceeds to processing of claims payment (proceed to Item 1.8).</li> <li>If denied, prepares and sends denial letter explaining the reason/s for sustaining the denial.</li> </ul>	None	1 Day	Claims Processor CAD
1.	.8. Receives approved claims and prepares/ generates other claims documents.	None	1 Day	Claims Processor CAD
1.	.9. Generates NVS through the PFMS	None	50 Minutes	Accounts Analyst II AFD



	and attaches required			
	documents and			
	submits to the Chief			
	of AFD.			
	1.10.Receives NVS and	None	1 Day	Division Chief III
	checks		,	AFD
	completeness,			
	validity, and reliability			
	of documents,			
	reviews			
	computations, and			
	makes adjustments, if			
	needed.			
	1.11.Prepares journal	None	3 Hours	Accounts Analyst II
	entries through the	NONE	5110015	AFD
	PFMS.			711 0
	1.12.Approves DV through			
	the PFMS.			
		None	2 Hours	Division Chief III
	• Box A	None		CAD
				OND
	Dav. D	None	2 Hours	
	• Box B	None		Division Chief III
				AFD
		None	2 Hours	
	• Box C	None	2 Hours	Division Chief III
				AFD
		None	2 Hours	Division Chief III
	• Box D	NONE	2110015	CAD
				and
				Regional Manager
				ORM
	1.13.Prints approved DV	None	4 Hours	Teller I
	and cheque for			AFD
	signature.			
	1.14.Secures signature of	None	1 Day	Teller I
	authorized		,	AFD
	signatories.			
	1.15.Releases cheque to	None	1 Day	Teller I
	the payee.			AFD
2. Acknowledges				
receipt of cheque.				
	TOTAL	None	20 Days	
	le of filing chall be within 20 cal			

\*Note: The schedule of filing shall be within 30 calendar days from the receipt of either indemnity payment or the denial letter.



## 4. Processing of Death Benefit Claim

The beneficiary of the assured farmer under Rice, Corn, and HVC-Coconut Insurance, who dies within the Term of Insurance Coverage shall be given a death benefit of Ten Thousand Pesos (PhP 10,000) or as may be determined by management and approved by the Board of Directors, provided the said farmer is not more the 80 years of age at the inception of the insurance.

O	fice or Division:	vision: Claims and Adjustment Division (CAD)					
CI	assification:	Highly Technical					
Ту	vpe of Transactio	on: G2C – Government to Ci	izen				
W	ho may avail:	Beneficiary of Assured Fa	rmer				
		T OF REQUIREMENTS		WHERE TO SE	CURE		
		e (1 certified true copy)	PSA				
2.		of the assured farmer (1					
	certified true cop						
3.		of the beneficiary (1 certified					
1	true copy)	vit of two disinterested	Ponoficion	,			
4.			Beneficiary	/			
		g to the identity of the					
		eded (1 original copy)					
		ficiary is the legal spouse of	PSA				
		arriage (1 certified true copy)	P5A				
<ul> <li>Additional in case of two or more heirs</li> <li>6. Notarized special power of attorney (SPA) assigning authority to claim death benefit (1 original copy)</li> </ul>		Beneficiary	/				
	original copy)						
C	original copy)	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
	LIENT STEPS	<ol> <li>Receives documents and stamps the date of receipt, affixes initials, and forwards to Claims</li> </ol>	<b>BE PAID</b>				
	Submits required documents to the PCIC RO.	<ol> <li>Receives documents and stamps the date of receipt, affixes initials,</li> </ol>	<b>BE PAID</b>	TIME	<b>RESPONSIBLE</b> Officer of the Day		



	beneficiary stating reason/s for denial.			
1.4.	<ul> <li>Reviews the request for reconsideration.</li> <li>If the request has merit, endorses the claims documents to the Regional Manager II.</li> <li>If the request does not have merit, instructs the Claims Processor to prepare a letter sustaining the denial of the claim, for endorsement to the Regional Manager II.</li> <li>If the request warrants validation, assigns it to the Insurance Adjuster</li> </ul>	None	2 Days	Division Chief III CAD
1.5.	Verifies if farmer's crop is still standing and prepares validation report.	None	7 Days	Insurance Adjuster CAD
1.6.	Reviews validation report and endorses recommendation to the Regional Manager II.	None	1 Hour	Division Chief III CAD
	<ul> <li>Reviews and approves/disapproves death benefit.</li> <li>If approved, proceeds to Item 1.8.</li> <li>If disapproved, returns to Claims Processor for preparation of denial letter.</li> </ul>	None	1 Hour	Regional Manager II ORM
1.8.	Receives approved claims and prepares/ generates other claims documents.	None	1 Day	Claims Processor CAD
1.9.	Generates NVS through the PFMS and attaches required documents and submits to the Chief of AFD.	None	50 Minutes	Accounts Analyst II AFD



	1.10.Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.	None	1 Day	Division Chief III AFD
	1.11.Prepares journal entries through the PFMS.	None	3 Hours	Accounts Analyst II AFD
	1.12.Approves DV through the PFMS.			
	• Box A	None	2 Hours	Division Chief III CAD
	• Box B	None	2 Hours	Division Chief III AFD
	• Box C	None	2 Hours	Division Chief III AFD
	• Box D	None	2 Hours	Division Chief III CAD and Regional Manager II ORM
	1.13.Prints approved DV and cheque for signature.	None	4 Hours	<i>Teller I</i> AFD
	1.14.Secures signature of authorized signatories.	None	1 Day	<i>Teller I</i> AFD
	1.15.Releases cheque to the payee.	None	1 Day	<i>Teller I</i> AFD
2. Acknowledges receipt of cheque.				
	TOTAL	None	15 Days and 3 Hours	

\*Note: The schedule of filing shall be within 30 days from the death of the assured farmer.



## 5. Processing of Burial Benefit Claim

Beneficiary/Legal heirs of deceased insured farmers/fisherfolk may claim a burial benefit for applicable lines (CLTI).

Office or Division:		Claims and Adjustment Division (CAD)					
Classification:		Complex					
Type of Transaction	n:	G2C – Government to Citizen					
Who may avail:		Beneficiary/Heir of Insu	red Fa	rmer/F	isherfolk		
CHECKLI		REQUIREMENTS			WHERE TO	SECURE	
<ol> <li>Death Certificate (1 certified true copy)</li> <li>Birth Certificate of the assured farmer (1 certified true copy)</li> <li>Birth Certificate of the beneficiary (if beneficiary is the child of the assured) - (1 certified true copy)</li> </ol>					Claimant/Municip strar	al/Local/City Civil	
<ol> <li>Duly Sworn Affidates attesting to the D copy)</li> </ol>	avit of eath c	two disinterested perso of the insured. (1 original is the legal spouse of t	n I	Claim	nant		
		(1 certified photocopy)		PSA			
			FFF	S TO	PROCESSING	PERSON	
CLIENT STEPS		AGENCY ACTIONS			TIME	RESPONSIBLE	
<ol> <li>Submits required documents to the PCIC RO/PEOs</li> </ol>		1.1. Receives documents and stamps or writes down date of receipt, affixes initials, and forwards to Claims Processor.	None		10 Minutes	<i>Officer of the Day</i> Regional Office	
	1	.2. Checks completeness of documents.	Nc	one	30 Minutes	Claims Processor CAD	
	1	.3. Encodes all data in the PCIC Automated Business System (PABS).	None		30 Minutes	Claims Processor CAD	
	1	I.4. Evaluates and forwards claim documents to Regional Manager II.	Nc	one	4 Hours	Division Chief III CAD	



1.5	<ol> <li>Reviews and approves/disappr oves burial benefit and returns to Claims Processor.</li> </ol>	None	1 Hour	Regional Manager II
1.6	<ol> <li>Receives approved claims and prepares/ generates other claims documents and DV.</li> </ol>	None	1 Day	Claims Processor CAD
1.7	7. Generates NVS through the PFMS and attaches required documents and submits to the Chief of AFD.	None	50 Minutes	Accounts Analyst II AFD
1.8	<ol> <li>Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.</li> </ol>	None	1 Day	Division Chief III AFD
	<ol> <li>Prepares journal entries through the PFMS.</li> </ol>	None	3 Hours	Accounts Analyst II AFD
1.1	0.Approves DV			
	through the PFMS.			
	• Box A	None	2 Hours	Division Chief III CAD
	• Box B	None	2 Hours	Division Chief III AFD
	• Box C	None	2 Hours	Division Chief III AFD
	• Box D	None	2 Hours	Division Chief III CAD



				and
				Regional Manager
				// ORM
			4.1.1	
	1.11.Prints approved	None	4 Hours	Teller I
	DV and cheque for signature.			AFD
	<b>o</b>	Niewe		Tollor
	1.12.Secures signature	None	1 Day	<i>Teller I</i> AFD
	of authorized			AFD
	signatories.			
	1.13.Releases cheque	None	1 Day	Teller I
	to the payee.			AFD
2. Receives and				
acknowledges receipt				
of cheque.				
тот	TOTAL		6 Days and 6	
			Hours	

\*Note: The schedule of filing shall be within 30 days from the death of the assured farmer.



## 6. Request for Certificate of Employment for Retired/Resigned Employee

A certificate of employment (COE) contains relevant information about the employee such as but not limited to job title, job description, salary and other compensation, and duration of employment with PCIC. This document may be requested for whatever legal purpose it may serve a former employee.

