

**BUREAU OF JAIL MANAGEMENT AND PENOLOGY (BJMP)
HOUSING BOARD COMMITTEE**

**APPLICATION PROCESS & CHECKLIST OF REQUIREMENTS
FOR BJMP HOUSING PROGRAM OF NHA**

1. SUBMIT DULY FILLED UP AND NOTARIZED APPLICATION FORM AND COMPLETE REQUIREMENTS IN BROWN FOLDER WITH TABBINGS (FOR UNIFORMITY) TO THE HOUSING PROGRAM COORDINATOR/SECRETARIAT, BJMP HOUSING BOARD COMMITTEE.
2. APPLICATIONS WILL BE FORWARDED TO NHA FOR PRE-QUALIFICATION.
3. PRE-QUALIFIED APPLICANTS SHALL BE INFORMED FOR SIGNING OF THE NHA INDIVIDUAL LOAN AGREEMENT AND OTHER DOCUMENTS.

REQUIREMENTS:

- A. SWORN APPLICATION FORM** **“A”**
(TO BE PROVIDED BY SECRETARIAT, BJMP HOUSING BOARD COMMITTEE)
- B. PROOF OF INCOME (ANY OF THE FOLLOWING)** **“B”**
1. Certification of Compensation Withholding Tax Certificate (BIR 2316) - photocopy
2. BIR - Certified Latest Income Tax Return (ITR) - photocopy
- C. PROOF OF IDENTITY / CIVIL STATUS** **“C”**
For Single Applicants
1. Birth Certificate – Civil Registry or NSO (photocopy)
2. BJMP ID (original to be presented and photocopy back to back)
3. Valid Government – Issued ID
For Married Applicants
1. Birth Certificate – Civil Registry or NSO (photocopy)
2. Marriage Contract – Civil Registry or NSO (photocopy)
3. BJMP ID (original to be presented and photocopy back to back)
4. Affidavit of Separation-In-Fact – for applicants not legally separated/annulled (original)
5. Valid Government – Issued ID
- D. CERTIFICATE OF DUTY STATUS (ORIGINAL)** **“D”**
- E. TWO (2) CONSECUTIVE LATEST PAYSLIP
(ORIGINAL TO BE PRESENTED and PHOTOCOPY)** **“E”**
- F. LATEST SWORN STATEMENT OF ASSETS, LIABILITIES AND NETWORTH
(ORIGINAL TO BE PRESENTED and PHOTOCOPY)** **“F”**
1. 1 piece 2x2 ID PHOTO
2. Photocopy of Community Tax Certificate (CTC) and Tax Identification Number (TIN)
3. Authority to Deduct
- G. CERTIFICATE OF NO PENDING CRIMINAL AND ADMINISTRATIVE CASE – Original Copy** **“G”**

Name of Applicant: _____
(Maiden Name for Female) Rank Last Name First Name Middle Name Badge No.

Unit Assignment: _____

Contact Number: _____

Specific Project Location: _____

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Acknowledgement Receipt

Name of Applicant: _____
(Maiden Name for Female) Rank Last Name First Name Middle Name Badge No.

Unit Assignment: _____

Contact Number: _____

Specific Project Location _____:

Received by: _____

Date Received: _____