MEMORANDUM CIRCULAR No.    002
Series of 2015

SUBJECT: HARMONIZATION OF REGISTRATION FORMS, ISSUED CERTIFICATES AND PROCEDURES FOR CHEMICAL CONTROL ORDERS (CCOs), AND SMALL QUANTITY IMPORTATION (SQI)

I. RATIONALE AND OBJECTIVES

More than ten (10) years of the devolution of functions to the EMB Regional Offices for the implementation and enforcement of controlled chemicals and other rules and regulations under DENR Administrative Order 2002-02 of RA 6969 requires review and assessment. In the conducted Regional Offices' assessment and monitoring, the issued permits and clearances, relevant forms for the various applications and processing procedures that are considered as important documents are found to be varied in formats in different regions.

As such, important documents need to be harmonized and follow a basic template to present single representation of the EMB. Further this Circular aims to:

1.1 Standardize the information to effectively implement the policies and monitor pursuant to the provisions of RA 6969.

1.2 Strengthen the integrity of issued certificates against possible falsification.

II. GUIDELINES

All Regional Offices should provide and observe the following procedures on handling application forms and preparing the issuance of permits and clearances:

2.1 Control numbers must be different among registrants (refer to Annex A for the coding number guidelines) in different Regional Offices.

2.2 All application forms should be following the required formats for CCO Registration Form of Asbestos (Annex B), CCO Registration Form of Mercury and Cyanide (Annex C) and Importation Clearances Form (Annex D), including the Small Quantity Importation Clearance Form (Annex E).

Protect the environment... Protect life...
2.3 All application forms submitted to the EMB Regional Office must be notarized.

2.4 No items in the basic template of forms must be edited out or deleted, however items may be added as deemed necessary by the Regional Director.

2.5 No items in the Terms and Conditions of the Certificates Templates must be edited out or deleted. However conditions may be added as deemed necessary by the Regional Director.

2.6 In case a major revision of the forms and certificates is necessary the Regional Office must submit to the Central Office the proposed revision so that all changes will be implemented across all regional offices. Major revision of forms and certificates includes any of the following:

2.6.1 Deletion or changes of items from the basic template.
2.6.2 Changes in the format of the basic template.

2.7 Facility address reflected in the certificate and registration must be within the jurisdiction of the issuing Regional Office.

2.8 The regulated chemical name must be reflected in the certificates issued and not the product name (except in the case of confidential business information). Product name can be placed in parenthesis alongside the chemical name (Annex E).

2.9 Volume of importation must be indicated in the issued importation clearance. This must be consistent with the unit of measure indicated in the company’s Bill of Lading (e.g. Liters, Metric Ton).

2.10 Validity period of the Certificate must not exceed the period stipulated under Title II of RA6969. However validity period may be less than the prescribed period as the Regional Director deemed necessary (e.g. amendments, special projects).

2.11 Company information reflected on the certificate should be the same as it appears on the submitted notarized form (e.g. Company name should not be truncated or abbreviated, chemical name should not be written as chemical formula or chemical symbol).

III. OTHER GENERAL PROCEDURES

There shall be nationwide agreements and compliance with the following instructions on processing:
3.1 In the review and evaluation of the Small Quantity Importation (SQI) Clearance, chemical concentrations expressed as range will take the maximum value in computing for the quantity of the chemical (e.g., in 20-40%, the substance weight shall be computed using 40% to identify whether it is small quantity or not).

3.2 SQI Clearance application for three (3) consecutive years shall be directed to apply and undergo for PreManufacture and PrelImportation Notification (PMPIN) process.

3.3 No processing of SQI application for chemical importation more than 1,000 kg./year.

3.4 No acceptance and issuance of certificate to those biologically requested products and technologies (i.e., enzymes) since EMB has no mandate and no testing capability.

3.5 All registration and importation clearance forms shall be revised.

3.6 For chemicals and chemical substances with PCL components, necessary endorsement should be made to EMB - Central Office for inventory of use and volume of the substance.

3.7 Renewal of controlled chemicals (Cyanide, Mercury, Asbestos) shall be strictly reviewed.

3.8 No issuance of Importation Clearance for Polychlorinated Biphenyls (PCBs).

This Circular shall take effect immediately.

