



CAGAYAN DE ORO CITY WATER DISTRICT
CORRALES AVE., CAGAYAN DE ORO CITY TEL. NO.33-54*29-98
DISCONNECTION CONTROL STUB

07-01-2017

00

FM-CML-01

NAME AND ADDRESS		METER NO.	
ACCOUNT NUMBER		DATE DUE	
STATEMENT OF ACCOUNTS			
Billing dtd	:	P	
Billing dtd	:		
Previous Unpaid Accounts	:		
Total Unpaid Accounts	:	P	
DISCONNECTION RECORD			
Date of Order	:		
Disconnected by	:		
Date / Time	:		
Cut - off Reading	:		
COMPUTATION OF CUT - OFF CONSUMPTION			
READINGS		Cubic Meter	AMOUNT (PESOS)
PREVIOUS	CUT-OFF	CONSUMED	

Anjanam 10/26/20 **NO.**



CAGAYAN DE ORO CITY WATER DISTRICT
CORRALES AVE., CAGAYAN DE ORO CITY TEL. NO.33-54*29-98
NOTICE OF DISCONNECTION

07-01-2017

00

FM-CML-01

NAME AND ADDRESS		METER NO.	
ACCOUNT NUMBER		DATE DUE	
STATEMENT OF ACCOUNTS			
Billing dtd	:	P	
Billing dtd	:		
Previous Unpaid Accounts	:		
Total Unpaid Accounts	:	P	
<p>According to our records you have unpaid a amount stated above. Please pay this account _____ or 48 hours after receipt of this n disconnection. Partial payment will not relieve disconnection. Please present this notice to us payment. Thank you.</p>			
Date Prepared	:		
Received by	:		
Delivered by	:		
Date Delivered	:		Manager, Com
PLEASE DISREGARD THIS NOTICE IF PAYMENT HAS			

NO.



CAGAYAN DE ORO CITY WATER DISTRICT
CORRALES AVE., CAGAYAN DE ORO CITY TEL. NO.33-54*29-98
DISCONNECTION CONTROL STUB

07-01-2017

00

FM-CML-01

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Date / Time	:		
Cut - off Reading	:		
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READINGS		Cubic Meter	AMOUNT (PESOS)
PREVIOUS	CUT-OFF	CONSUMED	

NO.



CAGAYAN DE ORO CITY WATER DISTRICT
CORRALES AVE., CAGAYAN DE ORO CITY TEL. NO.33-54*29-98
NOTICE OF DISCONNECTION

07-01-2017

00

FM-CML-01

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ACCOUNT NUMBER		DATE DUE	
STATEMENT OF ACCOUNTS			
Billing dtd	:	P	
Billing dtd	:		
Previous Unpaid Accounts	:		
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Date Prepared	:		
Received by	:		
Delivered by	:		
Date Delivered	:		Manager, Com
PLEASE DISREGARD THIS NOTICE IF PAYMENT HAS			

NO.



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue, Cagayan de Oro City
PROMISSORY NOTE

ACTIVE ACCOUNT INACTIVE ACCOUNT

Name _____
 Address _____
 Account No. _____

Date: _____
 Contact No.: _____
 NOTE: _____

DATE	ACCOUNT BALANCE	PARTIAL PAYMENT (Installment)	CURRENT BILL	ADJUSTMENT OF PAYMENT	TOTAL	OR NO.	REMARKS
1							
2		-					
3		-					
4		-					
5		-					
6		-					
	TOTAL	-					

REMINDER TO ACTIVE ACCOUNTS:

- FAILURE to pay** the succeeding installment payment as stated in this promissory note will mean "**CUT-OFF**" of the service connection. Disconnection Notice shall no longer be served. This "**Promissory Note**" shall serve as such.
- PARTIAL PAYMENT** does not relieve this account from disconnection of water service connection.
- Succeeding installment payments must include the **CURRENT BILL**.
- Please disregard the **NOTICE OF DISCONNECTION** if payment has been made on schedule.

Prepared by: _____

Acknowledged by: _____

OIC - Customer Accounts Division

Printed Name and Signature

FM-CML-02

00

XX-XX-XXXX



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue, Cagayan de Oro City
PROMISSORY NOTE

ACTIVE ACCOUNT INACTIVE ACCOUNT

Name _____
 Address _____
 Account No. _____

Date: _____
 Contact No.: _____
 NOTE: _____

DATE	ACCOUNT BALANCE	PARTIAL PAYMENT (Installment)	CURRENT BILL	ADJUSTMENT OF PAYMENT	TOTAL	OR NO.	REMARKS
1							
2							
3							
4							
5							
6							
	TOTAL						

REMINDER TO ACTIVE ACCOUNTS:

- FAILURE to pay** the succeeding installment payment as stated in this promissory note will mean "**CUT-OFF**" of the service connection. Disconnection Notice shall no longer be served. This "**Promissory Note**" shall serve as such.
- PARTIAL PAYMENT** does not relieve this account from disconnection of water service connection.
- Succeeding installment payments must include the **CURRENT BILL**.
- Please disregard the **NOTICE OF DISCONNECTION** if payment has been made on schedule.

Prepared by: _____

Acknowledged by: _____

OIC - Customer Accounts Division

Printed Name and Signature

FM-CML-02

00

XX-XX-XXXX



Water Accessibility - Our Priority!

CAGAYAN DE ORO CITY WATER DISTRICT
CUSTOMER ACCOUNTS DIVISION

ADJUSTMENT MEMO

NO. : _____
DATE: _____

CONCESSIONAIRE : _____
ACCOUNT NUMBER : _____
AMOUNT BILLED : _____
AMOUNT SHOULD BE : _____
ADJUSTED AMOUNT : _____
REMARKS : _____

<u>ENTRY</u>	<u>DEBIT</u>	<u>CREDIT</u>
METERED ACCOUNT 101	P _____	P _____
ACCOUNT 102	_____	_____
ACCOUNT 103	_____	_____

PREPARED BY: _____ RECOMMENDING APPROVAL: _____ APPROVED BY: _____
OIC, Customer Accounts Division Commercial Department Manager Acting AGM - Technical Services



Water Accessibility - Our Priority!