Office or Division	ו:	Administrative and Finance Division (AFD)						
Classification:		Simple						
Type of Transact	ion:	G2C – Government t	o Citizen					
Who may avail:		Former Regional Office Employees						
	CHE	CKLIST OF REQUIRE	MENTS		V	VHERE TO SECURE		
1. Request Slip (1	origir	nal copy)			AF	D		
1. Authorization Le 2. Valid ID of the r	etter ( eques	requesting retired/re 1 original copy) sting former employee entative (1 Photocopy	e (1 Photocop )	-		rmer employee- plicant		
CLIENT STEPS	A	GENCY ACTIONS	FEES TO	PROCESSIN	١G	PERSON		
			BE PAID	TIME		RESPONSIBLE		
1. Submits the accomplished request slip to the AFD.	a	Receives the accomplished Request Slip.	None	5 Minutes		Administrative Services Officer III (ASO III) AFD		
		Prepares the draft COE.	None	4 Hours		ASO III AFD		
	C 1.4 F	Reviews the draft COE.	None	3 Hours		Division Chief III AFD		
		inalizes the draft	None	20 Minutes	5	ASO III AFD		
		Affixes initial to the COE.	None	10 Minutes	6	Division Chief III AFD		
	1.65	Signs the COE.	None	10 Minutes	6	Regional Manager II ORM		
	t	Releases the COE to he requesting former employee.	None	5 Minutes		ASO III AFD		
2. Acknowledges receipt of Certificate of Employment.	(	Files a copy of the COE.	None	10 Minutes	6	ASO III AFD		
	TOT	AL	None	1 Day				



## 7. Request for Service Record of Retired/Resigned Employee

A service record is a record or document of a former employee's employment history that includes employment date, position title/s held, date/s of promotion and salary adjustments.

Office or Division:	Administrative and F	Administrative and Finance Division (AFD)						
Classification:	Simple							
Type of Transaction		G2C – Government to Citizen						
Who may avail:		Former Regional Office Employees						
CHECKLIST OF REQUIREMENTS WHERE TO SE								
1. Request Slip (1 ori	ginal copy)			AFD				
<ol> <li>Authorization Lette</li> <li>Valid ID of the required</li> </ol>	of requesting retired/re r (1 original copy) lesting former employee esentative (1 Photocopy	(1 Photocopy)	-	Forme applic	er employee- ant			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES: TIME		PERSON RESPONSIBLE			
1. Submits the accomplished Request Slip to	1.1 Receives the accomplished Request Slip.	None	5 Minut	:es	ASO III AFD			
the AFD.	1.2 Prepares the draft Service Record.	None	4 Hours		ASO III AFD			
	1.3 Reviews the draft Service Record.	None	3 Hou	rs	Division Chief III AFD			
	1.4 Finalizes the draft Service Record.	None	20 Minu	tes	ASO III AFD			
	1.5 Affixes initial to the Service Record.	None	10 Minu	tes	Division Chief III AFD			
	1.6 Signs the Service Record.	None	10 Minu	tes	<i>Regional Manager II</i> ORM			
	1.7 Releases the Service Record to the requesting former employee.	None	5 Minutes		ASO III AFD			
<ol> <li>Acknowledges receipt of Service Record.</li> </ol>	2.1. Files a copy of the Service Record.	None	10 Minu	tes	ASO III AFD			
ТО	TAL	None	1 Day	/				



## 8. PCIC Procedure on Handling of Feedback and Complaint

#### Background

Republic Act No. 11032 also known as Ease of Doing Business and Efficient Government Service Delivery Act of 2018, amending Republic Act No. 9485 or the Anti-Red Tape Act of 2007, mandates all government offices and agencies including local government units (LGUs), Government-Owned and Controlled Corporations (GOCCs) and other government instrumentalities to provide services covering business and nonbusiness related transactions, which adopts simplified procedures that will reduce red tape and expedite transactions in government.

#### Procedure on Handling of Feedback and Complaint

After a series of TWG meetings and presentations to the PCIC CART, the following procedures on handling of feedback and complaint were approved.

#### 8.1 Feedback Procedure (Head Office)

AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	Responsible Person
1. Receives the feedback and prepares response letter using pro-forma template.	None	2 hours	Head Office – Internal Communications Processor (HO-ICP)
2. Forwards to Department Manager, BDMD for review and approval.	None		
3. Reviews and approves the response letter to feedback.	None	4 hours	Department Manager, BDMD
4. Returns to HO-ICP for transmittal.	None		
5. Transmits the response letter to the client and files a copy accordingly.	None	2 hours	Head Office – Internal Communications Processor (HO-ICP)
<ol> <li>Prepares monthly monitoring report for all feedback received.</li> </ol>	None		
TOTAL	None	1 working day	



## 8.2 Feedback Procedure (Regional Office)

	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	Responsible Person
1.	Receives the feedback and prepares response letter using pro-forma template.	None	2 hours	Regional Office – Internal Communications Processor (RO-
2.	Forwards to Chief, Administrative and Finance Division for review and approval.	None		ICP)
3.	Reviews and approves the response letter to feedback.	None	4 hours	Chief, Administrative and Finance Division
4.	Returns to RO-ICP for transmittal.	None		
5.	Transmits the response letter to the client and files a copy accordingly and furnishes Business Development and Marketing Department.	None	2 hours	Regional Office – Internal Communications Processor (RO- ICP)
6.	Prepares monthly monitoring report for all feedback received.	None		
	TOTAL	None	1 working day	

## 8.3 Complaint Handling (Head Office)

	Activity	FEES TO BE PAID	PROCESSING TIME	Responsible Person
1.	Receives and logs complaint and forwards to the Office of the President.	None	4 Hours	Records Officer
2.	Receives and forwards to President for instructions.	None		Secretary, Office of the President
3.	Examines the merits of the complaint and instructs Secretary to forward the complaint to Head Office - Internal Communications Processor (HO-ICP).	None	4 Hours	President
4.	Receives and records the complaint.	None	4 Hours	Head Office - Internal Communications



5. Notifies	the complainant	Processor (HO-
regardir	ng the receipt of	ICP)
complai		
5.1. lf p	ersonally delivered:	
a.		
	– notifies the	
	complainant regarding	
	receipt of complaint via	
	available contact	
	information (i.e.	
	telephone, cellphone,	
	Facebook, or E-mail,	
	etc.)	
b.	Without contact	
	information – Checks in	
	PCIC Automated	
	Business System	
	(PABS) record for	
	possible identification	
	and retrieval of contact	
	information; notifies the	
	complainant re receipt of	
	complaint	
5.2. lf	endorsed by other	
Age	encies:	
a.	With contact information	
	- notifies the endorsing	
	agency and complainant	
	regarding receipt of	
	complaint via available	
	contact information	
b.	Without contact	
	information - checks in	
	PCIC Automated	
	Business System	
	(PABS) record for	
	possible identification	
	and retrieval of contact	
	information.	
	If there are no means to	
identify	any contact information of	



<ul> <li>the complainant, the HO-ICP informs the endorsing agency that the response letter shall be sent to them.</li> <li>6. Forwards complaint to Department Manager, Business</li> </ul>			
Development and Marketing Department (BDMD).			
<ol> <li>Examines the merits of the complaint and instructs HO-ICP to forward the complaint to concerned unit.</li> </ol>	None	4 Hours	Department Manager, BDMD
<ul> <li>8. Transmits complaint to concerned unit</li> <li>8.1. If Head Office– forwards to concerned department head</li> <li>8.2. If Regional Office – emails the to the Regional Office (see 6.4 Regional Office Procedure on Complaints Handling)</li> </ul>	None	4 Hours	Head Office - Internal Communications Processor (HO- ICP)
<ul> <li>9. Receives and examines the merits of the complaint and prepares response letter.</li> <li>10. Forwards to Office of the President for review and approval.</li> </ul>	None	4 Days	Concerned Department
11. Receives and forwards response letter to President.	None	1 Day and 4 Hours	Secretary, Office of the President
<ul> <li>12. Reviews and approves the response letter.</li> <li>12.1. With revision – returns to concerned Department for correction.</li> <li>12.2. Without revision – forwards to Head Office - Internal Communications Processor (HO-ICP) for proper action.</li> </ul>	None		President



			-
NOTE: Additional consultation with other Head Office Departments may be required depending on the nature of complaint.			
<ul> <li>13. Receives approved response letter.</li> <li>14. Prepares endorsement letter and forwards to President/Department Manager, BDMD for signature.</li> </ul>	None	1 Day	Head Office - Internal Communications Processor (HO- ICP)
<ul> <li>15. Signs endorsement letter and returns to HO-ICP.</li> <li>NOTE: For complaint endorsed by the GCG, the endorsement letter shall be signed by the President. If the complaint was endorsed by other agencies, endorsement letter signed by the DM, BDMD shall suffice.</li> </ul>	None		President/ Department Manager, BDMD
16. Transmits the copy of complaint, endorsement letter and response letter to the complainant and/or endorsing agency.	None	4 Hours	Head Office - Internal Communications Processor (HO- ICP)
17. Acknowledgement receipt of response letter		2 Hours	Endorsing Agency/Farmer
18. Files copy of documents and furnishes the concerned Head Office Department.		2 Hours	Head Office - Internal Communications Processor (HO- ICP)
END OF PROCESS		10 Working days	