ATTY. JONAS R. LEONES
DENR Undersecretary and concurrent EMB Director
ANNEX A – Control Number Guidelines

The control number is a unique number assigned to a particular registrant and chemical assigned to an application. This will identify the issuing regional office, the year registered and the specific chemical registered.

For Registration Form

```
CCOR - R - XX - YYYY - ######
```

- Sequential numbering
- Year of Registration
- Chemical (Cn - Cyanide, Hg - Mercury, AS - Asbestos)
- R - Regional Office Code
- r - denotes registration form

Regional Office Code

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<tr>
<th>Region</th>
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<td>CARAGA</td>
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For Importation Clearance

```
CCO - R - XX - YYYY - ######
```

- Sequential numbering
- Year of Registration
- Chemical (CN - Cyanide, Hg - Mercury, AS - Asbestos)
- R - Regional Office Code
- Importation clearance
Annex B – CCO Registration Form of Asbestos

Republic of the Philippines
Department of Environment and Natural Resources
Environmental Management Bureau
Regional Office Address
Contact Number

Control Number: CCO-R-AS-YYYY-#######

ASBESTOS REGISTRATION FORM
(Accomplish one set of form per chemical)

I. GENERAL INFORMATION

1. COMPANY NAME ____________________________________________
   OFFICE ADDRESS __________________________________________
   PLANT ADDRESS / STORAGE FACILITY (If different from above)
   _________________________________________________________

2. TELEPHONE NUMBER ________________________________
   FAX NUMBER __________________________________________
   EMAIL ADDRESS _________________________________________

3. CONTACT PERSON / DESIGNATION
   _________________________________________________________

4. CATEGORY OF APPLICANT / TYPE OF BUSINESS (Check all applicable)
   □ Importer
   □ Manufacturer
   □ Owner of industrial, commercial and institutional structures with sprayed-
     on and friable asbestos
   □ Waste Service Provider (transporter, treater, disposer)

5. STATUS OF COMPLIANCE TO ENVIRONMENTAL AND OTHER PERMITS

<table>
<thead>
<tr>
<th>Permit</th>
<th>Permit Number</th>
<th>Date Issued</th>
<th>Expiry Date</th>
<th>Place of Issue</th>
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<tbody>
<tr>
<td>Environmental Compliance</td>
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<td>Certificate</td>
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<td>Permit to Operate (Air)</td>
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<td>Discharge Permit (Effluent)</td>
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<td>Business Permit</td>
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</tbody>
</table>
II. ASBESTOS SPECIFIC INFORMATION (For all categories, if applicable)

1. AVERAGE ANNUAL / QUANTITIES IMPORTED / DISTRIBUTED AND USED

2. QUANTITY OF PRODUCTS PRODUCED (In kilos/year) ________________

3. QUANTITY OF BULK ASBESTOS (In kilos/year) ________________

4. LIST OF ASBESTOS CONTAINING PRODUCTS IMPORTED / DISTRIBUTED
   AND/OR MANUFACTURED
   ____________________________  ___________ ton / kg.
   ____________________________  ___________ ton / kg.
   ____________________________  ___________ ton / kg.

5. TYPE OR VARIETY OF ASBESTOS ________________________

6. PROCESS FLOW CHART AND TYPE OF ACTIVITY EXPOSED TO ASBESTOS
   (Use additional sheet, if necessary)

7. QUANTITY OF ASBESTOS WASTE PRODUCED / GENERATED ANNUALLY / QUARTERLY
   - Friable (In kilos / year) ________________
   - Non-friable (In kilos / year) ________________

III. MANAGEMENT INFORMATION

1. TOTAL NUMBER OF WORKFORCE ________________________

2. NUMBER & CATEGORY OF EMPLOYEES THAT MAY BE EXPOSED TO
   ASBESTOS RELEASES. ASSESS THE NATURE AND EXTENT OF
   EXPOSURE TO ASBESTOS (INCLUDE MAXIMUM NUMBER OF WORKERS
   AND MAXIMUM HOURS PER DAY OF EXPOSURE AND ANY MEDICAL
   SUPERVISION OF PERSONS WHO ARE EXPOSED TO ASBESTOS).

