

2017-01-014

MASTER COPY 



Republic of the Philippines
Department of Finance
Bureau of Customs
1099 Manila

January 5, 2017

MEMORANDUM

**TO: All Service Directors
All District/Sub-port Collectors
All Deputy Collectors for Administration
All Division/Unit Chiefs
And Others Concerned**

- 1.0 In order to update the Bureau's record holdings, you are hereby requested to make an inventory of your records to determine if there are those which by Law or Administrative decision have fulfilled their purpose and are therefore of no further value.
- 2.0 Should there be records for disposal in your respective port/office, please accomplish the attached ***National Archives 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 transmittal to the NAP.
- 3.0 Also attached is a copy of the Records Disposition Schedule (RDS) of the Bureau, for your perusal.
- 4.0 For compliance.

ALFREDO A. PALMA

OIC-Deputy Commissioner
Internal Administration Group

NAP Form No. 3
Revised 2012

Accomplish in 4 copies

NATIONAL ARCHIVES OF THE PHILIPPINES <i>Pambansang Sinupan ng Pilipinas</i> REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS		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: <p style="text-align: center;">This is to certify that the above mentioned records are no longer needed and not involved nor connected in any administrative or judicial cases.</p> <div style="text-align: right; margin-right: 50px;"> <hr style="width: 200px; margin: 0 auto;"/> Name and Signature of Agency Head Or Duly Authorized Representative </div>			

NAP Form No. 3
Revised 2012

Accomplish in 4 copies

NATIONAL ARCHIVES OF THE PHILIPPINES <i>Pambansang Sinupan ng Pilipinas</i> REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS		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. <div style="text-align: right;"> _____ Name and Signature of Agency Head Or Duly Authorized Representative </div>			

2017-01-014 P-4

MASTER COPY 

NAP Form No. 3
Revised 2012

Accomplish in 4 copies

NATIONAL ARCHIVES OF THE PHILIPPINES <i>Pambansang Sinupan ng Pilipinas</i> REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS		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. <div style="text-align: right;"><hr/>Name and Signature of Agency Head Or Duly Authorized Representative</div>			