## 8.4 Complaint Handling (Regional Office)



	Activity	FEES TO BE PAID	PROCESSING TIME	Responsible Person
1.	See HO procedures on Acknowledgement and Transmittal of Complaints to the concerned Regional Office (Activity 1 – 7 Section 6.3)	None	1-2 days	
2.	Receives, logs and forwards complaint to Regional Office – Internal Communications Processor (RO-ICP).	None	2 hours	Officer of the Day
	Receives and records the complaint. Notifies the complainant regarding the receipt of complaint and forwards to Regional Manager II.	None	2 hours	Regional Office – Internal Communications Processor (RO- ICP)
5.	Examines the merits of the complaint and assigns complaint to concerned division (Administrative and Finance Department (AFD)/ Claims and Adjustment Division (CAD)/ Marketing and Sales Division (MSD).	None	4 hours	Regional Manager II
	Reviews the complaint and prepares response letter. 6.1. Retrieval of necessary documents. If needed, conducts validation/inspection/investig ation. Forwards response letter to Regional Manager II for review and approval.	None	3 days	Division Chief III, AFD/CAD/MSD
	Reviews and approves the response letter. Forwards to RO-ICP.	None	4 hours	Regional Manager II
10	Instructs Regional Office Staff to transmit the response letter to the complainant.	None	4 hours	Regional Office – Internal Communications Processor
11	Transmits response letter to the complainant and discusses the details of the response.	None		Regional Office Staff



<ul><li>12. Receives and acknowledges the response letter.</li><li>13. Accomplishes the Satisfaction Survey and signs the quit claim.</li></ul>	None	3 hours	Complainant
<ul> <li>14. Furnishes Business <ul> <li>Development and Marketing</li> <li>Department (BDMD) a copy of</li> <li>the complaint and response</li> <li>letter duly acknowledged by the</li> <li>complainant.</li> </ul> </li> <li>15. Files Regional Office copy.</li> <li>16. Prepares monthly monitoring</li> <li>report for all complaints received.</li> </ul>	None	4 hours	Regional Office – Internal Communications Processor
17. See HO procedures on Transmittal of Complaints Response Letter to the endorsing agency/farmer (Activity 13 -18 Section 6.3)	None	2 days	
END OF PROCESS		10 working days	

## Feedback and Complaints Contact Information

Office	Contact Information
Anti-Red Tape Authority (ARTA)	complaints@arta.gov.ph
	1-ARTA (2782)
Presidential Action Center (PACe)	pace@op.gov.ph
8888 Citizen's Complaint Center	8888
Contact Center ng Bayan (CCB)	0908-881-6565
Governance Commission for GOCCs (GCG)	feedback@gcg.gov.ph



# **Regional Office**

## **Internal Services**



## 1. Application for Leave

The leave of absence is a right granted to permanently appointed officials and employees not to report for work with or without pay.

Vacation leave refers to a leave of absence granted to officials and employees for personal reasons, the approval of which is contingent upon the necessities of the service.

Sick leave refers to leave of absence granted only on account of sickness or disability on the part of the employee concerned or any member of his immediate family.

Special leave privileges refer to leave of absence which officials and employees may avail of for a maximum of three days annually over and above the vacation, sick, maternity, and paternity leaves to mark personal milestones and/or attend to filial and domestic responsibilities.

All other special leave benefits allowed by their respective special laws.

Office or Division:	Office or Division: Administrative and Finance Division (AFD)				
Classification:	n: Simple				
Type of	G2G – Government to Government				
Transaction:					
	Regional Office Employees				
	KLIST OF REQUIREMENTS	WHERE TO SECURE			
For Sick Leave and V					
	e Form (Civil Service Form No. 6 Revised	Employee-applicant			
	opies: personal copy and HR copy)				
	n advance or if exceeding five days				
•	e Form (Civil Service Form No. 6 Revised	Employee-applicant			
2020) – (2 original o	copies: personal copy and HR copy)				
	/ Affidavit (if medical consultation was not	Attending Physician/			
availed) - (1 origina	I and 1 photocopy)	Clinic / Employee–			
	applicant				
For Maternity Leave -	<ul> <li>105 days (allowable period of leave)</li> </ul>				
1. Accomplished Leav	e Form (Civil Service Form No. 6 Revised	Employee-applicant			
2020) – (2 original o	copies: personal copy and HR copy)				
2. Accomplished CS F	Form No. 6A (Notice of Allocation of	Employee-applicant			
•	Maternity Leave), if applicable (2 original copies)				
	e.g., ultrasound, doctor's certificate on	Hospital / Clinic / Lying-in			
expected date of delivery (1 original and 1 photocopy) / Attending Physician					
	seven days (allowable period of leave)				
	e Form (Civil Service Form No. 6 Revised	Employee-applicant			
	copies: personal copy and HR copy)				



2.	Proof of child's delivery e.g., birth certificate, medical certificate	Hospital / Clinic / Lying–in
	(1 photocopy)	/ Civil Registry /
		Philippine Statistics
		Authority (PSA)
3.	Marriage Certificate / Contract (1 photocopy)	PSA
Fo	or Solo Parent Leave – seven days (allowable period of leave)	
	Accomplished Leave Form (Civil Service Form No. 6 Revised	Employee-applicant
	2020) – (2 original copies: personal copy and HR copy)	
2	Updated Solo Parent ID (1 photocopy)	Local Government Unit –
		Social Welfare and
		Development Office
		(SWDO)
Fo	or Study Leave – up to six months (allowable period of leave)	(61120)
	Accomplished Leave Form (Civil Service Form No. 6 Revised	Employee-applicant
	2020) – (2 original copies: personal copy and HR copy)	
2.	Approved Request for Study Leave (1 original copy)	Employee–applicant /
		AFD/ Head of Agency
3	Proof of acceptance/enrollment in an academic institution /	Academic institution /
0.	review center (1 photocopy)	Review Center
Δ	Service Obligation Contract (1 photocopy)	AFD
	or Violence Against Women and Children (VAWC) Leave – 10 c	
	ave)	adys (anomable period of
	Accomplished Leave Form (Civil Service Form No. 6 Revised	Employee-applicant
	2020) – (2 original copies: personal copy and HR copy)	1 - 3 1 1
2.	Any of the following supporting documents (1 certified true	
	сору):	
	<ul> <li>Barangay Protection Order (BPO)</li> </ul>	Barangay Office
	<ul> <li>Temporary / Permanent Protection Order</li> </ul>	Court
	Certification issued by the Punong Barangay/Kagawad or	Barangay Office or
	Prosecutor or Clerk of Court for the application for BPO	Prosecutor or Clerk of
	Medico legal report	Court
		Government Physician
Fo	r Rehabilitation Leave for injuries acquired in the performanc	
	onths (allowable period of leave)	
1.	Accomplished Leave Form (Civil Service Form No. 6 Revised	Employee-applicant
	2020) – (2 original copies: personal copy and HR copy)	
2.	Approved Letter Request (1 original copy)	Employee–applicant /
L		Office of the President
3.	Police Report, if applicable (1 photocopy)	Police Station (PNP)
	Medical Certificate on the nature of the injuries, the course of	Attending Physician
	treatment involved, and the need to undergo rest, recuperation,	
	and rehabilitation as the case may be. (1 original copy)	
5.	Written concurrence of a government physician should be	Government Physician
	obtained relative to the recommendation for rehabilitation if the	,



			1		
	is a private practitioner, particula od of rehabilitation. (1 original cop				
	nefits for Women – up to two m		wable perio	d of leave)	
1. Accomplished Leav	e Form (Civil Service Form No. 6	Revised	Employee-		
<ul> <li>2020) – (2 original copies: personal copy and HR copy)</li> <li>Medical Certificate filled out by the proper medical authorities, e.g. the attending surgeon accompanied by a clinical summary reflecting the gynecological disorder which shall be addressed or was addressed by the said surgery; the histopathological report; the operative technique used for the surgery; the duration of the surgery including the perioperative period (period of confinement around surgery); as well as the employees estimated period of recuperation for the same. (1 original copy)</li> </ul>					
	cy (Calamity) Leave – up to five				
	e Form (Civil Service Form No. 6 copies: personal copy and HR cop		Employee-	-applicant	
2. Declaration of State	e of Calamity (1 photocopy) cted Area (1 original copy)		Local Gove Municipal M Provincial (		
For Adoption Leave -	up to seven days (allowable pe	eriod of leav			
1. Accomplished Leav	e Form (Civil Service Form No. 6 copies: personal copy and HR cop	Revised	Émployee-	-applicant	
	ement Authority (1 certified photoc		Department of Social Welfare and Development (DSWD)		
For Leave of Absence	e for 30 calendar days or more		•	· · · · · · · · · · · · · · · · · · ·	
1. Accomplished Leav	e Form (Civil Service Form No. 6 copies: personal copy and HR cop		Employee-	-applicant	
	rance Form (Civil Service Form N		Employee-	-applicant	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIB LE	
1. Submits the accomplished application for leave form including the	1.1 Receives the accomplished application for leave form.	None	5 Minutes	Administrative Services Officer (ASO) III AFD	
documentary requirements to the AFD.	1.2 Reviews completeness of documentary requirements.	None	15 Minutes	ASO III AFD	
	1.3Certifies availability of leave credits.	None	30 Minutes	Division Chief III AFD	
	1.4 Endorses leave form to the immediate supervisor for	None	30 Minutes	ASO III AFD	



	recommendation and/or approval/ disapproval.			
	<ul> <li>1.5 Reviews and recommends approval/ disapproval of the application for leave.</li> <li>If for approval, marks the appropriate box and forwards to the RM.</li> <li>If for disapproval, marks the appropriate box and states reason for disapproval and forwards to the RM.</li> </ul>	None	30 Minutes	<i>Supervisor</i> Originating Division
	<ul> <li>1.6 Approves/dis-approves the application for leave.</li> <li>If approved, indicates number of days approved.</li> <li>If disapproved, states reason for disapproval.</li> </ul>	None	30 Minutes	Regional Manager II ORM
2. Receives the approved/disappro ved leave application form and returns one (1) copy to the AFD.	2.1 Records and files the approved application for leave.	None	30 Minutes	ASO III AFD
	TOTAL	None	2 Hours and 50 Minutes	