3. EDUCATION AND TRAINING PROGRAM ORGANIZED FOR ASBESTOS
   HANDLING OVER THE LAST THREE YEARS (NO.) ________________________
   DETAILS OF THOSE TRAINING PROGRAMS ORGANIZED.

<table>
<thead>
<tr>
<th>Title / Name</th>
<th>Organizer</th>
<th>Date/Duration</th>
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IV. PREVENTIVE AND CONTROL MEASURES (Use additional sheet if necessary)

1. DESCRIBE THE GENERAL PREVENTIVE AND CONTROL PROGRAM OF
   THE COMPANY FOR ASBESTOS INCLUDING ITS VENTILATION SYSTEM

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2. DESCRIBE HOUSEKEEPING PRACTICES DEVELOPED AND IMPLEMENTED.


3. IDENTIFY & DESCRIBE EQUIPMENT USED


4. LIST OF RESPIRATORY PROTECTIVE EQUIPMENT AVAILABLE FOR PERSONNEL / WORKER DURING HANDLING AT THE PREMISE AND DURING TRANSPORTING.


5. DESCRIBE IN BRIEF THE CONTINGENCY PROCEDURES / PLAN (In case of emergency).


V. TREATMENT, STORAGE & DISPOSAL INFORMATION (For all categories)

1. DESCRIBE STORAGE METHODS, PROCEDURES, FACILITIES AND LOCATION.


2. DESCRIBE PROCEDURES FOR TRANSPORTATION OF RAW FIBER AND FINISHED PRODUCTS.


3. ANY PLANNED RENOVATION(S) AND/OR REMOVAL OR MAJOR IMPROVEMENTS TO BE MADE IN THE NEXT 12 MONTHS?

☐ Yes
☐ No
4. LIST OF ATTACHMENTS

- Pertinent Environmental Permits
- Results of air monitoring data of asbestos
- Certification of liabilities of parties to compensate for damage to properties and life in case of emergencies & accidents.
- Photo documentation of the plant's operation, storage facilities and others.
- Process flow chart
- Bill of Lading of all shipment per year (for importers)

VI. NOTARIZED CERTIFICATION

THE UNDERSIGNED CERTIFY THAT THE INFORMATION PROVIDED IN THIS FORM IS TRUE AND ACCURATE.

NAME: ____________________________________________

DESIGNATION / POSITION: ____________________________________________

SIGNATURE: ___________________________ DATE: ___________________________

I acknowledge that this application form is a legally binding document, and I declare, under the penalties of perjury, that the same has been accomplished in good faith, verified by me, and, to the best of my knowledge and belief, is true and correct pursuant to the regulations issued under authority thereof.

(Notary Public)
Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (implementing Rules and Regulation of RA 6969) and DENR Administrative Order 2000-02 (CCO for Asbestos), this CCO Registration Certificate is issued to

**NAME of COMPANY**

Address

for having complied with the Chemical Control Order requirements as

Importer / Distributor / User / Transporter of

**NAME of CHEMICAL**

CAS #

subject to the following

**TERMS AND CONDITIONS**

1. **Company Name** shall comply with the proper storage, handling, labelling and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969 and DAO 2000-02.

2. **Company Name** shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).

3. **Company Name** shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and/or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of **Chemical Name**.

4. Any violation of the Terms and Conditions stipulated shall be subjected to the penalty provision of RA6969.

Issued on ________________________ and valid until ________________________

**REGIONAL DIRECTOR**

______________________________

OR # _______________________ OR Date ________________________
Annex C - CCO Registration Form of Mercury and Cyanide

Republic of the Philippines
Department of Environment and Natural Resources
Environmental Management Bureau
Regional Office Address
Contact Number

Control Number: CCO-R-XX-YYYY-####

MERCURY / CYANIDE REGISTRATION FORM
(Accomplish one set of form per chemical)

I. GENERAL INFORMATION

1. COMPANY NAME ____________________________

OFFICE ADDRESS ________________________________

PLANT ADDRESS / STORAGE FACILITY (If different from above)

______________________________________

2. TELEPHONE NUMBER _________________________

FAX NUMBER _________________________________

EMAIL ADDRESS ______________________________

3. CONTACT PERSON / DESIGNATION

__________________________________________

4. CATEGORY OF APPLICANT / TYPE OF BUSINESS (Check all applicable)
   ☐ Importer
   ☐ Distributor
   ☐ User
   ☐ Waste Service Provider (transporter, treater, disposer)