CAGAYAN DE ORO CITY WATER DISTRICT
CUSTOMER ACCOUNTS DIVISION

ADJUSTMENT MEMO

NO. : _____
DATE: _____

CONCESSIONAIRE : _____
ACCOUNT NUMBER : _____
AMOUNT BILLED : _____
AMOUNT SHOULD BE : _____
ADJUSTED AMOUNT : _____
REMARKS : _____

<u>ENTRY</u>	<u>DEBIT</u>	<u>CREDIT</u>
METERED ACCOUNT 101	P _____	P _____
ACCOUNT 102	_____	_____
ACCOUNT 103	_____	_____

PREPARED BY: _____ RECOMMENDING APPROVAL: _____ APPROVED BY: _____
OIC, Customer Accounts Division Commercial Department Manager Acting AGM - Technical Services



CAGAYAN DE ORO CITY WATER DISTRICT
 Corrales Avenue, Cagayan de Oro City
 CUSTOMER ACCOUNTS DIVISION

MONITORING ON DELIVERY OF NOTICE OF DISCONNECTION

ZONE	01-1A	01-1B	01-2A	01-2B	01-3A	01-3B	01-4A	01-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	02-1A	02-1B	02-2A	02-2B	02-3A	02-3B	02-4A	02-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	03-1A	03-1B	03-2A	03-2B	03-3A	03-3B	03-4A	03-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	04-1A	04-1B	04-2A	04-2B	04-3A	04-3B	04-4A	04-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	05-1A	05-1B	05-2A	05-2B	05-3A	05-3B	05-4A	05-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	06-1A	06-1B	06-2A	06-2B	06-3A	06-3B	06-4A	06-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	07-1A	07-1B	07-2A	07-2B	07-3A	07-3B	07-4A	07-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								
ZONE	08-1A	08-1B	08-2A	08-2B	08-3A	08-3B	08-4A	08-4B
QUARTER	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1st								
2nd								
3rd								
4th								

PREPARED BY:

CHECKED BY:

NOTED BY:

WATER MAINTENANCE MAN C

OIC-CUSTOMER ACCOUNTS DIVISION

DEPARTMENT MANAGER



CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER ACCOUNTS DIVISION
STATUS REPORT OF REQUESTED DISCONNECTION FOR 2020

MONTH/YR	NO. OF DISCONNECTED ACCOUNTS AND AVERAGE RESPONSE TIME						
	TARGET RESPONSE TIME 7 DAYS						
	NO. OF APPLICATION RECEIVED	NO. OF ACCOUNTS DISCONNECTED	RESPONSE TIME	NO. OF DELAYED	%	SCORE	ADJECTIVAL RATING
TOTAL	0	0				0.00	NO SCORE YET

Prepared by:

Checked by:

Noted by:

Water Maintenance Man C

OIC - Customer Accounts Division

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
 Corrales Avenue, Cagayan de Oro City
 COMMERCIAL DEPARTMENT
 Customer Accounts Division

STATUS REPORT OF REQUESTED RECONNECTION FOR CY

MONTH/YEAR	APPLIED RECONNECTION WITHIN 60 DAYS FROM DISCONNECTION - 3 CALENDAR DAYS								SAME DAY RECONNECTION		APPLIED RECONNECTION AFTER 60 DAYS FROM DISCONNECTION - TREATED AS NEW CONNECTION - 4 CALENDAR DAYS							
	NO. OF APPLICATION RECEIVED	NO. OF APPLICATION RELEASED	# OF JOB ORDER RECONNECTED	ON TARGET	# OF DELAYED JOB ORDER	%	SCORE	ADJECTIVAL RATING	TOTAL RESPONSE TIME	NO. OF SAMEDAY RECON	SAMEDAY RECON RESPONSE TIME	# OF JOB ORDER RECONNECTED	ON TARGET	# OF DELAYED JOB ORDER	%	SCORE	ADJECTIVAL RATING	RESPONSE TIME
TOTAL	0	0	0	0	0		0.00	NO SCORE YET				0	0	0		0.00	NO SCORE YET	

Prepared by:

Checked by:

Noted by:

Water Maintenance Man C

OIC - Customer Accounts Division

Department Manager, Commercial

RATING		SUCCESS INDICATORS	
Score	Adjectival	Range	QUALITY OF WORK
			(100%)
5	EXCELLENT	4.50-5.00	0 Delay
4	VERY GOOD	3.50-4.49	up to 20% of MFO Delayed
3	GOOD	2.50-3.49	up to 40% of MFO Delayed
2	FAIR	1.50-2.49	up to 50% of MFO Delayed
1	POOR	1.00-1.49	more than 50% of MFO Delayed



CAGAYAN DE ORO CITY WATER DISTRICT

Cagayan de Oro City

CUSTOMER BILLING / METER READING SECTION

Job Order for Water Meter and Service Connection Repair

M.R.S.: _____

JOB ORDER #: _____

DATE: _____

CONCESSIONAIRE: _____

SERVICE ADDRESS: _____

ACCOUNT NUMBER: _____

NATURE OF COMPLAINTS:

- | | | |
|--|---|--|
| <input type="checkbox"/> Special Reading | <input type="checkbox"/> Change Meter | <input type="checkbox"/> Meter Test |
| <input type="checkbox"/> High Consumption | <input type="checkbox"/> Stuck-up Meter | <input type="checkbox"/> Pipe Cut |
| <input type="checkbox"/> Transfer of Meter | <input type="checkbox"/> Gate Valve Leaking | <input type="checkbox"/> Elevate Meter |
| <input type="checkbox"/> Others, Specify _____ | | |

REMARKS: _____

Requested by: _____

Meter Serial Number: _____

Previous Reading: _____

Acknowledged by: _____

Date: _____

Present Reading: _____

Accomplished by: _____

FM-CML-07

00

XX-XX-XXXX



CAGAYAN DE ORO CITY WATER DISTRICT

Cagayan de Oro City

CUSTOMER BILLING / METER READING SECTION

Job Order for Water Meter and Service Connection Repair

M.R.S.: _____

JOB ORDER #: _____

DATE: _____

CONCESSIONAIRE: _____

SERVICE ADDRESS: _____

ACCOUNT NUMBER: _____

NATURE OF COMPLAINTS:

