

# COMPENDIUM OF CDD FORMS AND TOOLS

*version April 2016*



**KALAHI-CIDSS**

*Kapit-Bisig Laban sa Kahirapan*

*Comprehensive and Integrated Delivery of Social Services*

Department of Social Welfare and Development

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**Table 1. LIST OF KPI-CONTRIBUTORY FORMS**

KC-NCDDP Outcomes and Indicators		CDD Paper-Based Form
<b>No.</b>	<b>Impact</b>	
1	% of poverty incidence reduced or recovered to pre-disaster level in target municipalities	
	<b>Program Development Outcome</b>	
	Communities in targeted poor and disaster-affected municipalities are empowered to achieve improved access to services and to participate in more inclusive local planning, budgeting, implementation, and disaster risk reduction and management	
	<b>Outcome Indicators</b>	
2	Households benefitting from sub-projects	Sub-Project Completion Report (Sub-Project's Household Beneficiaries is just a Tool to answer the number of HH served by the SP in the SPCR)
3	% of HHs that report better access to services	
4	% increase in access to and utilization of roads, education, health centers and water (major KC investments) in KC-NCDDP municipalities	
5	% of HHs in KC-NCDDP municipalities that report increase in confidence to participate in community development activities	
6	% of members from marginalized (IPs, women) groups in KC-NCDDP municipalities that attend regular Barangay Assemblies	
7	% of households in KC-NCDDP municipalities with at least one member attending regular Barangay Assembly	
	<b>Intermediate Outcomes Indicators</b>	
	<b>Component 1: Barangay Grants</b> Communities plan and use barangay grants effectively	

KC-NCDDP Outcomes and Indicators		CDD Paper-Based Form
8	% of KC-NCDDP barangays with poverty reduction action plans prepared, involving community members in accordance with the KC-NCDDP participatory process	Barangay/Community Activity Minutes Form
		Attachments: Barangay/Community Training/Meeting Attendance Sheet
		Copies of BAPs/BLPRAPs and BLGU resolutions
9	% of KC-NCDDP community projects completed in accordance with technical plans, schedule and budget	Sub-Project Completion Report
		Final Inspection Report
		Certificate of Completion and Acceptance
10	% of completed KC-NCDDP projects that meet basic financial standards based on KC-NCDDP Finance and Administration Sub- Manual	Sub-Project Completion Report
		Status of Sub-Project Fund Utilization Report
11	% of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating	Sustainability Evaluation Tool
12	% of the paid labor jobs created by the project are accessed by women	Employment Record Sheet
		CDD Sub-Project Workers basic Profile
13	No. of reconstructed or repaired shelters for disaster-affected households	Sub-Project Completion Report
		Final Inspection Report
		Certificate of Completion and Acceptance
	<b>Component 2: Capacity-building and Implementation Support</b> More inclusive and transparent planning and budgeting at municipal and provincial levels	
14	KC-NCCDP Plan for strategic capacity building of community volunteers, NGAs, CSOs and other partners implemented	
15	No. of KC-NCDDP municipalities with LGUs staff trained by DILG using the local governance modules	Municipal Activity Minutes Form
		Attachment: Municipal Activity Attendance Sheet

KC-NCDDP Outcomes and Indicators		CDD Paper-Based Form
16	% of KC-NCDDP municipalities with municipal poverty reduction plans prepared in accordance with KC-NCDDP participatory process	Municipal Activity Minutes Form
		Attachments: Municipal Activity Attendance Sheet
		Copies of Municipal LPRAPs and MLGU Resolution
17	% of KC-NCDDP municipalities with citizens, other than public officials, who participate in municipal-level prioritization forum	Municipal Activity Minutes Form
		Attachments: Municipal Activity Attendance Sheet
		Copies of MIBF Resolution
18	% of KC-NCDDP municipalities that provide LCC based on their LCC delivery plan	Municipal Consolidated Status of Local Counterpart Contribution
19	% of KC-NCDDP municipalities with increased membership of POs and CSOs in local development councils and special bodies (BDC, local school board, PTCA, local health board, peace and order councils)	PTA Integrations Plan Checklist
20	% of registered grievances satisfactorily resolved in line with the GRS	Grievance Redress System (GRS) Intake Form
21	No. of KC-NCDDP provinces with provincial poverty reduction plans prepared in accordance with pilot-test of NCDDP PLGU process	Copies of Provincial LPRAPs and PLGU Resolution
22	No. of community volunteers per barangay trained in CDD	Barangay/Community Activity Minutes Form
		Attachment: Barangay/Community Training/Meeting Attendance Sheet
23	% of leadership positions in community volunteer committees are held by women by 2017	Community Volunteers Profile
<b>Component 3: Program Management and M&amp;E</b>		
24	KC-NCDDP PIMS providing necessary information in a timely fashion to measure project effectiveness and results	