Note: The Schedule for filing leave per type of application shall be:

- Vacation Leave; Mandatory / Forced Leave; Special Privilege Leave; Solo Parent Leave; Adoption Leave five days before the scheduled leave;
- Sick Leave immediately upon employee's return from such leave;
- Maternity Leave 30 days before Expected Date of Delivery;
- Paternity Leave immediately upon employee's return from such leave;
- Study Leave 30 days before the scheduled leave;
- VAWC leave immediately upon return of employee or in-advance;
- Rehabilitation Leave one week from the time of the accident except when a longer period is warranted;
- Special Leave benefits for Women at least five (5) days. In case of emergency, upon return of employee but during confinement, the agency shall be notified of said surgery; and
- Special Emergency (Calamity) Leave within 30 days from the actual occurrence of the natural calamity/ disaster.



## 2. Processing of Monetization of Leave Credits

Officials and employees who have accumulated 15 days of vacation leave credits shall be allowed to monetize a minimum of 10 days: Provided, that at least five days is retained after monetization and provided further that a maximum of 30 days may be monetized in a given year.

Monetization of 50% of all the accumulated leave credits may be allowed for valid and justifiable reasons, subject to the discretion of the agency head and availability of funds.

Office or Division:		Administrative and Finance Division (AFD)						
Classification: Simple								
Type of Transaction: G2G – Governm			to Government					
Who may avail:	Regional Office Employees							
	EQUIREMENTS		WHERE TO SECURE					
For monetization not exceeding 50% of accumulated leave credits								
1. Accomplished Leave Form (Civil Service Form No. 6			6	Employee-applicant				
Revised 2020) – (2 original copies)								
		of 50% of accumulated						
1. Accomplished Leave Form (Civil Service Form No. 6			Employee-applicant					
Revised 2020) – (2 original copies)								
2. Memorandum-Request to the Head of Agency sta			ıg	Emple	oyee-applicar	It		
the valid and justifiable reasons (1 original copy)			Attending Physician					
	3. Medical Certificate, if applicable (1 original copy)		FFF	ES TO PROCESS PERSON				
CLIENT STEPS	AG	GENCY ACTIONS		PAID	ING TIME	RESPONSIBLE		
1. Submits the	1.1 Red	ceives the	No	one	5 Minutes	ASO III		
accomplished		complished application				AFD		
leave form	for	for leave form.						
including the	12 Rev	views completeness	N	one	15 Minutes	ASO III		
required documents to the		documentary		0110		AFD		
AFD.		requirements.						
	1.3 Cer	rtifies availability of	No	one	30 Minutes	Division Chief III		
	leav	ave credits.				AFD		
		dorses leave form to	No	one	30 Minutes	ASO III		
		immediate supervisor				AFD		
	-	recommendation						
		d/or approval/						
	disa	approval.						



1.5	<ul> <li>Reviews and recommends approval/ dis-approval of the application for leave.</li> <li>If for approval, marks the appropriate box and forwards to the RM.</li> <li>If for dis-approval, marks the appropriate box and states reason for disapproval and forwards to the RM.</li> </ul>	None	30 Minutes	Supervisor Originating Division
1.6	<ul> <li>Approves/disapproves the application for leave.</li> <li>If approved, indicates number of days approved.</li> <li>If disapproved, states reason for disapproval</li> </ul>	None	30 Minutes	Regional Manager ORM
1.7	Records and files the approved application for leave.	None	30 Minutes	ASO III AFD
1.8	Prepares schedule/ computation of monetization	None	4 Hour	ASO III AFD
1.9	Reviews schedule of monetization	None	4 Hour	Division Chief III AFD
1.1(	OApproves schedule of monetization	None	4 Hour	Regional Manager ORM
1.1 <sup>,</sup>	1Generates NVS through the PFMS and attaches required documents and submits to the Chief of AFD.	None	15 Minutes	Accounts Analyst II AFD
1.12	2Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.	None	1 Hour	Division Chief III AFD



			-	
	<ul> <li>1.13Prepares journal entries through the PFMS as follows:</li> <li>Debit - Leave Benefits Payable; and</li> <li>Credit - Cash in Bank- GAF</li> </ul>	None	15 Minutes	Accounts Analyst II AFD
	<ul><li>1.14Approves DV through the PFMS</li><li>Box A</li></ul>	None	5 Minutes	Division Chief III AFD
	• Box B	None	5 Minutes	Division Chief III AFD
	• Box C	None	5 Minutes	Division Chief III AFD
	• Box D	None	5 Minutes	Division Chief III Originating Division and Regional Manager II ORM
	1.15Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller I</i> AFD
	1.16Secures signature of authorized signatories.	None	30 Minutes	<i>Teller I</i> AFD
	1.17Releases cheque to the payee.	None	5 Minutes	<i>Teller I</i> AFD
2. Acknowledges receipt of cheque.	2.1. Files DV with complete attachments.	None	10 Minutes	<i>Teller I</i> AFD
	TOTAL	None	2 Days 1 Hour and 35 Minutes	



#### 3. Request for Certificate of Employment

A certificate of employment (COE) contains relevant information about the employee such as but not limited to job title, job description, salary and other compensation, and duration of employment with PCIC. This document may be requested for whatever legal purpose it may serve a current employee.

Office or Division: Administrative and Finance Division (AFD)						
Classification:	Simple	Simple				
Type of Transaction:	G2G – Governmen	G2G – Government to Government				
Who may avail:	Regional Office Em	Regional Office Employees				
CHECKLIST OF REQUIREMENTS WHERE TO SECUR						
1. Request Slip (1 original				AFD		
For representatives of re 4. Authorization Letter (1 of 5. Valid ID of the requestin 6. Valid ID of the represent	original copy) ng employee (1 Photoco	ру)		Emplo	oyee-applicant	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROC NG T		PERSON RESPONSIBLE	
1. Submits the accomplished request slip to the AFD.	1.1 Receives the accomplished Request Slip.	None	5 Min	utes	ASO III AFD	
	1.2 Prepares COE for the employee.	None	4 Ho	urs	ASO III AFD	
	1.3Review of the COE.	None	3 Hours		Division Chief III AFD	
	1.4 Finalizes the COE.	None	20 Mir	nutes	ASO III AFD	
	1.5 Affixes initial to the COE.	None	10 Mir	nutes	Division Chief III AFD	
	1.6 Signs the COE.	None	10 Mir	nutes	Regional Manager II ORM	
	1.7 Releases the COE to the requesting employee.	None	5 Min	utes	ASO III AFD	
2. Acknowledges receipt of Certificate of Employment.	2.1. Files a copy of the COE.	None	10 Mir	nutes	ASO III AFD	
TOT		None	1 D	ay		



## 4. Request for Service Record

A service record is a record or document of a current employee's employment history that includes employment date, position title/s held, date/s of promotion and salary adjustments.

Office or Division: Administrative and Finance Division (AFD)						
Classification:		Simple		, ,	/	
Type of Transactio	n:	G2G – Governme	nt to Governr	ment		
Who may avail:		Regional Office Er	mployees			
CHE	CKL	IST OF REQUIREN	<b>MENTS</b>		N	HERE TO SECURE
1. Request Slip (1 or	rigina	al copy)			AFD	
For representatives 1. Authorization Lett 2. Valid ID of the rec 3. Valid ID of the rep	er (1 ques	original copy) ting employee (1 Pł	notocopy)		Emp	loyee-applicant
CLIENT STEPS	A	SENCY ACTIONS	FEES TO BE PAID	PROCES G TIM		PERSON RESPONSIBLE
1. Submits accomplished Request Slip to	1.1	Receives the accomplished Request Slip.	None	5 Minut		ASO III AFD
the AFD.	1.2	Prepares the Service Record for the employee.	None	4 Hou	rs	ASO III AFD
	1.3	Reviews of the Service Record.	None	3 Hou	rs	Division Chief III AFD
	1.4	Finalizes the Service Record.	None	20 Minu	ites	ASO III AFD
	1.5	Affixes initial to the Service Record.	None	10 Minu	ites	Division Chief III AFD
	1.6	Signs the Service Record.	None	10 Minu	ites	Regional Manager II ORM
	1.7	Releases the Service Record to the requesting employee.	None	5 Minut	tes	ASO III AFD
2. Acknowledges receipt of Service Record.		Files a copy of the Service Record.	None	10 Minu	ites	ASO III AFD
TC	TAL		None	1 Day	y	



#### 5. Request for the use of Government Vehicle

The use of government motor vehicles shall be authorized only through the issuance of a trip ticket, duly signed by the Chief of the Administrative and Finance Division and the Regional Manager II.

