July 28, 2022



The Regional Technical Director for Lands DENR-MIMAROPA

Roxas Boulevard, Manila

Sir,

The undersigned would like to request for the cancellation of approved plans CSD-04-013843-D and CSD-04-0157620-D for the simple reason that my father Ricaredo G. Gabat and Leoncio Galicha are both deceased and their agreement did not push thru.

This request is being made for the heirs of Ricaredo G. Gabat who is the original owner.

Thank You. God bless you.

For the heirs of Ricaredo G. Gabat G. Gabat 97. 1996 09308671961/09057261651

REQUITO G. GABAT

Brgy. Poctoy, Odiongan, Romblor

NIXON G. GABAT

Poblacion, Ferrol, Romblon

SYLVIA G. GABAT Alcantara, Rombion

SUBSCRIBED AND SWORN TO BEFORE ME____AT QUEZON CITY

Doc. No.

Series of

CULES P. GUZMAN ATTY. HE

Until Dec. 30, 2022, Quezon City PTR No. 2430 2, 01-03-2022, Quezon City MCLE Exemption VINo. 00278; April 4, 2022 IBP No. AR 4809 6148, 01-05-2022; Quezon City Admin No. NP-135 (2020-2021); Roll No. 32720

Jurisdiction, Quezon City 118A Luna St., Project 4, Quezon City

Drovince		CERTIFICA			Regist	try No.	
Province ROMBLON City/Municipality_SANTA_MARIA 2010-8						-8	
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24 MARCH 2010					82		- I louis
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8. RELIGION/RELIGIOUS SECT	9.	CITIZENSHIP	10. RES		(House No., St. NO IPC IO]	, Barangay, City/Muni N SUR	cipality, Provinc
ROMAN CATHOLIC		FILIPINO		TA. MAF	RIA, ROMI	BLON, PHILIP	
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Underlying cause II. Other significant conditi		REBROVASCULAR ACCOUNTY to death:	CIDENT			φ <u>γ</u> γ γ	
19c. MATERNAL CONDITION			ears old)	1973	V . 2		
a. pregnant,	b. pre	egnant, in c. less to	han 42 day	s after	d. 42 da	ays to 1 year after_	e. Non
104 DEATH BY EVTERNAL CA	ALICEC						20 AI
a. Manner of death (Hom	icide, Suic	ide, Accident, Legal interven	ntion, etc.)_	ALLANES	N F. MAGA	AHTANOL (GD)	S) (S
b. Place of Occurrence of	External	Cause (e.g. home, farm, facto	ory, street,	sea, etc.)	AGALLANI	M THANG	Hard Control
21a.ATTENDANT 2 Pu			AND IS	1000000 10	ASSIST COLOR	21b. If attended, sta	te duration (
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	FOR CHILDREN /			
4. AGE OF MOTHER	15. METHOD OF DELIVERY(N vertex, if others, specify)	ormal spontaneous	16. LENGTH OF PREGNANCY: (in completed weeks)	
17. TYPE OF BIRTH (Single, Twin, Triplet, etc)			PLE BIRTH, CHILD WAS nd, Third, etc) VOJEMON	
COLUMN CO	MEDICAL	ERTIFICATE	A SANDA HAZ	
19a. CAUSES OF DEATH		Second I am		
a. Main disease/condition	TA	GAB.	CAREDO, SR. GALVER	2
b. Other diseases/condition			and the other control of the control	
c. Main maternal disease	e/condition affecting infant	anedy the year of the		
d. Other maternal disease	e/condition affecting infant			
e. Other relevant circumst	lances	L. AMARIAN	TIA 500 V COUNTY FACTOR OF THE	-
raje (same sa 1920)	CONTINUETO	O FILL UP ITEM 2	20	
I HEREBY CERTI	POSTMORTEM CE FY that I have performed an autops	The second se	of the deceased and that the cause of death w	
		Provide Significant	ENSIONER	4
		A TOTAL	entro de la companione de	
Signature	A CONTRACTOR SECU		ation .	
Name in Print		Address	The state of the s	
Date				
I HEREBY CERT	CERTIFICATION IFY that I have embalmedRICA ed by the Department of Health.	ON OF EMBALME AREDO, SR. GA	R AVORESSED following	
Name in Print JONATHA	NATHAN F. MAGALLANES AN F. MAGALLANES DAGAT, ODIONGAN, ROMBLON	_ License No.	03-00-3461 3/22/06 at MANILA 3/17/12	
1. That RICARI	EDO, SR, GALVERO GABAT	in accordance v	1711 年 1702代码车 电电影正数 化氯化物 数准 网络主义之际	in
CONGE	EPCION SUR, STA. MARIA, ROM	ABLON	and was buried/cremated on	in
	sed at the time of his/her death:			
	was not attended.	A MARIA, ROM	TALLEY BULLY CONTROL TO A	
		Printed to the second	24520 a Valendou vaev	
4. That the reason	for the delay in registering this death	was due to	CONTRACTOR (SGD), RODERICK G. GEZAR. RODERICK G. GEZAR.	
DOM:	SENCETIMERED A MAIOTEMATE		The STATE OF THE S	
5. That I am execu	ting this affidavit to attest to the truth	fulness of the fore	egoing statements for all legal intents and purpose	es.
In truth whereof, I I	have affixed my signature below thi		day of,,	
	Normal (800) GERALDIN		SI(SGD) RODERICK C. CEZAR	
	OERALDINE RID		RODERICK C. CEZAR	
	THE POTTER MUN. CIVIL REGI	(8	Signature Over Printed Name of Affiant)	
	STATE OF STA		MUN CIVIL RECISTRAR	
SUBSCRIBED AN	ID SWORN to before me this	19 th day of _	MAY , 2019	at
STA. MARIA, ROMBLO	Manager and	, Philippines	s, affiant who exhibited to me his/her CTC/valid I	ID
01457168 issue	u on	atST/	A. MARIA, ROMBLON NOLANA, AIRAM A	
(SGD) (Signature o	GERALDINE RIO-VISCA of the Administering Officer		MUNICIPAL CIVIL REGISTRAR Position / Title / Designation	
GER	ALDINE RIO-VISCA Name in Print		STA. MARIA, ROMBLON	
	Name in Print		Address	







