**CARPER LAD Form No. 1**

(New)

Republic of the Philippines

**DEPARTMENT OF AGRARIAN REFORM**

Region No. \_\_\_\_\_\_\_\_\_\_

Province of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Municipality of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**MEMORANDUM**

TO : Municipal Agrarian Reform Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Municipality of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FROM : Provincial Agrarian Reform Officer II \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SUBJECT : **CONDUCT OF PRELIMINARY OCULAR INSPECTION OF LANDHOLDING FOR COVERAGE UNDER CARP**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please be informed that the hereto landholding has been identified for coverage under Phase \_\_\_ of the Comprehensive Agrarian Reform Program (CARP).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NAME OF LANDOWNER/S as appearing in the title or tax declaration**  *(Specify full names of co-owners,*  *if any; one co-owner per row)* | **FAMILY NAME** | | **FIRST NAME** | | **MIDDLE NAME** |
| **1** |  |  | |  |
| **2** |  |  | |  |
| **3** |  |  | |  |
| **4** |  |  | |  |
| **5** |  |  | |  |
| **6** |  |  | |  |
| **7** |  |  | |  |
| **8** |  |  | |  |
| **9** |  |  | |  |
| **10** |  |  | |  |
| **OCT/TCT NO.** |  | | | | |
| **TAX DECLARATION NO.** |  | | | | |
| **LOT NO.** |  | | | | |
| **APPROVED SURVEY NO.** |  | | | | |
| **TOTAL AREA (HA.)** |  | | | | |
| **LOCATION OF PROPERTY** | **Municipality** | | | **Barangay** | |
|  | | |  | |

1. If titled property, indicate both the Title No. and Tax Declaration No. If untitled property, write N.A. in the space provided for the OCT/TCT No. and then, specify the Tax Declaration No.

Note:

1. Use one sheet (form) per landholding.

You are instructed to conduct actual Pre-OCI on the property to determine the physical status, dominant land use and presence of at least three (3) monuments or natural boundaries therein. Accomplish the Certification on page 2 hereof and submit this CARPER LAD Form No. 1 to the DAR Provincial Office within seven (7) days upon receipt of this Memorandum.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Provincial Agrarian Reform Officer II**

(Signature over Printed Name)

CARPER LAD FORM No. 1/Page 1 of 2 Pages

**CARPER LAD Form No. 1**

(New)

**C E R T I F I C A T I O N**

This is to certify that DARMO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has undertaken actual Pre-OCI of the property of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as described on Page 1 of this Form, with the following findings:

*(Name of Owner: Family Name, First Name, Middle Name); (Add the phrase “and co-owners” if co-ownership)*

**Pls. Check applicable box/es:**

**Physical Land Status**: cultivated suitable to agriculture idle/vacant others,\_\_\_\_\_\_\_\_\_\_

(specify)

**Dominant Land Use**: rice corn coconut sugar others \_\_\_\_\_\_\_\_\_\_\_\_

(specify)

**No. of Monuments**:\_\_\_\_\_\_\_\_\_\_

**No. of Natural Boundaries**: \_\_\_\_\_\_\_\_\_\_ specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

**Municipal Agrarian Reform Officer**

(Signature over Printed Name)

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CARPER LAD Form No. 1/Page 2 of 2 Pages