This describes the procedures employed by the Administrative and Finance Division in response to request for transport service on scheduled date and time using PCIC utility motor vehicle by PCIC officials/employees relative to their official functions.

Office or Division:		Finance Divi	SION			
Classification:	Simple	Simple				
Type of Transaction:	G2G – Government	G2G – Government to Government				
Who may avail:	Regional Office Em	ployees				
CHECKLIST	OF REQUIREMENTS	S	WHERE	TO SECURE		
1. Trip Ticket (1 original			Administrative a	nd Finance Division		
2. Approved Travel Ord			(AFD)			
Official Business (OE	<ol> <li>Form (2 original cop</li> </ol>					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submits Travel 1	.1. Receives	None	5 Minutes	ASO III		
Order/OB form to	approved TO or			AFD		
the AFD.	accomplished					
	OB Form.					
1	.2. Checks	None	30 Minutes	ASO III		
	availability of			AFD		
	vehicle and					
	driver:					
	<ul> <li>If none,</li> </ul>					
	inform the					
	requesting					
	employee					
	immediately.					
	,					
	• If available,					
	assigns vehicle					
	and driver.					
1	.3. Prepares Trip	None	30 Minutes	Driver Mechanic B		
	Ticket.			AFD		



	1.4. Approves/disapp roves Trip Ticket and forwards to motorpool supervisor.	None	30 Minutes	Division Chief III AFD
	1.5. Informs the requesting employee of the approval/ disapproval.	None	15 Minutes	ASO III AFD
2. Received information on assigned vehicle and driver, and details of the travel.				
TOTAL		None	1 Hour and 50 Minutes	



## 6. Request for Common Use Supplies and Equipment

Provision of necessary logistical requirements needed by the employees that would enable them to deliver their services and implement their programs in a timely, effective, efficient, and adequate manner.

O	ffice or Division:	Administrative and Finance Division (AFD)				
CI	lassification:	Simple				
Ту	/pe of Transaction:	G2G – Government to Government				
W	ho may avail:	Regional Office Employ	/ees			
	CHECKLIS	T OF REQUIREMENTS		WHERE T	O SECURE	
1.	Approved Requisitior copies)	n and Issue Slip (RIS) - (	3 original	AFD		
	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.	Prepares RIS and submits to the AFD.	1.1 Receives RIS.	None	5 Minutes	ASO III AFD	
		1.2 Reviews and verifies completeness of information.	None	30 Minutes	ASO III AFD	
		1.3 Prepares the item/s to be issued and indicates the quantity, if item/s is/are not available inform requesting personnel to fill out purchase request (PR) form (refer to RO Internal Service Number 9).	None	1 Hour	ASO III AFD	



			1	
	1.4 Prepares Inventory Custodian Slip (ICS) and Property Sticker for requested semi-expendable items considered as inventories	None	1 Day	ASO III AFD
	1.5 Delivers/Issues the requested supplies or semi- expendable items.	None	10 Minutes	ASO III AFD
2. Receives supplies requested and signs in the received by portion of the RIS and/or ICS.	2.1 Files copy of RIS/ICS	None	10 Minutes	ASO III AFD
ТОТ	None	1 Day 1 Hour and 55 Minutes		



# 7. Request for Non-Common Use Supplies, Equipment and Common Use Supplies Not Available in Stock

Provision of necessary logistical requirements needed by the employees that would enable them to deliver their services and implement their programs in a timely, effective, efficient, and adequate manner.

Office or Division	ו:	Administrative and Finance Division (AFD)					
Classification:		Highly Technical					
Type of Transact	ion:	G2G – Government to C					
Who may avail:		Regional Office Employ	ees				
		T OF REQUIREMENTS			O SECURE		
		Request (2 original copie		AFD			
2. Annual Procure	ement	Plan (APP) – (1 photoco	ору)				
3. Technical Spec – (2 original co		ions or Terms of Referen	, , 	Requesting Divisi	on or Office		
CLIENT STEPS	4	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submits approved Purchase		eceives PR and ssigns control number.	None	5 Minutes	ASO III AFD		
Request (PR) and Technical Specification	0	ecords and files copy f the PR for rocurement Monitoring.	None	5 Minutes	ASO III AFD		
s/TOR to the AFD	c b	eviews and counter heck the items and udget to the approved PP.	None	30 Minutes	Division Chief III AFD		
	p w <b>R</b> o ir	conducts procurement rocess in accordance with the <b>Implementing</b> <b>Aules and Regulations</b> <b>f R.A. 9184</b> and mode f procurement indicated in the Approved Annual procurement Plan (APP)					
	E	Bidding	None	136 Days	RO BAC/RO BAC Secretariat		
		Negotiated Small Value Procurement	None	21 Days	RO BAC/RO BAC Secretariat or ASO III AFD		



Negotiated Agency to Agency Procurement	None	21 Days	RO BAC/RO BAC Secretariat or ASO III AFD
Shopping	None	14 Days	ASO III AFD
1.5 Receives delivered goods vis-à-vis Purchase Order or Contract	None	3 Hours	Designated Property Custodian AFD
1.6 Inspects delivered goods or services vis-à-vis Purchase Order or Contract	None	1 Hour	Designated Property Custodian AFD
1.7 Accepts delivered goods or services vis-à-vis Purchase Order or Contract	None	30 Minutes	Designated Property Custodian AFD
1.8 Prepares Inspection and Acceptance Report and other documents needed for the payment of goods.	None	10 Minutes	Designated Property Custodian AFD
1.9Prepares Disbursement Voucher for the payment	None	5 Minutes	Accounts Analyst II AFD
1.10Prepares documents (i.e. property sticker, ICS, MR, RIS) for issuance to end-user/s / requisitioner.	None	15 Minutes	Designated Property Custodian AFD
1.11Delivers/ Issues the requested goods and signs on the issued by portion of the document	None	15 Minutes	Designated Property Custodian AFD



2.	Receives goods requested and signs in the received by portion of the appropriate document	2.1. Files copy of documents.	None	10 Minutes	Supply Officer II or Property Officer III PMGSD
	TOTAL	FOR SHOPPING	None	14 Days, 6	
				Hours and 5	
				Minutes	
Т	OTAL FOR NE	GOTIATED SMALL VALUE	None	21 Days, 6	
A	ND NEGOTIAT	ED AGENCY TO AGENCY		Hours and 5	
	PR	OCUREMENT		Minutes*	
	ΤΟΤΑ	L FOR BIDDING	None	136 Days, 6	
				Hours and 5	
				Minutes*	

\*Service is covered under R.A. No. 9184 Government Procurement Reform Act and its Revised IRR.



#### 8. Request for Cash Advance for Official Travel

Special cash advances granted to permanent officials and employees for travel expenditures including transportation fare, hotel room/lodging expenses, travel allowances, and other incidental expenses incurred in connection with the official travel.

Office or Divisio	n:	Administrative and Finance Division (AFD)				
Classification:		Simple				
Type of Transaction: G2G – Government to Govern			Government			
Who may avail:		Regional Office Employ	rees			
		T OF REQUIREMENTS			TO SECURE	
		nal and 1 photocopy)		AFD		
		original and 1 photocopy		AFD		
3. General Admin	nistrati	ve Fund Voucher (1 orig	inal copy)	PCIC Financial System (PFMS	5	
CLIENT STEPS	ļ	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Secures approved Travel Order and Itinerary	ap	ecommends for oproval of Travel Order nd Itinerary of Travel.	None	15 Minutes	Division Chief III Originating Division	
of Travel.	Tr Itii to D • nc	If disapproved, otifies requesting vision/ employee.	None	10 Minutes	Regional Manager II ORM	
	th re su	enerates NVS through e PFMS and attaches quired documents and bmits to the Chief of FD.	None	15 Minutes	Accounts Analyst II AFD	
	ch va do co m	eceives NVS and lecks completeness, lidity, and reliability of ocuments, reviews omputations, and akes adjustments, if eeded.	None	1 Hour	Division Chief III AFD	



	<ul> <li>1.5 Prepares journal entries through the PFMS as follows:</li> <li>Debit – Advances to Officers and Employees; and</li> <li>Credit - Cash in Bank- GAF</li> </ul>	None	15 Minutes	Accounts Analyst II AFD
	1.6 Approves DV through the PFMS			
	• Box A	None	5 Minutes	<i>Division Chief III</i> Originating Division
	• Box B	None	5 Minutes	Division Chief III AFD
	• Box C	None	5 Minutes	Division Chief III AFD
	• Box D	None	5 Minutes	<i>Division Chief III</i> Originating Division and <i>Regional Manager II</i> ORM
	1.7 Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller I</i> AFD
	1.8 Secures signature of authorized signatories.	None	30 Minutes	<i>Teller I</i> AFD
	1.9Releases cheque to the payee.	None	5 Minutes	<i>Teller I</i> AFD
2. Acknowledg es receipt of cheque	2.1 Files DV with complete attachments.	None	10 Minutes	<i>Teller I</i> AFD
· · · · · · · · · · · · · · · · · · ·	TOTAL	None	3 Hours and 10 Minutes	



## 9. Request for Cash Advance for Operating Expenditures

Cash Advances granted to duly designated disbursing officers and employees for current operating expenditures or of the activity of the office undertaken when it is impractical to pay the same by check.