5. STATUS OF COMPLIANCE TO ENVIRONMENTAL AND OTHER PERMITS

<table>
<thead>
<tr>
<th>Permit</th>
<th>Permit Number</th>
<th>Date Issued</th>
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<td>Environmental Compliance Certificate</td>
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II. CHEMICAL SPECIFIC INFORMATION (For all categories, if applicable)

7. CHEMICAL NAME _________________ CAS NUMBER _________________

8. AVERAGE ANNUAL QUANTITY IMPORTED _________________ kg/year

9. AVERAGE ANNUAL QUANTITY DISTRIBUTED _________________ kg/year

10. AVERAGE ANNUAL QUANTITY USED _________________ kg/year

11. QUANTITY OF PRODUCTS PRODUCED _________________ kg/year

12. PROCESS FLOW CHART AND TYPE OF ACTIVITY EXPOSED TO ASBESTOS (Use additional sheet, if necessary)

13. QUANTITY OF WASTE PRODUCED / GENERATED ANNUALLY / QUARTERLY

III. MANAGEMENT INFORMATION

4. TOTAL NUMBER OF WORKFORCE _________________

5. NUMBER & CATEGORY OF EMPLOYEES THAT MAY BE EXPOSED TO CHEMICAL RELEASES. ASSESS THE NATURE AND EXTENT OF EXPOSURE TO THE CHEMICAL (INCLUDE MAXIMUM NUMBER OF WORKERS AND MAXIMUM HOURS PER DAY OF EXPOSURE AND ANY MEDICAL SUPERVISION OF PERSONS WHO ARE EXPOSED TO THE CHEMICAL).

6. EDUCATION AND TRAINING PROGRAM ORGANIZED FOR CHEMICAL HANDLING OVER THE LAST THREE YEARS (NO.) _________________

DETAILS OF THOSE TRAINING PROGRAMS ORGANIZED (Attach additional sheet if necessary).

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IV. PREVENTIVE AND CONTROL MEASURES (Use additional sheet if necessary)

6. DESCRIBE THE GENERAL PREVENTIVE AND CONTROL PROGRAM OF THE COMPANY FOR ASBESTOS INCLUDING ITS VENTILATION SYSTEM

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</table>
7. DESCRIBE HOUSEKEEPING PRACTICES DEVELOPED AND IMPLEMENTED.

8. IDENTIFY & DESCRIBE EQUIPMENT USED

9. LIST OF RESPIRATORY PROTECTIVE EQUIPMENT AVAILABLE FOR PERSONNEL / WORKER DURING HANDLING AT THE PREMISE AND DURING TRANSPORTING.

10. DESCRIBE IN BRIEF THE CONTINGENCY PROCEDURES / PLAN (In case of spill or emergency).

V. TREATMENT, STORAGE & DISPOSAL INFORMATION (For all categories)

6. DESCRIBE STORAGE METHODS, PROCEDURES, FACILITIES AND LOCATION (Attach photo of storage facility).

7. DESCRIBE PROCEDURES FOR TRANSPORTATION OF RAW CHEMICAL AND FINISHED PRODUCTS.

8. LIST OF ATTACHMENTS

- ☐ Pertinent Environmental Permits
- ☐ Results of air monitoring data of asbestos
- ☐ Certification of liabilities of parties to compensate for damage to properties and life in case of emergencies & accidents.
- ☐ Photo documentation of the plant's operation, storage facilities and others.
- ☐ Process flow chart
- ☐ Bill of Lading of all shipment per year (for importers)
VI. NOTARIZED CERTIFICATION

THE UNDERSIGNED CERTIFY THAT THE INFORMATION PROVIDED IN THIS FORM IS TRUE AND ACCURATE.

NAME: __________________________

DESIGNATION / POSITION: __________________________

SIGNATURE: __________________________ DATE: ____________

I acknowledge that this application form is a legally binding document, and I declare, under the penalties of perjury, that the same has been accomplished in good faith, verified by me, and, to the best of my knowledge and belief, is true and correct pursuant to the regulations issued under authority thereof.