REPUBLIC OF THE PHILIPPINES DEPARTMENT OF FINANCE BUREAU OF INTERNAL REVENUE

GABAT, SYLVIA GALICHA
TIN: 255-128-693-000
POBLACION, ALCANTARA
ROMBLON

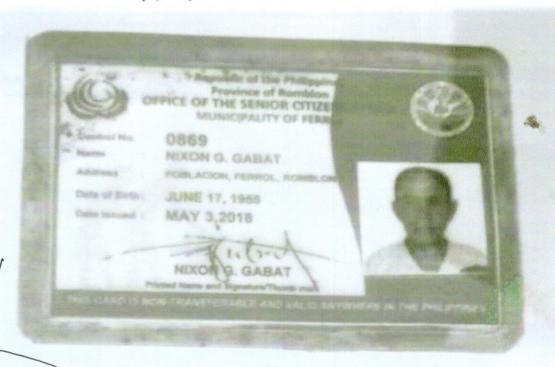
BIRTHDATE: 06/10/1953 ISSUE DATE: 10/15/2007

SIGNATURE



ament and a series

- This card bears your permanent Taxpayer Identification Number (TIN). Always indicate your TIN on all returns / documents filed with the BIR.
- Report immediately to your Revenue District Officer, the loss of this card and change of name or address.
- Any person who secures and / or uses more than one TIN shall be criminally liable and shall be punishable by fine and imprisonment.



Consider and Privileges under Reposite Action, star

 Free market & dental distriction is been according to the existing factories

20% discount in purchase of medicinals

 20% discount in Hotels, Restaurant, Remember Certifich Funeral Partors

 20 % Discount on theaters, cinema houses and concert halfs, etc.

20% discount on medical 5 dental services, diagnostic \$\frac{1}{2}\$, laboratory fees in private facilities.

 20% dispount in fare for domestic serises and travel and public land transportation

EN (DWPIL)
LEONORA A. COMPAS
OSCA HIRA

JOVERCIO LI. MAYOR, JR.

Tu ful