- | | | |
|--|---|--|
| <input type="checkbox"/> Special Reading | <input type="checkbox"/> Change Meter | <input type="checkbox"/> Meter Test |
| <input type="checkbox"/> High Consumption | <input type="checkbox"/> Stuck-up Meter | <input type="checkbox"/> Pipe Cut |
| <input type="checkbox"/> Transfer of Meter | <input type="checkbox"/> Gate Valve Leaking | <input type="checkbox"/> Elevate Meter |
| <input type="checkbox"/> Others, Specify _____ | | |

REMARKS: _____

Requested by: _____

Meter Serial Number: _____

Previous Reading: _____

Acknowledged by: _____

Date: _____

Present Reading: _____

Accomplished by: _____

FM-CML-07

00

XX-XX-XXXX



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER BILLING DIVISION**

**WESTERN SERVICE AREA
Penalty Chart**

MONTH/YEAR

zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date
13-4A					14-2b					14-4a					15-1b					24-3b				
13-4B					231a					14-4b					25-2a					24-4b				
14-1A					234a					15-1a					24-1a					25-1a				
14-1B										15-2a										25-1b				
14-2A										15-3a										25-3a				
14-3a										15-2b										25-3b				
14-3b																				26-1a				
24-2a																				25-4a				
zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date
23-1b					15-3b					16-3a					17-4b					18-1a				
23-2a					15-4a					16-3b					18-2b					18-1b				
23-2b					15-4b					17-1a					24-2b					18-2a				
23-3a					16-1a					17-1b					24-3a					18-3a				
23-3b					16-1b					17-2a										18-3b				
24-1b					16-2a					17-2b														
					16-2b					17-3a														
					16-4a					17-3b														
					16-4b					17-4a														
zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date	zone/bo	date billed	date due	dte imposd	date
18-4a					20-1b					20-3a					22-2a					22-1a				
18-4b					20-2a										22-2b					22-1b				
19-1a					20-2b										22-3b					22-3a				
19-1b															23-4b					22-4a				
19-2a																				22-4b				
19-2b																								
20-1a																								

Prepared by: Computer Services Chief B



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER BILLING DIVISION**

**EASTERN SERVICE AREA
Penalty Chart**

MONTH/YEAR

zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	
01-1a					02-1a					03-1a					04-1a					05-1a					
01-1b					02-1b					03-1b					04-1b					05-1b					
01-2a					02-2a					03-2a					04-2a					05-2a					
01-2b					02-2b					03-2b					04-2b					05-2b					
01-3a					02-3a					03-3a					04-3a					05-3a					
01-3b					02-3b					03-3b					04-3b					05-3b					
01-4a					02-4a					03-4a					04-4a					05-4a					
01-4b					02-4b					03-4b					04-4b										
					19-4b																				
zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	
05-4b					07-1a					07-4b					08-3a					09-4a					
06-1a					07-1b					08-1a					08-3b					09-4b					
06-1b					07-2a					08-1b					08-4a					10-1a					
06-2a					07-2b					08-2a					08-4b					10-1b					
06-2b					07-3a					08-2b					09-1a					10-2a					
06-3a					07-3b										09-1b					10-2b					
06-3b					07-4a										09-2a					10-3a					
06-4a															09-2b					10-3b					
06-4b															09-3a										
															09-3b										
															244a										
zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	zone/t	date billed	date due	dte imposd	date	
10-4a					11-3b					12-2b					13-1b					13-3b					
10-4b					11-4a					12-3a					13-2a										
11-1a					11-4b					12-3b					13-2b										
11-1b					12-1a					12-4a					13-3a										
11-2a					12-1b					12-4b					21-3b										
11-2b					12-2a					13-1a															
11-3a																									
BUGO SERVICE AREA																									
zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	
19-3a					19-4a					204a															
19-3b																									
203b					204b					211a															
										212b															
zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	zone	billed	due	imposd	date	
212a					214a					214b															
213a																									

Prepared by:
Computer Services Chief B



CAGAYAN DE ORO CITY WATER DISTRICT

Customer Billing Division
REQUEST FOR ADJUSTMENT

No. :
Date :

Concessionaire: [Redacted]
Account No. [Redacted]
Address: [Redacted]

AS BILLED:					SHOULD BE:			ADJUSTMENT
Billing Month	Reading Date	Reading	Cons.	Amount	Reading	Cons.	Amount	
TOTAL ADJUSTMENT								

REASON FOR ADJUSTMENT:

Erroneously done by: METER READER ENCODER

Prepared by: Checked by: Received by: _____

Customer Service Officer A Supervisor



CAGAYAN DE ORO CITY WATER DISTRICT

Customer Billing Division
REQUEST FOR ADJUSTMENT

No. :
Date :

Concessionaire: [Redacted]
Account No. [Redacted]
Address: [Redacted] FILE COPY

AS BILLED:					SHOULD BE:			ADJUSTMENT
Billing Month	Reading Date	Reading	Cons.	Amount	Reading	Cons.	Amount	
TOTAL ADJUSTMENT								

REASON FOR ADJUSTMENT:

Erroneously done by: METER READER ENCODER

Prepared by: Checked by: Received by: _____

Customer Service officer A Supervisor



CAGAYAN DE ORO CITY WATER DISTRICT

COMMERCIAL DEPARTMENT
CUSTOMER BILLING DIVISION

MONTHLY SUMMARY OF CONDUCTED READING and BILL DELIVERY (ZONE/BOOK)
MONTH/YEAR January 2020

ZONE	BOOK	READING DATE SCHEDULE	DATE READ	RESPONSE TIME	Due Date	BILL DELIVERY (date completed)	RESPONSE TIME
EASTERN SERVICE AREA							
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
WESTERN SERVICE AREA							
ZONE	BOOK	READING DATE SCHEDULE	DATE READ	RESPONSE TIME	Due Date	BILL DELIVERY (date completed)	RESPONSE TIME
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							

Prepared by:

Noted by:

Submitted to:

Senior Customer Service Officer

Division Manager A

Manager, Commercial Dept.