______________________________

(Notary Public)
Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (Implementing Rules and Regulation of RA 6969) and DENR Administrative Order 1997-38 (CCO for Mercury and Mercury Compound), this Registration Certificate is issued to

NAME of COMPANY
Facility Address

for having complied with the Chemical Control Order requirements as Importer / Distributor / User / Transporter of

NAME of CHEMICAL
CAS #

subject to the following the following

TERMS AND CONDITIONS

1. Company Name shall comply with the proper use, storage, handling, labelling and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969 and DAO 1997-38.

2. Company Name shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).

3. Company Name shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and /or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of Chemical Name.

4. Any violation of the Terms and Conditions stipulated shall be subjected to the penalty provision of RA 6969.

Issued on ___________________ and valid until ___________________.

REGIONAL DIRECTOR

OR # __________ Amount: __________ OR Date __________
CCO IMPORTATION CLEARANCE

Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (Implementing Rules and Regulation of RA 6969) and DENR Administrative Order 2000-02 (CCO for Asbestos)

NAME of COMPANY
Address

is hereby granted clearance for the importation of

NAME of CHEMICAL
CAS #

with a volume of

Volume
subject to the following

TERMS AND CONDITIONS

1. Company Name shall comply with the proper storage, handling, labelling, transport and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969 and DAO 2000-02.

2. Company Name shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).

3. Company Name shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and/or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of Chemical Name.

4. Chemical Name shall be imported and used / distributed only to registered users. Under no circumstances shall Chemical Name be used for application not included in the allowable use under Sec. of DAO 2000-02

Issued on and valid until

REGIONAL DIRECTOR

OR # Amount: OR Date
Republic of the Philippines  
Department of Environment and Natural Resources  
Environmental Management Bureau  
Regional Office Address  
Contact Number  

Registration Certificate Number: CCO-R-Hg-YYYY-#####  
Importation Clearance Number: CCO-R-Hg-YYYY-#####  

Importer/User/Distributor Copy  

**CCO IMPORTATION CLEARANCE**  
Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (Implementing Rules and Regulation of RA 6969) and DENR Administrative Order 1997-38 (Mercury and Mercury Compound)

**NAME of COMPANY**  
Address  
is hereby granted clearance for the importation of  

**NAME of CHEMICAL**  
CAS #  
with a volume of  

**Volume**  
subject to the following

**TERMS AND CONDITIONS**  

1. *Company Name* shall comply with the proper storage, handling, labelling, transport and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969 and DAO 2000-02.

2. *Company Name* shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).

3. *Company Name* shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and/or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of *Chemical Name*.

4. *Chemical Name* shall be imported and **used / distributed** only to registered users. Under no circumstances shall *Chemical Name* be used for application not included in the allowable use under Sec. of DAO 1997-38

Issued on ______________ and valid until ______________.

**REGIONAL DIRECTOR**  
OR # ______________ Amount: ______________ OR Date ______________
Republic of the Philippines  
Department of Environment and Natural Resources  
Environmental Management Bureau  

Regional Office Address  
Contact Number  

Registration Certificate Number: CCO-R-CN-YYYY-#####  
Importation Clearance Number: CCO-R-CN-YYYY-#####  

Importer/User/Distributor Copy  

**CCO IMPORTATION CLEARANCE**  

Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (Implementing Rules and Regulation of RA 6969) and DENR Administrative Order 1997-39 (CCO for Cyanide and Cyanide Compound)  

**NAME of COMPANY**  
Address  

is hereby granted clearance for the importation of  

**NAME of CHEMICAL**  
CAS #  

with a volume of  

**Volume**  

subject to the following  

**TERMS AND CONDITIONS**  

1. **Company Name** shall comply with the proper storage, handling, labelling, transport and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969 and DAO 2000-02.  

2. **Company Name** shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).  

3. **Company Name** shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and /or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of **Chemical Name**.  

4. **Chemical Name** shall be imported and used / distributed only to registered users. Under no circumstances shall **Chemical Name** be used for application not included in the allowable use under Sec. of DAO 1997-39  

Issued on ___________________________ and valid until ___________________________.  