O	ffice or Division:	Administrative and Finance Division (AFD)					
CI	assification:	Simple			· · ·		
Ту	pe of Transaction:	G2G – Government to	Governi	men	t		
W	ho may avail:	Regional Officials and	Employe	ees			
	CHECKLIST	OF REQUIREMENTS					
1.	Cash Advance Form	<u>n (1 original and 1 photoc</u>	ору)		questing Division		
2.		ive Fund (GAF) Voucher	(1			via PCIC Financial	
	original copy)				anagement System	n (PFMS)	
3.		nliquidated cash advance	(1	AF	D		
	original copy)			. –	-		
4.	Approved Purchase	Request (1 original copy		AF			
	CLIENT STEPS	AGENCY ACTIONS	FEES BE PA		PROCESSING TIME	PERSON RESPONSIBLE	
1	Secures	1.1 Receives and	None		5 Minutes	Division Chief III	
'.	Certification of no	reviews	INUIR	5	5 Minutes	AFD	
	unliquidated cash	accomplished cash					
	advance and	advance form and					
	Accomplishes	recommends					
	Cash Advance	approval/disapprov					
	form and submits	al to the Regional					
	to the AFD.	Manager II.					
	to the AFD.	1.2 Approves/disappro	None	Э	5 Minutes	Regional Manager	
		ves of the request					
		for cash advance				ORM	
		<ul> <li>If approved,</li> </ul>					
		signs the cash					
		advance form.					
		<ul> <li>If disapproved</li> </ul>					
		returns to					
		originating division					
		1.3 Receives approved	None	Э	5 Minutes	Accounts Analyst II	
		Cash Advance				AFD	
		form.					
		1.4 Generates NVS	None	Э	15 Minutes	Accounts Analyst II AFD	
		through the PFMS				AĽD	
		and attaches required					
		documents and					
		submits to the					
		Chief of AFD.					
		CHIEL OF AFD.					



	1.5 Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.	None	1 Hour	Division Chief III AFD
	<ul> <li>1.6 Prepares journal entries through the PFMS as follows:</li> <li>Debit - Leave Benefits Payable; and</li> <li>Credit - Cash in Bank- GAF</li> </ul>	None	15 Minutes	Accounts Analyst II AFD
	<ul><li>1.7 Approves DV through the PFMS</li><li>Box A</li></ul>	None	5 Minutes	Division Chief III AFD
	• Box B	None	5 Minutes	Division Chief III AFD
	• Box C	None	5 Minutes	Division Chief III AFD
	• Box D	None	5 Minutes	Division Chief III Originating Division and Regional Manager II ORM
	1.8 Prints approved DV and cheque for signature.	None	10 Minutes	Teller I AFD
	1.9 Secures signature of authorized signatories.	None	30 Minutes	Teller I AFD
	1.10 Releases cheque to the payee.	None	5 Minutes	Teller I AFD
<ol> <li>Acknowledges receipt of cheque.</li> </ol>	2.1. Files DV with complete attachments.	None	10 Minutes	<i>Teller I</i> AFD
ТО	TAL	None	3 Hours	



### 10. Request for Cash Advance through Petty Cash

Petty cash is a revolving fund granted to disbursing officers primarily to service petty and emergency cash needs of various regional office units which cannot be paid conveniently by check or are required to be paid immediately.

Office or Division:	Administrative and Finance Division (AFD)				
Classification:	Simple				
Type of Transaction:	G2G – Government to Government				
Who may avail:	Regional Office Employees				
CHECKLIST OF RI	EQUIREMENTS		WHERE TO S	ECURE	
1. Petty Cash Advance copy)	Form (1 original	Requesting	Department throu	ugh PFMS	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Accomplishes Petty Cash Advance Request through PFMS.	1.1 Approves Petty Cash Advance Request	None	15 Minutes	Division Chief III Originating Division	
2. Prints Approved Petty Cash Advance Request and submits to the AFD.	2.1 Releases the requested amount to the employee.	None	15 Minutes	<i>Teller I</i> AFD	
3. Acknowledges receipt of cash	3.1 Files petty cash advance form	None	10 Minutes	Teller I AFD	
TOTA	AL	None	40 Minutes		



## **11. Liquidation of Cash Advance for Official Travel**

A cash advance should be settled and liquidated by submitting the details of the expenses incurred supported by proper receipts and other evidence/s of payment.

Office or Division: Administrative and Finance Division (AFD)				
Classification:				
Type of Transaction: G2G – Government to Governmer			nt	
Who may avail:	Regional Office Employees			
	T OF REQUIREMENTS			TO SECURE
	inal and 1 photocopy)		AFD	
	original and 1 photocopy)		AFD	
	ation (1 original copy)		Requesting Di	
	Completed (1 original copy		Requesting Div	
	rance (1 original and 1 pho			overnment Office
	nt such as Official Receipt,	l icket,		overnment Office or
etc. (1 original and		FEES T	Private Compa	PERSON
CLIENT STEPS	AGENCY ACTIONS	BE PAI		RESPONSIBLE
<ol> <li>Submits the approved Statement of Liquidation with required documents to their Division Chief III.</li> </ol>	<ul> <li>1.1 Receives and checks the completeness of required documents and accuracy of the Statement of Liquidation.</li> <li>1.2 Signs the Statement of Liquidation, Certification, Revised Itinerary of Travel and the Certificate of Travel Completed and submit to the AFD.</li> </ul>	None	5 Minutes 2 Minutes	Designated Job- Order Personnel Originating Division Division Chief III Originating Division
	1.3 Receives and checks the completeness of required documents and accuracy of the Statement of Liquidation and determines if for refund or reimbursement.	None	10 Minutes	Accounts Analyst II AFD



	1.4 Processes the documents. If there is a refund or reimbursement, advises the employee and returns the documents.	None	5 Minutes	Accounts Analyst II AFD
<ol> <li>For Refund, Pays the amount at the Teller I, AFD.</li> </ol>	2.1 Receives the Liquidation Statement with the required documents.	None	5 Minutes	<i>Teller I</i> AFD
	2.2 Issues the Official Receipt for the refund and return the liquidation with the required documents to the Accounts Analyst II.	None	10 Minutes	Teller I AFD
	2.3 Prepares the accounting entry for the liquidation and keep them for submission to COA.	None	10 Minutes	Accounts Analyst II AFD
3. <u>For</u> <u>Reimbursement:</u> Submit the approved Statement of Liquidation with	3.1 Receives the approved Cash Advance Liquidation Report with the required documents.	None	5 Minutes	Accounts Analyst II AFD
the required documents.	3.2 Generates NVS through the PFMS and attaches required documents and submits to the Chief of AFD.	None	15 Minutes	Accounts Analyst II AFD
	3.3 Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.	None	1 Hour	Division Chief III AFD



			-	
	<ul> <li>3.4 Prepares journal entries through the PFMS as follows:</li> <li>Debit – Travelling Expenses;</li> <li>Credit – Cash Advances to Officers and Employees; and</li> <li>Credit – Cash in Bank – GAF.</li> </ul>	None	15 Minutes	Accounts Analyst II AFD
	3.5 Approves DV			
	through the PFMS			
	• Box A	None	5 Minutes	Division Chief III Originating Division
	• Box B	None	5 Minutes	Division Chief III AFD
	• Box C	None	5 Minutes	Division Chief III AFD
	• Box D	None	5 Minutes	Division Chief III Originating Division &
				Regional Manager II ORM
	3.6 Prints approved DV and cheque for signature.	None	10 Minutes	<i>Teller I</i> AFD
	3.7 Secures signature of authorized signatories.	None	30 Minutes	Teller I AFD
	3.8 Releases cheque to payee.	None	5 Minutes	<i>Teller I</i> AFD
<ol> <li>Acknowledges receipt of cheque.</li> </ol>	4.1 Files DV with complete attachments.	None	10 Minutes	Teller I AFD
TC	TAL	None	3 Hours and 37 Minutes	



## 12. Liquidation of Cash Advance for Operating Expenditures

A cash advance should be settled and liquidated by presenting the details of the items paid in accordance with the purpose for which the cash advance was granted and supported by proper receipts and other evidence of payment.