APPLICATION FOR RECONNECTION
 (Same Occupant)

Application No.: 20183 Date Applied: 2020-08-27

ACCOUNT DATA

Account No.: 72506 Connection Type: Residential
 Old Account No.: 152A-12-0006 Meter Size: 1/2"
 Status.: Inactive Discon. Date: 2020-02-28

Registered Name: COA STAFF HOUSE -RO 10/HARAYO, THELMA
 Registered Address: COA REGIONAL OFFICE 10
 Unpaid Accounts: 341.84 Contact#:

I hereby apply for a water service connection. I understand the connection will not be made until it is approved and all charges are paid.

COA STAFF HOUSE -RO 10
 Signature of Building Owner

COA STAFF HOUSE -RO 10/HARAYO, THELMA
 Signature of Applicant

COA STAFF HOUSE -RO 10
 Signature of Lot Owner

HARAYO, THELMA C.
 Signature of Witness

CHARGES PAID:

Charge Type	Amount	O.R. No.	O.R. Date
Cut-Off Accounts	341.84		
Reconnection Fee	1,720.00		
Service Charge	100.00		
Total	2,161.84		

ACTION TAKEN:

Approve for Reconnection
 Disapprove for Reconnection

Reason:

[Handwritten signature]
 6/21/20

RI + CCSDA1

RECONNECTION ORDER
RECONNECTION - Same Occupant

Application No.: 20183 Date Applied: 2020-08-27 Job Order No.: 2020087

ACCOUNT DATA

Account No.: 72506 Connection Type: Residential
Old Account No.: 152A-12-0006 Meter Size: 1/2"
Status: Inactive Discon. Date: 2020-02-28

Registered Name: COA STAFF HOUSE -RD 10/HARAYO, THELMA
Registered Address: COA REGIONAL OFFICE 10
Unpaid Accounts: 341.84

CHARGES PAID:

Charge Type	Amount	O.R. No.	O.R. Date
Cut-Off Accounts	341.84	4289907	2020-09-02
Reconnection Fee	1,720.00	4289906	2020-09-02
Service Charge	100.00	4289906	2020-09-02
Total	2,161.84		

Prepared by: [Signature] September 03, 2020 - 08:59:39 AM

MATERIALS NEEDED:

Quantity	Unit	Size	Item
----------	------	------	------

Inspected by: _____ Date: _____

Remarks: _____

Noted by: _____ Approved by: _____

Annabelle D. Estano
Division Manager

Gwendolyn P. Batar
Manager, Commercial Department

Meter Brand: _____ Serial#: _____ Meter Size: _____ Reading: _____

Meter Receipt#: _____ Recon. by: _____ Date: _____ Time: _____



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Corrales Avenue , Cagayan de Oro City

Awards this

CERTIFICATE OF ATTENDANCE

for having attended the COWD Orientation Seminar.
Given this ____ day of _____ , 2021.

Commercial Department Manager

NEW SERVICE CONNECTION APPLICATION FORM

Application No.: 32155

Date Applied: 2020-08-27

I. PERSONAL DATA

Name of Applicant: Palasan, Geneveve Bagnaran
Office Address: 9974624562 docs with app
Contact#: 9974624562, -
Civil Status: Married

Contact Person:
Husband's Name: Palasan, Eldefer O.
Address: CDOC
Contact#: -

II. APPLIED LOCATION DATA

Address Applied: Zone 6 Dumamela Ext. Carmen, CDOC
Lot Type: Public Land
Lot Owner: Public Land
Building Owner: Palasan, Geneveve B.

A. APPLIED LOCATION PREVIOUS OCCUPANT:

Account#: 0
Name:
Address:
Unpaid Accounts: 0.00

B. APPLICANT'S PREVIOUS ACCOUNT:

Account#: 0
Name:
Address:
Unpaid Accounts: 0.00

III. CUSTOMER CLASSIFICATION AND STATUS

New Connection
Meter Size: 1/2"

Residential
Stub-Out

I hereby apply for a water service connection. I understand the connect will not be made until it is approved and all charges are paid.

Eldefer O. Palasan
Palasan, Eldefer O.
Signature of Building Owner

Public Land
Signature of Lot Owner

Geneveve B. Palasan
Palasan, Geneveve Bagnaran
Signature of Applicant
Eldefer O. Palasan
Palasan, Eldefer O.
Signature of Husband

FOR SUB-CONNECTION:

I/We hereby certify that I/We allowed _____
to tap his/her water connection to my/our existing service line.

1. *fmw* 10-28-20
3. _____

2. _____
4. _____

REMARKS _____



CAGAYAN DE ORO CITY WATER DISTRICT
Cagayan de Oro City
COMMERCIAL DEPARTMENT
INSPECTOR'S REPORT

Application No. :
Name of Applicant :
Address :
Name of Spouse :
Address Applied :

TAPPING POINT:

Mainline

Size: _____ Make: _____ Distance: _____
 Along the Street Across the Street
Pavement: asphalt concrete rough

Stub-out

Along the Street Across the Street Distance: _____
Size: _____

Others

CLASSIFICATION Residential Commercial For Construction
 Others: _____

REFERENCE/PARTLY USER:

Registered Name _____
Account No. _____
Address _____

DMA Location:

Outside DMA
 Inside DMA
DMA #: _____
T.G. ID #: _____

Relationship to concessionaire:

neighbor parents
 siblings others (pls specify): _____
 newly installed stub-out/mainline
 cut-off service line
 others (pls specify) _____

PREVIOUS LOCATION / SOURCE OF WATER:

REMARKS :

Address _____
Registered Name _____
Account No. _____
date disconnected: _____

RECOMMENDATION

Permit (CEO/DPWH) Stub-out installation
 Pending due to (state reason/s) _____ Boring machine/Concrete Cutter
 Others (pls. specify) _____ Jack Hammer

of potential new connections _____
of potential existing connections that need rehab (very far from tapping point) _____
Others (pls specify) _____

COMPUTATION

		O. R. Number
Installation Fee	_____	_____
Notarial Fee	_____	_____
PE Pipe (total length)	<input type="checkbox"/> 3/4" _____ <input type="checkbox"/> 1" _____	_____
Other Materials/Fittings	_____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____

Inspected by: _____

Equipment Rental _____

TOTAL _____

Approved by: _____

OIC - Customer Service Division Manager

(Please sketch at the back)