**REGIONAL DIRECTOR**  

OR # ___________________ Amount: ___________________ OR Date ___________________
Annex D – Importation Clearance Form for Asbestos, Cyanide, Mercury

Republic of the Philippines
Department of Environment and Natural Resources
Environmental Management Bureau
Regional Office
Address
Contact Number

IMPORTATION CLEARANCE FOR CHEMICALS WITH CHEMICAL CONTROL ORDERS OF CYANIDE, MERCURY AND ASBESTOS

Date Applied: ____________________________
Application Control Number: _______________
Registry Reference Code: ___________________
CCO Registration #: _______________________
Date Issued: _____________________________

I. Applicant’s Name: ____________________________
II. Business Address: ____________________________ Contact Number: ____________________________
III. Storage Facility Address: ______________________ Contact Number: ____________________________
IV. Contact Person: ____________________________ Contact Number: ____________________________
V. Position / Designation: ____________________________ Fax Number: ____________________________
   Email address: ____________________________

VI. Category of Applicant (Importer / User / Distributor): ____________________________
VII. Environmental and Other Permits Issued:

<table>
<thead>
<tr>
<th>Permit</th>
<th>Permit Number</th>
<th>Date Issued</th>
<th>Expiry Date</th>
<th>Place of Issue</th>
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<tbody>
<tr>
<td>Environmental Compliance Certificate</td>
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<td>Permit to Operate (Air)</td>
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<tr>
<td>SEC Registration</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Permit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VIII. List of Clients / End-user (Provide additional Sheet if necessary)

<table>
<thead>
<tr>
<th>Name of firm</th>
<th>Storage Facility Address</th>
<th>CCO Registration #</th>
<th>Volume Required</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IX. Shipper’s Information / Transaction Data

Country of Origin ________________________________________________
Name of Exporting Company _________________________________________
Business Address ________________________________________________
Mode of Shipment (by air / by sea) ________________________________
Expected Port of entry / Loading _________________________________
Port Address __________________________________________________
Expected Date of Arrival _______________________________________


X. Present inventory of same substance (under applicant's custody).

Quantity (in kg): ___________ Size of Storage Area (in m²): ___________

XI. Volume intended for importation ___________ kg.

XII. Fees ___________ OR# ___________ Date ___________

List of Requirements / Attachments

☐ 1. Accomplished and Notarized form.
☐ 3. Copy of Registration.

Additional Requirement for Renewal

☐ 1. Bill of Lading
☐ 2. Summary of consumption/usage/delivery/service provided
☐ 3. Endorsement form from Bureau of Fishery and Aquatic Resources (BFAR) for Cyanide importation.
☐ 4. Endorsement form from Mines and Geoscience Bureau (MGB) for Mercury Importation.
☐ 5. Asbestos ambient test results for asbestos manufacturing.

Note: For renewal application, endorsement (from BFAR or MGB) is no longer required unless there is an increase in importation volume where applicant has to go through CCO Registration Process.

XIII. NOTARIZED CERTIFICATION

THE UNDERSIGNED CERTIFY THAT THE INFORMATION PROVIDED IN THIS FORM IS TRUE AND ACCURATE.

NAME: ____________________________

DESIGNATION / POSITION: ____________________________

SIGNATURE: ____________________________ DATE: ____________________________

I acknowledge that this application form is a legally binding document, and I declare, under the penalties of perjury, that the same has been accomplished in good faith, verified by me, and, to the best of my knowledge and belief, is true and correct pursuant to the regulations issued under authority thereof.

(Notary Public)
### SMALL QUANTITY IMPORTATION (SQI)

(Please type or print answers)

<table>
<thead>
<tr>
<th>1. Type of application</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ New</td>
</tr>
<tr>
<td>☐ Renewal [Previous EMB approval as Annex ___]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Information on chemical importer in the Philippines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Business Name: ____________________________</td>
</tr>
<tr>
<td>Facility Address: ______________________________________</td>
</tr>
<tr>
<td>Name of contact person: ______________________________</td>
</tr>
<tr>
<td>Designation: __________________________________________</td>
</tr>
<tr>
<td>Telephone: ____________________________________________</td>
</tr>
<tr>
<td>Fax: - ____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Category of Registrant: ☐ Importer ☐ Distributor ☐ End-user</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country of origin: ____________________________</td>
</tr>
<tr>
<td>Name of Manufacturer: ________________________________</td>
</tr>
<tr>
<td>Address of Manufacturer: ______________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Information on chemical substance (SQI Chemical)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chemical name: ________________________________</td>
</tr>
<tr>
<td>CAS number: ________________________________</td>
</tr>
<tr>
<td>Chemical/structural formula: ____________________</td>
</tr>
<tr>
<td>Product Name: ________________________________</td>
</tr>
<tr>
<td>Specific use of the substance: __________________</td>
</tr>
</tbody>
</table>

5. Inventory status of substance (Check all applicable chemical inventories where the chemical substance is currently listed.)