Office or Division: Administrative and Finance Division (AFD)				
Classification:	Simple		•	
Type of Transaction:	G2G – Government to	Government		
Who may avail:	Regional Office Emplo	yees		
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
1. Liquidation Report photocopy)	(1 original and 1	Requesting	Division	
	ents depending on the incurred (1 original and	Requesting	Division	
<ol> <li>Evidence of payme invoice, official rec photocopy)</li> </ol>	ent such as sales eipt (1 original and 1	Appropriate Company	Government Offi	ce or Private
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits the approved Liquidation Report with the required documents to the	1.1 Receives the approved Liquidation Report with the required documents.	None	5 Minutes	Accounts Analyst II AFD
AFD.	1.2 Checks completeness and accuracy of documents.	None	30 Minutes	Accounts Analyst II AFD
	1.3 Processes the documents. If there is a refund or reimbursement advises the employee and return the documents to the employee.	None	5 Minutes	Accounts Analyst II AFD
2. <u>For Refund</u> : Submits the Liquidation Report with the required documents and returns unused	2.1 Receives the Liquidation Report with the required documents and accept the payment for the refund.	None	3 Minutes	<i>Teller I</i> AFD
amount to the Teller I, AFD.	2.2 Issues the Official Receipt and returns the Cash Advance	None	10 Minutes	<i>Teller I</i> AFD



	1			
	Liquidation Report with the required documents to the Accounts Analyst II.			
	2.3 Prepares the accounting entry for the liquidation and keep them for submission to COA.	None	10 Minutes	Accounts Analyst II AFD
3. <u>For</u> <u>Reimbursement:</u> Submit the approved Liquidation Report	3.1 Receives the approved Liquidation Report with the required documents.	None	5 Minutes	Accounts Analyst II AFD
with the required documents to the AFD.	3.2 Generates NVS through the PFMS and attaches required documents and submits to the Chief of AFD.	None	15 Minutes	Accounts Analyst II AFD
	3.3 Receives NVS and checks completeness, validity, and reliability of documents, reviews computations, and makes adjustments, if needed.	None	1 Hour	Division Chief III AFD
	<ul> <li>3.4 Prepares journal entries through the PFMS as follows:</li> <li>Debit – Appropriate Expense Accounts;</li> <li>Credit – Cash Advances to Officers and Employees; and</li> <li>Credit – Cash in Bank – GAF.</li> </ul>	None	15 Minutes	Accounts Analyst II AFD



	3.5 Approves DV through the PFMS			
	• Box A	None	5 Minutes	<i>Division Chief III</i> Originating Division
	• Box B	None	5 Minutes	Division Chief III AFD
	• Box C	None	5 Minutes	Division Chief III AFD
	• Box D	None	5 Minutes	Division Chief III Originating Division & Regional Manager II ORM
	3.6 Prints approved DV and cheque for signature.	None	10 Minutes	Teller I AFD
	3.7 Secures signature of authorized signatories.	None	30 Minutes	Teller I AFD
	3.8 Releases cheque to payee.	None	5 Minutes	<i>Teller I</i> AFD
<ol> <li>Acknowledges receipt of cheque.</li> </ol>	4.1 Files DV with complete attachments.	None	10 Minutes	<i>Teller I</i> AFD
Т	DTAL	None	3 Hours and 53 Minutes	



## 13. Liquidation of Cash Advance through Petty Cash

A cash advance should be settled and liquidated by presenting the details of the items paid in accordance with the purpose for which the cash advance was granted and supported by proper receipts and other evidence of payment.

Office or	Division:	Administrative and Finance Division (AFD)				
Classifica	ation:	Simple				
Type of T	Transaction:	G2G – Government to	o Gove	rnmen	t	
Who may		Regional Office Emplo	oyees			
C	CHECKLIST O	F REQUIREMENTS			WHERE TO	SECURE
of exp	enses incurred ase Request) -	nts depending on the n I (Canvass Sheet, Appr - (1 original and 1		AFD		
Officia	al Receipt (1 ori	such as Sales Invoice ginal and 1 photocopy)		Comp	bany	nt Office or Private
copy)		Liquidation Form (1 ori	-	Requ	esting Division via	a PFMS
		cash advance of sup				
copies	s) .	otance Report (2 origina		AFD		
Officia	al Receipt (1 ori	t such as Sales Invoice iginal and 1 photocopy)		Appro Comp		nt Office or Private
	3. Petty Cash Advance Liquidation Form (1 original and 1 photocopy) Requesting Division via PFMS				a PFMS	
CLIEN	NT STEPS	AGENCY ACTIONS		S TO PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Liquid Cash throug and su require	ates Petty Advance Jh the PFMS Jbmits ed	AGENCY ACTIONS 1.1 Receives and check completeness of documents.	BE F			PERSON RESPONSIBLE Teller I /Petty Cash Custodian AFD
1. Liquid Cash throug and su require docum	ates Petty Advance In the PFMS ubmits ed nents to the I who is the Cash	1.1 Receives and check completeness of	BE F	PAID	TIME	RESPONSIBLE Teller I /Petty Cash Custodian
<ol> <li>Liquid Cash throug and su require docum Teller Petty 0 Custor</li> <li><u>For Re</u> pays t the Te Admin</li> </ol>	ates Petty Advance In the PFMS Jobmits ed nents to the I who is the Cash dian <u>efund,</u> he amount at	<ul> <li>1.1 Receives and check completeness of documents.</li> <li>1.2 Processes settlement through the PFMS.</li> <li>2.1. Receives the Liquidation Statement with the required documents and issues the Official Receipt for the refund.</li> </ul>	BE F	PAID one	TIME 5 Minutes	RESPONSIBLE Teller I /Petty Cash Custodian AFD Teller I /Petty Cash Custodian



## VI. Directory of PCIC Offices

#### PCIC HEAD OFFICE

LOCATION	CONTACT DETAILS
7th Floor, Building A, NIA Complex, EDSA, Quezon City	Tel. # (02) 8441-0667 <u>op@pcic.gov.ph</u>
	Tel. # (02) 8559-7457 <u>rmg@pcic.gov.ph</u>
	Telefax # (02) 8361-8983 admin@pcic.gov.ph

#### PCIC REGIONAL OFFICES

REGION	LOCATION	CONTACT DETAILS
Regional Office I	2nd and 3rd Floor, S and P North Bldg., Nancayasan, McArthur Highway, Urdaneta City, Pangasinan	(075) 637-8036 (075) 568-2524 (075) 637-8106 <u>ro1@pcic.gov.ph</u>
Regional Office II	Dalan na Matunung corner Dalan na Paccorofun, Regional Government Center, Carig Sur, Tuguegarao City, Cagayan	(078) 844-1225 <u>ro2@pcic.gov.ph</u>
Regional Office III	PEDMAR Bldg., Dolores, City of San Fernando, Pampanga	(045) 435-6751 <u>ro3@pcic.gov.ph</u>
Regional Office III-A	2nd Floor, Coopbank Building, Maharlika Highway, Imelda District, 3100, Cabanatuan City, Nueva Ecija	(044) 600-2080 <u>ro3a@pcic.gov.ph</u>
Regional Office IV	2nd Floor, Rizal Commercial Center, JP Rizal St. cor MH Del Pilar St., Calamba City, Laguna	(049) 530-0935 <u>ro4@pcic.gov.ph</u>
Regional Office V	BB Andes Bldg., Zone 8, SOLS Subdivision, Bitano, Legazpi City	(052) 742-6613 <u>ro5@pcic.gov.ph</u>
Regional Office VI	Iznart Street, Iloilo City Proper, Iloilo City	(033) 323-3402 <u>ro6@pcic.gov.ph</u>



REGION	LOCATION	CONTACT DETAILS
Regional Office VII	3rd Floor, DBP Building, Osmena	(032) 253-8686
	Boulevard, Cebu City	<u>ro7@pcic.gov.ph</u>
Regional Office VIII	3rd Floor, F. Mendoza Realty	(053) 523-4104
	Complex, 141 Sto. Nino St.,	ro8@pcic.gov.ph
	Tacloban City	
Regional Office IX	2nd Floor, Bulaylay Building,	(062) 945-1588
-	National Highway, Tiguma,	ro9@pcic.gov.ph
	Pagadian City	
Regional Office X	3rd Floor & 4th Floor, One	(088) 857-2983
	Montecarlo Bldg., Annex,	ro10@pcic.gov.ph
	Corrales-Hayes St., Cagayan De	
	Oro City	
Regional Office XI	JYSL Bldg., Purok 16, Sitio	(082) 224-5423
-	Durian, Libby Road, Bago	ro11@pcic.gov.ph
	Gallera, Puan, Davao City	
Regional Office XII	Dumagan Bldg., Morales Avenue,	(083) 305-2739
	Purok Katipunan, General	ro12@pcic.gov.ph
	Paulino Santos, Koronadal City	

#### DIRECTORY OF PCIC EXTENSION OFFICES

PCIC Extension Office (Province)	Address	Contact Information	
PCIC Regional Office No	PCIC Regional Office No. 1		
Benguet	BenCom Bldg. Sitio Bekes, Brgy. Buyacaoan, Buguias,	0946-727-7995 pcicbuguias@gmail.com	
Pangasinan	Benguet 2nd Flr. EJR Bldg. Sadsaran St., Poblacion Alaminos City, Pangasinan	0933-868-3757 pcicalaminos@gmail.com	
La Union	GAD Bldg. Ili Sur, San Juan, La Union	0977-738-5829 pciclaunion@gmail.com	
Ilocos Sur	#5 Florentino Street. Brgy. 4, Vigan City, Ilocos Sur	0951-875-1714 peo_bantay@yahoo.com	
Ilocos Norte	115 General Luna Corner Guerrero St. Brgy. 19 Marcela, Laoag City, Ilocos Norte	0920-356-9749 peo_laoag@yahoo.com	