CAGAYAN DE ORO CITY WATER DISTRICT

Corrales Avenue, Cagayan de Oro City

WATER SERVICE CONTRACT

CUSTOMER _____

ADDRESS _____

CUSTOMER CLASS:

- Residential
- Commercial
- Wholesale

CLASSIFICATION:

- New
- Separation
- Transfer

RATES/FEES:

- | | |
|---|-------------------------|
| <input type="checkbox"/> Supervision/Inspection Fee | OR No. _____ Date _____ |
| <input type="checkbox"/> Tapping/ Installation Fee | OR No. _____ Date _____ |
| <input type="checkbox"/> Reconnection Fee | OR No. _____ Date _____ |
| <input type="checkbox"/> Change of Name (Service Fee) | OR No. _____ Date _____ |

This CONTRACT is made and entered into this day of 20 , at Cagayan de Oro City, Philippines, by and between the **CAGAYAN DE ORO CITY WATER DISTRICT** or **COWD**, represented by its **Commercial Department Manager** and the **APPLICANT/CUSTOMER** or **CONCESSIONAIRE** _____
 with residence and Postal address at _____

THE PARTIES AGREE THAT:

1. The COWD shall provide water service to the CUSTOMER's installation located at the address given above, during the period of the contract at the rates stipulated and under the conditions provided in the schedule of water rates;
2. The COWD shall not be responsible for the interruption of the service for causes beyond its control, nor be liable to the customer for damages caused by defective conditions;
3. The COWD reserves the right to cut off the supply or disconnect the service any day for the following reasons:
 - a. For repair;
 - b. For non-payment of bills when due;
 - c. For fraudulent practice in relation to use of water/sewer; and
 - d. For using the water for purposes other than that applied for.
4. The customer shall conform to and abide with all of the Cagayan de Oro City Water District Resolutions, Rules & Regulations and Guidelines pertaining to the water services;
5. The customer shall pay its water bill monthly to the COWD or its authorized collecting banks according to the reading of the water meter reader on or before due date as indicated in its water bill. Its due date is twenty (20) calendar days from reading date, within which time he/she may pay without penalty. Failure to receive a bill does not relieve the customer of liability and shall be deemed a debt to the COWD. All water bills unpaid after due date shall be served with a disconnection notice and disconnection shall be made if the customer shall not settle its account within forty eight (48) hours from receipt of the said notice;
6. The COWD shall supply the water meter for the customer. The customer shall protect the water meter from any type of damage or loss;
7. Should any water meter becomes unserviceable or condemned for one reason or another, the average consumption for three (3) months period previous to the date when the meter becomes unserviceable or condemned shall be the basis for subsequent bills or flat rate shall be charged whichever is greater;
8. The District shall charge the customer with the minimum service charge at the prevailing water rates, in the event that there is no usage/consumption of water.
9. The customer shall make no changes in his/her approved connection without previously signing a revision of contract for the purpose in the office of the COWD, the customer shall notify the COWD in case of transfer of ownership or when tenant leaves the premises; or when the customer died.
10. Representative of the COWD shall have access to the premises at all hours for the purpose of inspection, testing, repairs and disconnection and that no one shall be permitted to remove, change or tamper the installation unless authorized by the Cagayan de Oro City Water District;
11. The District shall maintain the service connection from the water main to the meter and including the water meter. All pipes and fixtures extending from the meter or lying beyond the meter shall be installed and maintained by the concessionaire or customer;
12. The customer shall maintain the installation to proper condition while it is connected with the mains of the COWD and shall guarantee that no tapping will be made on the service pipes nor allow sub-connection without prior authority of the COWD and that he agrees to maintain the expenses of same;

LARRY R. DACER

GWENDOLYN P. BATAR

WITNESS SIGNATURE

HOUSE/BUILDING OWNER SIGNATURE

APPLICANT/CUSTOMER SIGNATURE

13. Service pipes and accessories installed within the road right of way from the main meter are considered automatically donated to the COWD and becomes the property of the Cagayan de Oro City Water District;
14. Installation of a booster pump or direct "on-line" pumping from the "Service Tap" by the concessionaire is strictly prohibited. The concessionaire must provide a sump or intermediate reservoir if he needs to pump and bring the water to a higher elevation;
15. Any device that may be found within the premises of the concessionaire or customer contrary to the Rules and Regulations of the COWD or installations that may be discovered to have been tampered with and/or illegally connected or installed, shall be sufficient cause for the disconnection of the water service in question by the authorized representative of COWD and automatic termination of this contract in addition to criminal and/or civil action in court;
16. The concessionaire shall not in any manner install or maintain any physical connection between any private source of water supply and the district water supply. In case the customer does maintain another source of water supply, such source must be duly declared and registered with COWD. Furthermore, the customer must likewise maintain an independent piping system for each water supply source to avoid cross-connection;
17. If the applicant/customer or concessionaire is only a tenant or does not own the house, the owner of the house or building shall be jointly and severally liable with the applicant/customer;
18. In the event of misrepresentation of the building owner, lot owner or applicant/concessionaire regarding a new application which was discovered to have an old account, the COWD reserves the right to disconnect the new connection until full payment of the old account by the building/lot owner or applicant/concessionaire;
19. Finally, in order for COWD to properly size the water meter and service line of the customer or concessionaire, the later shall be required to declare the number and kind of fixture units that will be served by their applied service connection using the COWD standard form marked as "**ANNEX A**" of this "Water Service Contract".

Done this ✓ day of ✓ 20✓ at Cagayan de Oro City, Philippines.

CONCESSIONAIRE or CUSTOMER

CAGAYAN DE ORO CITY WATER DISTRICT

By:

✓

*Signature over printed name
 of the Applicant/Customer*

GWENDOLYN P. BATAR
 Department Manager

✓

*Signature over printed name
 House/Building Owner*

Signed in the presence of

✓

*Witness
 Signature over printed name*

_____ **LARRY R. DACER**

ACKNOWLEDGMENT

Republic of the Philippines)
 City of Cagayan de Oro) S.S.

