



# BUREAU OF CUSTOMS

MAKABAGONG ADUANA, MATATAG NA EKONOMIYA



PROFESSIONALISM

INTEGRITY


ACCOUNTABILITY

IAG Memo No. 02-2021

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## MEMORANDUM

TO : **All Chiefs, Administrative Divisions or Equivalent Units**

FROM :   
**DONATO B. SAN JUAN**  
Deputy Commissioner, IAG and  
Chief of Staff, OCOM

SUBJECT : **Inventory of the Bureau's Record Holding**

DATE : 07 January 2021

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1. In order to update the Bureau's record holding, you are hereby requested to make an inventory of your records to determine if there are those which by law or administrative decision have already fulfilled their purpose and are therefore of no further value.
2. Should there be records for disposal in your respective port/office, you may accomplish the attached ***National Archive of the Philippines (NAP) Form No. 3 (Request for Authority to Dispose of Records)*** in quadruplicate and forward the same to the Chief, Central Records Management Division (CRMD) for evaluation and transmittal to NAP.
3. The BOC-RDS attached to CMO 11-2015<sup>1</sup> will serve as your guide in the perusal of your record holding.
4. For compliance.

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<sup>1</sup> CMO 11-2015 Disposal of Valueless Records/Documents posted at the BOC website  
South Harbor, Gate 3, Port Area, Manila 1099 .Tel. Nos. 527-4537, 527-1935 (OCOM)  
Website: [www.customs.gov.ph](http://www.customs.gov.ph) . E-mail: [Boc.cares@customs.gov.ph](mailto:Boc.cares@customs.gov.ph) (PIAD)

NAP Form No. 3  
copies  
Revised 2012

Accomplish in 4

<b>NATIONAL ARCHIVES OF THE PHILIPPINES</b> <i>Pambansang Sinupan ng Pilipinas</i>  <b>REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS</b>		AGENCY NAME:	
		ADDRESS:	
DATE		TELEPHONE NUMBER:	
RDS ITEM NO.	RECORDS SERIES TITLE AND DESCRIPTION	PERIOD COVERED	RETENTION PERIOD AND PROVISION/S COMPLIED (If any)
LOCATION OF RECORDS:		VOLUME IN CUBIC METER:	
PREPARED BY:  (NAME & SIGNATURE)		POSITION:	
CERTIFIED AND APPROVED BY:  This is to certify that the above mentioned records are no longer needed and not involved nor connected in any administrative or judicial cases.			
_____ Name and Signature of Agency Head Or Duly Authorized Representative			