

ANNEX "A"

Applicant No. _____
O.R. No. _____
Date _____
Amount _____

**RE SERVICE /OPERATING CONTRACT APPLICATION FORM
(Republic Act No. 9513)**

I. GENERAL INFORMATION

- A. Name of Applicant: _____
- B. Authorized Representative: _____
- C. Business
 - 1. Address: _____
 - 2. Telephone Number: _____
 - 3. Fax Number: _____
 - 4. Email Address: _____
- D. RE Sector of interest: _____
- E. Capacity (MW): _____
- F. Type of Application
(Pre-Dev or Development) _____
- G. Area, Number of Blocks and
Location applied for: _____
- H. Approximate area covered
(in has or sq. m): _____
- I. Brief description of
primary and secondary
purpose as authorized by
its Articles of Incorporation
(for juridical person only): _____

II. COMPANY/BUSINESS BACKGROUND

- A. Controlling Stockholder's (for corporation only)
(List names of majority stockholders and the percentage of their
holdings)
 - a) _____ - _____ %
 - b) _____ - _____ %
 - c) _____ - _____ %
 - d) _____ - _____ %
 - e) _____ - _____ %

- B. Company Directors and Officers
(List of Board Members and Company Officers)

NAME / POSITION

- a) _____
- b) _____
- c) _____
- d) _____
- e) _____

- C. Parent/Subsidiary / Affiliates
(List Names, Addresses and Nature of Business)

- a) _____
- b) _____

- D. No. of years in operation: _____

- E. Description/History of the Company/Business:
 - 1. Organizational structure
 - 2. Ownership structure
 - 3. Field of specialization

III. TECHNICAL AND FINANCE CAPABILITIES

- A. Key Personnel in the Organization
 - 1. Corporate officers/ hierarchy/ expertise
 - 2. Staff members / experience
- B. List of On-going or Completed RE or Energy-Related Contracts/ Agreements
 - 1. Brief description
 - 2. Type of energy resource
 - 3. Location
 - 4. Contract term/ implementation period
 - 5. Client
- C. Latest Financial Statements
 - 1. Income Statement
 - 2. Balance Sheet

IV. CERTIFICATION:

It is certified that the foregoing information are true and correct. It is understood that any omission or misinterpretations of the required information shall be sufficient cause for the rejection of this application.

Date

Duly Authorized Representative

Name of Applicant