PCIC Extension	Address	Contact Information
Office (Province) PCIC Regional Office No		
Cagayan	2nd Floor, Uyami Building,	0953-270-3586
Cayayan	Junction Luna, Libertad,	pcic_peoabulug@yahoo.com
	Abulug, Cagayan	pele_peeabulug@yalloo.com
Isabela	2nd Floor, Heritage Building,	0955-685-2389
1500010	Room 210, Malvar Road,	pcic_peosantiago@yahoo.com.p
	Santiago City	h
PCIC Regional Office No	o. 3	
Zambales	Magsaysay St. Corner Luna	0950-415-1559
	St., Zone 4, Poblacion, Iba,	peopciczambales@gmail.com
	Zambales	
PCIC Regional Office No	p. 3A	
Nueva Ecija	LPLO Bldg, Angara St., Brgy.	0951-611-6359
	Buhangin, Baler, Aurora	pcicaurora@yahoo.com
PCIC Regional Office No	o. 4	
Quezon	Puache Commercial Building	(049) 797-9138 / 0930-774-2519
	Maharlika Highway Brgy.	pcicpeolucena@gmail.com
	Kanlurang Mayao, Lucena City	
	Quezon	
Occidental Mindoro	Urieta St. Brgy., Buenavista,	0917-814-6314
	Sablayan, Occidental Mindoro	pcicpeosablayan@gmail.com
Occidental Mindoro	2nd flr VS Building Brgy	(043) 491-1548 / 0917-866-1471
	Labangan, San Jose,	peosanjose1115@gmail.com
	Occidental Mindoro	
Oriental Mindoro	Madrid Blvd. Zone 11,	(043) 738-2058 / 0917-815-8760
	Pinamalayan, Oriental Mindoro	peo_oriental@yahoo.com
Marinduque	Brgy. Isoc 1, Boac,	(042)332-0665 / 0949-871-3820
	Marinduque	pcicpeom@gmail.com
Romblon	Gen. Luna St. Dapawan,	(042)752-5649 / 0908-679-8132
	Odiongan, Romblon	pcicpeoromblon@gmail.com
Palawan	MDP Plaza, Sta. Monica,	(048) 717-4059 / 0917-814-6340
	Puerto Princesa City, Palawan	peopuertoprincesa15@gmail.com
Palawan	Proper Pangobilian, Brooke's	(048) 726-2988 / 0916-895-2432
	Point, Palawan	pcicpeobrookespoint@yahoo.com
PCIC Regional Office No		
Camarines Sur	Emerald St. Lomeda Subd.	0970-156-3020
	San Felipe, Naga City	philcrop05nagapeo@gmail.com
Masbate	2nd Floor, Ricarte Bldg.	0970-469-0689
	Ricarte Road, Brgy. Espinosa,	pcicpeomasbate@gmail.com
	Masbate City	
PCIC Regional Office No	p. 6	



PCIC Extension		
Office (Province)	Address	Contact Information
Aklan	D. Maagma Street, Brgy.	(036) 500-6525 / 0938-621-6182
	Poblacion, Kalibo, Aklan, 5600	pcicaklan@gmail.com
Antique	Saint Nicolas Building, T.A.	(036) 641-6399 / 0938-621-6183
	Fornier Street, Brgy. 2, San	pcicpeoantique@gmail.com
	Jose De Buenavista, Antique	
	5700	
Capiz	2nd Floor, E-Care	(036) 620-0167 / 0938-621-6194
	Multipurpose Cooperative,	pcicpeocapiz@gmail.com
	Water Village, Brgy. Lawa-an,	
	Roxas City, Capiz 5800	
lloilo	#12 Washington Street, Brgy.	(033) 323-3980 / 0938-621-6195
	Democracia, Jaro, Iloilo City	peoiloilomsd2023@gmail.com
	5000	
Negros Occidental	ARDC Building, Brgy. 21, Galo	(034) 445-6434 / 0938-621-6196
	St., Bacolod City, Negros	peonegocc@gmail.com
	Occidental 6100	
PCIC Regional Office No	p. 7	
Bohol	2 <sup>nd</sup> Floor, Roje's Commercial	(038) 518-2987
	Building, Purok 7, Brgy. Bood,	peo.ubay07@gmail.com
	Ubay, Bohol	
Bohol	Bodare MPC Compound, Dao	0947-516-7523
	District, Tagbilaran City	peotag20@yahoo.com
Negros Oriental	Ground Floor Southern Homes	(035) 421-2672
	Apartment, Diego De La Vina	peonegor@yahoo.com
	Road, Daro, Dumaguete City,	
	Negros Oriental	
Siquijor	2nd Floor. Siquijor Business	0905-957-4643
	and Convention Center,	pcicpeosiquijor@gmail.com
	Corner Mabini Sta. Fe St.	
	Poblacion, Siquijor, Siquijor	
PCIC Regional Office No	p. 8	
Leyte	2nd Floor, City Center Park,	0963-185-2632
	Brgy. 60-A, Sagkahan,	peo.leyte@gmail.com
	Tacloban City, Leyte 6500	
Leyte	2nd Floor, 4W Prime	(053) 830-8512 / 0946-376-8890
	Bldg,Toog Highway, Brgy.	peoormoc.msd@gmail.com
	Doña Feliza Mejia, Ormoc City,	
	Leyte 6541	
Southern Leyte	2nd Floor, Visto Building, Rizal	(053) 802-6092 / 0946-376-9070
	Street, Zone 5, Sogod ,	pcicsogod@gmail.com
	Southern Leyte 6606	



PCIC Extension		
Office (Province)	Address	Contact Information
Western Samar	2nd Floor, Cabangangan Bldg,	(053) 837-1139 / 0975-371-1885
	San Roque Extension, Brgy.	pciccatbalogan@gmail.com
	10, Catbalogan City, 6700	
Northern Samar	Bonifacio St., Corner of Saint	(053) 832-0165 / 0926-102-6415
	Michael Academy, Former	peocatarman@gmail.com
	Gildon Bakeshop, Brgy.	
	Casoy, Catarman, Northern	
	Samar 6400	
Eastern Samar	2nd Floor, Jidgar Bldg., Brgy.	(055) 855-5727 / 0962-081-2049
	Can-abong, Borongan City,	peoborongan101@gmail.com
	Eastern Samar 6800	
PCIC Regional Office No	o. 9	
Zamboanga del Norte	F. Lacaya St., Biasong,	(065) 917-9309
	Dipolog City	pcicdipolog@yahoo.com
Zamboanga Sibugay	1/F Mei Hua, Commercial	(062) 957-5059
	Building, National Highway,	peoipil@yahoo.com
	Pangi, Ipil	
Zamboanga del Sur	2/F Mocreco Bldg., Yangco St.,	(062) 945-1396
	Makuguihon, Molave	peomolave@gmail.com
Zamboanga del Norte	National Highway, Goleo,	(065) 918-1991
	Sindangan	peosindangan@gmail.com
Zamboanga City	2/F Samboangan Bayanihan	(062) 975-5544
	Cooperative, Gen. Vicente	peo.zamboanga1@gmail.com
	Alvarez St., Zamboanga City	
PCIC Regional Office No	o. 10	
Agusan del Norte	Rudy Tiu Bldg. III, Montilla	(085) 816-3673 / 0939-622-4821
	Bo.cor.Montilla St., San	pcic10eobutuan@gmail.com
	Ignacio, Butuan City	
Agusan del Sur	G/F NGPI Bldg., Brgy. 5, San	(085) 839-5639 / 0946-503-0477
	Francisco	pcicpeosf@gmail.com
Surigao del Norte	G/F Dumadag Bldg., KM3	0950-709-3979 / 0905-894-3304
	Brgy. Luna, Surigao City	pcicpeosc@gmail.com
Surigao del Sur	2/F JTP Bldg. 2, Door 9,	0930-470-0414 / 0939-622-4828
	Capitol Road, P-Venus, Telaje,	pcicpeotandag@gmail.com
	Tandag City	
Bukidnon	2/F Pinlac Bldg., Sayre Hi-way,	0910-438-6324 / 0906-850-1171
	Hagcol, Valencia City	pcicvalencia@gmail.com
PCIC Regional Office No	o. 11	
Davao del Norte	Capitol Compound, Tagum	0909-163-9254



PCIC Extension	Address	Contact Information
Office (Province)	Address	Contact information
Davao Del Sur	Unit 5-6, NZT Bldg., Luna	0906-773-6496 / 0985-869-6052
	East, Digos City, Davao del	pcicxipeodavaosur@gmail.com
	Sur	
Davao De Oro	Mawab Public Terminal,	0906-773-6463 / 0985-673-8649
	Mawab, Davao De Oro	pcicpeomawab@gmail.com
Davao Occidental	Public Market, Poblacion	0906-773-9611 / 0985-869-6054
	Malita, Davao Occidental	pcicropeomalita@gmail.com
Davao Oriental	DA Compound Matiao, Mati	0985-872-1178
	City, Davao De Oro	pcicpeomati@gmail.com
PCIC Regional Office No	p. 12	
Cotabato	Bartolaba Subdivision, Lanao,	0935-164-4568
	Kidapawan City	pcic12peokidapawan@gmail.com
Sultan Kudarat	Public Terminal, New Isabela,	0967-930-9284
	Tacurong City	pcic12peotacurong@gmail.com
Sultan Kudarat	Andrada Building, Poblacion 1,	0956-962-4514
	Lebak, Sultan Kudarat	peolebak31@gmail.com
Lanao del Norte	Office of the Municipal	0919-203-3490
	Agriculture Farmers Training	peolanao1981@gmail.com
	Center Baroy, Lanao Del Norte	
North Cotabato	Veraj Building, Mabini St.,	0912-011-9783
	Poblacion 2, Midsayap,	pcicmidsayap@gmail.com
	Cotabato	