



Date of Application: \_\_\_\_\_

**CHECKLIST OF REQUIREMENTS FOR RESUMPTION OF WORKS  
DURING COVID-19 PUBLIC HEALTH CRISIS**

Project Title: \_\_\_\_\_  
 Owner: \_\_\_\_\_ Building Permit No.: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Representative: \_\_\_\_\_ Contact No.: \_\_\_\_\_

In reference to the Revised SBMA Construction Safety Guidelines for the implementation of all infrastructure projects during the Covid-19 public health crisis, as pursuant to DPWH Department Order #39, Series of 2020, and to the Presidential Proclamation #922 and 929, Series of 2020, the following items below for checking to satisfy the requirement:

REQUIREMENTS	REMARKS	REQUIREMENTS	REMARKS
A.1 List of Personnel (21-59 yrs old)		A.4 Photos of Workplace Prevention and Control w/ supply of vitamins, medicines and oxygen tanks.	
A.2 Personnel Work Pass (undergone 14 days quarantine prior to deployment OR Medical Certificate fr. DOH accredited medical clinic)		A.5/B.5 Photos of proposed disinfection facilities & amenities in the site.	
A.3/B.2 Photos of proposed welfare facilities/quarters and amenities.		A.6 Work Protocol on Covid-19	
		A.8 Safety Officer	
		B.9 Shuttle Service (for off-site quarter)	
		IV.5 Certifications and Undertakings	
		IV.6 Site Inspection	

- Each item 1 hard copy for drop box submission; and soft copy for on-line application.
- For 15-day work – Requirement # A.1, A.2, A.5, A.6, A.8, B.9 & IV.5
- For 3-day work – Requirement # A.1, A.2, A.5, A.6, B.9 & IV.5

Other/Remarks: \_\_\_\_\_

**RESULT of request:**

**..... GRANTED .....**

**..... NOT GRANTED .....**

Notes/Remarks: \_\_\_\_\_

Please be guided that resumption of work are based on your workers' periodic medical status and your commitment to practice the aforementioned safety standards. The BPSD has the right to suspend or revoke/cancel the permit when deemed necessary in the event that any condition stated in the guidelines is violated.

**Assessed by:**

**Approved by:**

**Engr NESTOR C. SANTOS**

\_\_\_\_\_  
BPSD Staff

\_\_\_\_\_  
Manager, BPSD

Date/Time: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Cc: SDA Regulatory  
LADD  
File