BEFORE ME, Notary Public of Misamis Oriental, personally appeared ✓ _____ with CTC No. ✓ _____ issued on ✓ _____ at ✓ _____ and GWENDOLYN P. BATAR, with CTC No. 08667219 issued on January 06, 2022 at Cagayan de Oro City, both known to me and to me known to be the same persons who executed this Contract and they acknowledged to me that the same is their free and voluntary act and deed. This document consists of two (2) pages including this page and signed on each and every page thereof, on which the acknowledgement is written.

WITNESS MY HAND AND SEAL this _____ day of _____, 20____ in Cagayan de Oro City, Philippines.

Notary Public

Doc. No. _____;
 Page No. _____;
 Book No. _____;
 Series of 2022



**CAGAYAN DE ORO CITY WATER DISTRICT
CUSTOMER CARE SERVICE DIV.- COMMERCIAL DEPT.
PRE-INSPECTOR'S ADVICE SLIP**

Cell #: 0906-007-0409
Tel. #: 856-1810
#: 856-4546
#: 72-1852

APPLICATION NO. :
NAME OF APPLICANT :
ADDRESS :
NAME OF SPOUSE :
ADDRESS APPLIED :

TYPE OF APPLICATION	TAPPING POINT		DMA Location
<input type="checkbox"/> NEW CONNECTION	<input type="checkbox"/> MAINLINE :	<input type="checkbox"/> STUB OUT	<input type="checkbox"/> Outside DMA
<input type="checkbox"/> RECONNECTION	SIZE : _____	<input type="checkbox"/> ALONG THE LINE	<input type="checkbox"/> Inside DMA
<input type="checkbox"/> TRANSFER TAPPING	MAKE : _____	<input type="checkbox"/> ACCROSS THE STREET	DMA ID: _____
<input type="checkbox"/> TRANSFER METER	LENGTH: _____	<input type="checkbox"/> CONCRETE	T.G. ID #: _____
<input type="checkbox"/> ELEVATE METER	<input type="checkbox"/> OTHERS : _____	<input type="checkbox"/> ASPHALT / ROUGH	

CLASSIFICATION

- RESIDENTIAL
 COMMERCIAL
 FOR CONSTRUCTION

OTHERS (PLS. SPECIFY) : _____

PIPE LAY OUT/AFTER THE METE

- P. E. PIPE
 G.I. PIPE
 OTHERS : _____

RECOMMENDATION

- BURRIED IN 40 CM DEPTH
 PERMIT CEO/DPWH
 BORING MACHINE
 CONCRETE CUTTER

Computation of Fees:

Installation Fee _____
Notarial Fee _____
Transfer of Tapping/Meter Fee _____
Other Fees _____
Total _____

INSPECTED BY : _____

CUSTOMER SIGNATURE : _____

REMARKS : _____

CUSTOMER'S CERTIFICATION

This is to certify that I have already laid my after the meter P.E. Pipe properly and buried in 40 centimeter depth in accordance with the standard set by the Cagayan de Oro City Water District and the Cagayan de Oro City Engineering Office.

Customer : _____
Signature over Printed Name

Conforme : _____
Inspector's Signature

CAGAYAN DE ORO CITY WATER DISTRICT
COMPLAINT AND REQUEST RESULTS

Date/Time Printed: September 03, 2020 - 10:31:24 AM

Account No.: 30960 CAR No.: 161329
Old Account#: 0748-12-2382 Job Order#: 2020-8-1558
Date Posted: August 20, 2020 Serial#: 0020693
Name: TAGMOY, TESSIE
Address: ALUBA

Category/Reported: High Consumption
Reported: Leakage after the meter
Remarks: MRR

Category/Actual: High Consumption
Actual: Leakage after the meter
Remarks: LEAKAGE AFTER THE METER

Date Acted: August 19, 2020 Acted by: Lago, Steve X.
Encoded by: Abaday Reading: 7386

FM-CML-22

00

XX-XX-XXXX

C1 -CCSD#3

Amah
10/28/20



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT-CUSTOMER SERVICE DIVISION**

BILLING ADJUSTMENT COMPUTATION

DATE : _____
 NAME : _____
 ACCOUNT NO. : _____

CSD- _____

Month/ Year	Erroneous Reading	Actual Reading	Cu. Mtrs. To be billed	Amount billed	Should be billed	Adjustment	Total	
Month/ Year						-		
						-		
						-	-	
PENALTY						-		
						-		
						-		
TOTAL						-	-	
GRAND TOTAL						-	-	
Remarks :	Billing Adjustment/Based on Cut-Off Reading							
	Based on Inspection Report							

Entry :	Debit	Credit
Metered 001	Php -	_____
Penalty	-	_____
Senior Citizen Discount	-	_____
Accounts Receivable 125	-	-

Prepared by : _____ Recommending Approval: _____ Approved/Disapproved: _____

Division Manager

Department Manager

AGM - Technical Services

FM-CML-23

00

XX-XX-XXXX



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT-CUSTOMER SERVICE DIVISION**

BILLING ADJUSTMENT COMPUTATION

DATE : _____
 NAME : _____
 ACCOUNT NO. : _____

CSD- _____

Month/ Year	Erroneous Reading	Actual Reading	Cu. Mtrs. To be billed	Amount billed	Should be billed	Adjustment	Total	
Month/ Year						-		
						-		
						-	-	
PENALTY						-		
						-		
						-		
TOTAL						-	-	
GRAND TOTAL						-	-	
Remarks :	Billing Adjustment/Based on Cut-Off Reading							
	Based on Inspection Report							

Entry :	Debit	Credit
Metered 001	Php -	_____
Penalty	-	_____
Senior Citizen Discount	-	_____
Accounts Receivable 125	-	-

Prepared by : _____ Recommending Approval: _____ Approved/Disapproved: _____

Division Manager

Department Manager

AGM - Technical Services

FM-CML-23

00

XX-XX-XXXX

NAME: POPERA, CHARVEY SUABO

Address: ALUDA MACASANDIO

Account No.: 31548
Old Account No.: 0748-12-1449

CAR No.: 142136
Job Order#: 2020-9-370

Service Con. Type: Residential

Meter Size: 1/2"

Meter Serial No.: 7019537

Meter Brand:

Category: Leakage

Nature: Gate Valve Leakage

Remarks: PLS CHECK

Materials Needed

Date Paid:

DR No.:

Sketch

[Signature] 10/28/2020
Name/Signature of Customer

Tel. No.