US TSCA Europe EINECS ELINCS
Australia AICS
JAPAN MITI Canada DSL or NDSL
Korea KECI
Philippines – not a PCL substance

6. Information on product/mixture, containing the chemical substance (if the subject of application is component chemical)

Name of product/mixture (as it will appear on bill of lading) __________
Concentration of SQI chemical in product/mixture (%) __________
Allowed annual import volume of product/mixture based on 1000 kg/yrim (kg) __________
Physical Properties of the Chemical (e.g. flammable, corrosive etc.)

7. The Material Safety Data Sheet (MSDS) of the chemical substance is attached as Annex _____.
Other attachments (Please specify.) __________________________________________

8. Signature over complete name of applicant Date submitted:

Name and Signature: ___________________________
Date: ___________________________

9. Signature over complete name of EMB receiving officer Date received:

Name and Signature: ___________________________
Date: ___________________________

10. Fees __________ OR# __________ Date __________
ANNEX E – SQI Importation Clearance Form

Republic of the Philippines
Department of Environment and Natural Resources
Environmental Management Bureau

Regional Office Address
Contact Number

SQI Certificate Number
SQI-Region-Year-XXX
Importer/User/Distributor Copy

SMALL QUANTITY IMPORTATION CLEARANCE

Pursuant to Republic Act 6969 (Toxic Chemical and Hazardous and Nuclear Waste Control Act) and implemented by DENR Administrative Order 1992-29 (Implementing Rules and Regulation of RA 6969), SQI Registration Certificate is issued to

NAME of COMPANY
Address

for having complied with the Small Quantity Importation requirements as Importer / Distributor / User / Transporter of

NAME of CHEMICAL (PRODUCT NAME)
CAS #

subject to the following the following

TERMS AND CONDITIONS

1. **Company Name** is allowed to import **Name of Chemical** of volume not greater than 1000 kgs. per year whether as component chemical or as pure substance. Any importation in excess of 1000 kgs. shall undergo Pre Manufacturing Pre Importation Notification registration procedure.

2. **Company Name** shall comply with the proper storage, handling, labeling and disposal requirements in accordance with the Material Safety Data Sheet and provisions of RA 6969.

3. **Company Name** shall comply with other applicable environmental policies and procedures under RA 9275 (Clean Water Act), RA 8749 (Clean Air Act), RA 9003 (Ecological Solid Waste Management Act) and PD 1586 (Environmental Impact Statement System).

4. **Company Name** shall be held liable in cases of injury or damage to public health and the environment and shall properly compensate the affected parties and/or restore damaged areas resulting from misuse, mishandling, transport accident and improper disposal of **Name of Chemical**.

5. **Company Name** shall observe proper housekeeping and maintenance of the storage facility to reduce the risks of accidents and contaminations.

6. **Company Name** shall strictly follow proper handling, labelling and storage procedures including safety precautions i.e. wearing of Personal Protective Equipments (PPEs) and emergency procedures as indicated in the Material Safety Data Sheets (MSDS).

7. **Company Name** shall maintain an annual inventory of this material and all pertinent documents shall be kept in a file and made available to authorized personnel from EMB for inspection.

8. SQI may be renewed a maximum of 3 times. Succeeding importations will require PMPIN Compliance Certificate.

9. Any violation of the Terms and Conditions stipulated shall be subjected to the penalty provision of RA6969.

Issued on ________________, and valid for 12 consecutive months from the date of issuance or until such time that the importation limit of 1000 kgs per year has been completed, which ever comes earlier or otherwise revoked by the Environmental Management Bureau.

REGIONAL DIRECTOR

OR # __________ AMOUNT __________ OR Date __________