Received by

Date

Assigned to

Acted by

Date/Time Acted

Verified by



CAGAYAN DE ORO CITY WATER DISTRICT
Cagayan de Oro City
COMMERCIAL DEPARTMENT

SERVICE CONNECTION REPORT

*For the period of **December 2021***

MONTH	NEW INSTALLATION	RECONNECTION	DISCONNECTION	NO. OF ACTIVE CONNECTIONS		TOTAL NET INCREASE/DECREASE	
				ACTUAL	TARGET	ACTUAL	TARGET
TOTAL AS OF JULY 2019							

Prepared by:

Checked by:

Noted by:

Customer Service Officer-A

Division Manager-A, CSD

Manager, Commercial Dept.



**CAGAYAN DE ORO CITY WATER DISTRICT
Commercial Department**

**INSPECTOR'S ACCOMPLISHMENT REPORT (RESPONSE TIME)
September 2021**

INSPECTOR INSPECTOR 1		
MONTH	Assigned Applications / Inspections	Monthly Average Response in Working Days
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEP		
OCT		
NOV		
DEC		
OVERALL AVERAGE	0	

INSPECTOR INSPECTOR 2		
MONTH	Assigned Applications / Inspections	Monthly Average Response in Working Days
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEPT		
OCT		
NOV		
DEC		
OVERALL AVERAGE	0	

INSPECTOR INSPECTOR 3		
MONTH	Assigned Applications / Inspections	Monthly Average Response in Working Days
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEPT		
OCT		
NOV		
DEC		
OVERALL AVERAGE	0	

INSPECTOR INSPECTOR 4		
MONTH	Assigned Applications / Inspections	Monthly Average Response in Working Days
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEPT		
OCT		
NOV		
DEC		
OVERALL AVERAGE	0	

INSPECTOR INSPECTOR 5		
MONTH	Assigned Applications / Inspections	Monthly Average Response in Working Days
JAN		
FEB		
MAR		
APR		
MAY		
JUNE		
JULY		
AUG		
SEPT		
OCT		
NOV		
DEC		
OVERALL AVERAGE	0	

Summary for the Month JUNE 2019

Inspector	No. Applications	Response Time/ In Calendar Days
INSPECTOR 1	0	0.00
INSPECTOR 2	0	0.00
INSPECTOR 3	0	0.00
INSPECTOR 4	0	0.00
INSPECTOR 5	0	0.00
Total	0	
Average Response Time		0.00

Prepared by:

Customer Service Officer

Checked by:

Senior Customer Service Officer

Noted by:

Division Manager



CAGAYAN DE ORO CITY WATER DISTRICT
Commercial Department
CUSTOMER SERVICE DIVISION
INSPECTION SECTION

MONTHLY INSPECTOR'S REPORT
September 2021

	TYPE OF APPLICATIONS																								TOTAL INSPECTIONS
	INSPECTOR 1						INSPECTOR 2						INSPECTOR 3						INSPECTOR 4						
	NEW CONNECTION	RECONNECTION	ELEVATE METER	TRANSFER METER	TRANSFER TAPPING	DIS-CON REQUEST	NEW CONNECTION	RECONNECTION	ELEVATE METER	TRANSFER METER	TRANSFER TAPPING	DIS-CON REQUEST	NEW CONNECTION	RECONNECTION	ELEVATE METER	TRANSFER METER	TRANSFER TAPPING	DIS-CON REQUEST	NEW CONNECTION	RECONNECTION	ELEVATE METER	TRANSFER METER	TRANSFER TAPPING	DIS-CON REQUEST	
1																									
2																									
3																									
4																									
5																									
6																									
7																									
8																									
9																									
10																									
11																									
12																									
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15																									
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23																									
24																									
25																									
26																									
27																									
28																									
29																									
30																									
31																									
TOTAL per TYPE OF APP	NEW CONNECTION						RECONNECTION						TRANSFER/ELEVATE METER						TRANSFER TAPPING						
	DISCONNECTION REQUEST																								
TOTAL per INSPECTOR	INSPECTOR 1						INSPECTOR 2						INSPECTOR 3						INSPECTOR 4						

Prepared by:

Checked by:

Noted by:

Leadman / Inspector

Sr. Customer Service Officer

Customer Service Division Manager



CAGAYAN DE ORO CITY WATER DISTRICT

Corrales Avenue, Cagayan de Oro City
Commercial Department

POST INSPECTORS REPORT
September 2021

DATE	Inspector 1			Inspector 2			Inspector 3		
	Date Assigned	Date Submitted	Response Rate (No. of Days)	Date Assigned	Date Submitted	Response Rate (No. of Days)	Date Assigned	Date Submitted	Response Rate (No. of Days)
AVERAGE RESPONSE TIME									

Prepared by:

Checked by:

Noted by:

Customer Service Officer A

Senior Customer Service Officer

Division Manager, CSD



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER CARE SERVICE DESK - METERING CONCERNS**

**Accomplishment Report on High Consumption
FOR THE MONTH OF September 2021**

NO.	NAME	CONTACT NUMBER	ACCOUNT NO.	JOB ORDER NUMBER			COMPLAINT	DATE OF REQUEST	FORWARDED DATE	RESPONSE TIME (in days)	CUSTOMER INFORMED
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
									AVERAGE		

SUMMARY:

TOTAL NUMBER OF JOB ORDERS	
TOTAL NUMBER OF JO W/ CONTACT NUMBERS	
TOTAL NUMBER OF JO CALLED	
% OF RESPONDED CUSTOMERS	

Prepared by:

Customer Service Staff

Checked by:

Sr. Customer Service Officer



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER CARE SERVICE DESK - METERING CONCERNS**

**Accomplishment Report on Special Reading
FOR THE MONTH OF September 2021**

NO.	NAME	CONTACT NUMBER	ACCOUNT NO.	JOB ORDER NUMBER			COMPLAINT	DATE OF REQUEST	FORWARDED DATE	RESPONSE TIME (in days)	CUSTOMER INFORMED
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
									AVERAGE		

SUMMARY:

TOTAL NUMBER OF JOB ORDERS	
TOTAL NUMBER OF JO W/ CONTACT NUMBERS	
TOTAL NUMBER OF JO CALLED	
% OF RESPONDED CUSTOMERS	

Prepared by:

Checked by:

Customer Service Staff

Sr. Customer Service Officer



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT
CUSTOMER CARE SERVICE DESK - METERING CONCERNS**

**Accomplishment Report on Leakage After the Meter
FOR THE MONTH OF September 2021**

NO.	NAME	CONTACT NUMBER	ACCOUNT NO.	JOB ORDER NUMBER			COMPLAINT	DATE OF REQUEST	FORWARDED DATE	RESPONSE TIME (in days)	CUSTOMER INFORMED
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
									AVERAGE		

SUMMARY:

TOTAL NUMBER OF JOB ORDERS	
TOTAL NUMBER OF JO W/ CONTACT NUMBERS	
TOTAL NUMBER OF JO CALLED	
% OF RESPONDED CUSTOMERS	

Prepared by:

Checked by:

Customer Service Staff

Sr. Customer Service Officer



CAGAYAN DE ORO WATER DISTRICT
 Corrales Ave., Cagayan de Oro City
COMMERCIAL DEPARTMENT

RECEIVED REQUEST FOR RECONNECTION
September 2021

APP NO.	NAME	ACCOUNT NUMBER	ADDRESS	PREVIOUS OCCUPANT	DATE PAID	JOB ORDER TRANSMITTAL		RESPONSE TIME
						PROCESSED	FORWARDED	
1								0.00
2								0.00
3								0.00
4								0.00
5								0.00
6								0.00
7								0.00
8								0.00
9								0.00
10								0.00
11								0.00
12								0.00
13								0.00
14								0.00
15								0.00
16								0.00
17								0.00
18								0.00
19								0.00
20								0.00
							AVERAGE RESPONSE TIME	0.00

Prepared by:

Checked by:

Noted by:

 Customer Service Officer

 Senior Customer Service Officer

 Customer Service Division Manager



**CAGAYAN DE ORO CITY WATER DISTRICT
CORRALES AVE., CAGAYAN DE ORO CITY
COMMERCIAL DEPARTMENT**

**RECEIVED REQUEST FOR DISCONNECTION
September 2021**

	JOB ORDER NO.	NAME OF CUSTOMERS	DATE OF FILED REQUEST	DATE FORWARDED	RESPONSE TIME
				(DAYS)	
1					0.00
2					0.00
3					0.00
4					0.00
5					0.00
6					0.00
7					0.00
8					0.00
9					0.00
10					0.00
11					0.00
12					0.00
13					0.00
14					0.00
15					0.00
16					0.00
17					0.00
18					0.00
19					0.00
20					0.00
21					0.00
22					0.00
23					0.00
24					0.00
25					0.00
26					0.00
27					0.00
28					0.00
29					0.00
30					0.00
31					0.00
32					0.00
33					0.00
34					0.00
35					0.00
36					0.00
37					0.00
38					0.00
39					0.00
40					0.00
				TOTAL AVERAGE RESPONSE TIME	0.00

Prepared by:

Checked by:

Noted by:

Customer Service Officer A

Sr Customer Service Officer

Division Manager, CSD



**CAGAYAN DE ORO CITY WATER DISTRICT
COMMERCIAL DEPARTMENT- CUSTOMER SERVICE DIVISION**

**ACCOMPLISHMENT REPORT OF POST INSPECTION
September 2021**

INSPECTOR	POST INSPECTION PRIOR TO PAYMENT		TOTAL ACTUAL INSPECTED	ACTUAL JOB ORDER ASSIGNED	DISCONNECTION		TOTAL ACTUAL INSPECTED	ACTUAL JOB ORDER ASSIGNED	RECONNECTION		SAME DAY		TOTAL ACTUAL INSPECTED	ACTUAL JOB ORDER ASSIGNED	REMARKS
	Prior Month	This Month			Prior Month	This Month			Prior Month	This Month	Prior Month	This Month			
INSPECTOR 1															
INSPECTOR 2															
INSPECTOR 3															
TOTAL			0	0			0	0					0	0	

Submitted by :

Checked by:

Noted by:

Customer Service Assistant A

Senior Customer Service Officer

Division Manager, CSD

CAGAYAN DE ORO CITY WATER DISTRICT
COMPLAINT AND REQUEST FORM
Date/Time: January 06, 2021 - 10:08:52 AM

Name: LUZANA, RICO
Address: ZONE 8 CUGMAN
Account No.: 55293 CAR No.: 169968
Old Account No.: 133B-12-3213 Job Order#: 2021-1-268
Service Con. Type: Residential Meter Size: 1/2"
Meter Serial No.: 10866856 Meter Brand:
Category: Water Pressure
Nature: Low Pressure
Remarks: PLS CHECK

INVESTIGATION/INSPECTION REPORT COMPLAINTS

TYPE OF CONNECTION

Stub Out Individual
 Residential Commercial
 Industrial

FINDINGS:

Erroneous Reading/Billing For Meter Test
 Leakage After the Meter No Leakage
 Meter Defect: _____ Others: _____

LOCATION OF LEAK AFTER THE METER:

Underground Leakage Defective Toilet Flush
 P.E. Tube Leakage Others: _____
 Inside/ Outside the House

DISTANCE OF METER FROM HOUSE/BLDG.: _____ meters NO. OF USERS: _____ Persons

WATER AVAILABILITY STATUS

Neighbor 1: _____ Time w/ Water: _____ Time w/o Water: _____
Neighbor 2: _____ Time w/ Water: _____ Time w/o Water: _____
Neighbor 3: _____ Time w/ Water: _____ Time w/o Water: _____

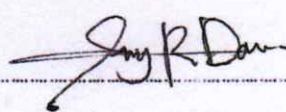
Latest Activities: _____
Other Findings: _____

RECOMMENDATION:

Change Meter Repair of Leakage After the Meter
 Meter Test Others: _____
 Bench Test

ATTACHMENT: Ledger

OTHER ATTACHMENT : _____



Name/Signature of Customer

Tel. No.

Received by

Date

Assigned to

Acted by

Date/Time Acted

Verified by