KC-NCDDP Outcomes and Indicators		CDD Paper-Based Form
25	KC-NCDDP multi-stakeholder oversight and coordinating committees in place and functional in accordance with TORs	Oversight and Coordinating Committees Checklist
26	No. of KC-NCDDP studies on effectiveness and outcomes completed, with a review of gender equality dimensions by 2017	
27	System for community fund request fully operational at national and regional levels	
28	% of targeted new KC-NCDDP municipalities generate sex-disaggregated data	
29	Gender action plan implemented	

## MUNICIPAL ACTIVITY ATTENDANCE SHEET

Province: \_\_\_\_\_

Date/Duration: \_\_\_\_\_

Municipality: \_\_\_\_\_

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_

Venue: \_\_\_\_\_

Cycle: \_\_\_\_\_

Title: \_\_\_\_\_

Last Name	First Name	M.I.	P a n t a w i d	S L P	I P	Sex		Age	Barangay/ Community	CDD Committee Membership			M/BLGU Official? (Y/N)	Sector (farmer, women, etc.)	Signature
						M	F			Committee Name (BRT, PPT, etc.)	Chair	Member			
<b>Sub-total</b>															

## MUNICIPAL ACTIVITY MINUTES FORM

Region: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Municipality: \_\_\_\_\_  
 Total Number of Brgys: \_\_\_\_\_  
 Venue: \_\_\_\_\_  
 Date: \_\_\_\_\_

### 1. Activity Profile

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_  
 Cycle: \_\_\_\_\_  
 Activity Name: \_\_\_\_\_  
 Facilitators: \_\_\_\_\_  
 Documenter/Secretary: \_\_\_\_\_

### 2. Attendance

Male attendees: \_\_\_\_\_  
 Female attendees: \_\_\_\_\_  
 Male IP attendees: \_\_\_\_\_  
 Female IP attendees: \_\_\_\_\_  
 Male Attendees 60 years old and above: \_\_\_\_\_  
 Female Attendees 60 years old and above: \_\_\_\_\_  
 Barangay/s represented: \_\_\_\_\_

### 3. Agenda/Objectives

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

### 4. Highlights of the activity including details of facilitation process and quality of participation of men and women during the activity. (Attach the LGU prescribed minutes)

### 5. PINCOs and Grievances

Who raised the Concern and Profile of the Person	PINCOs and Grievances	Resolution/Next Steps/Agreements
Ex. Juan, IP member		

**Prepared by:**

**Approved by:**

\_\_\_\_\_  
*Signature over Printed Name*

\_\_\_\_\_  
*Signature over Printed Name*

\_\_\_\_\_  
*Position*

\_\_\_\_\_  
*Position*

Attachments (not limited to the following depending on the activity):

1. Attendance Sheet
2. Resolutions
3. Results/Outputs of the Activity (Copy of Plans)

## BARANGAY/COMMUNITY ASSEMBLY ATTENDANCE SHEET

Province: \_\_\_\_\_

Date/Duration: \_\_\_\_\_

Municipality: \_\_\_\_\_

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_

Barangay/Community: \_\_\_\_\_

Cycle: \_\_\_\_\_

Purok/Sitio: \_\_\_\_\_

Venue: \_\_\_\_\_

Purpose of BA: \_\_\_\_\_

NAME			IP Leader?	IP Group	B/LGU Position (Captain, Kagawad, etc.)	Age	Sex		Signature
Last Name	First Name	M.I.					Male	Female	
<b>Sub-Total</b>									

## BARANGAY/COMMUNITY ASSEMBLY HOUSEHOLD PARTICIPATION

Province: \_\_\_\_\_

Date/Duration: \_\_\_\_\_

Municipality: \_\_\_\_\_

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_

Barangay/Community: \_\_\_\_\_

Cycle: \_\_\_\_\_

Venue: \_\_\_\_\_

Purpose of BA: \_\_\_\_\_

Sitio/Purok	Household Head Name			IP?	Pantawid Pamilya Beneficiary?	Total Families Present				Sector/s Represented	Remarks
	Last Name	First Name	M.I.			No. of Non-IP/ Pantawid Pamilya/SLP	No. of IP	No. of Pan-tawid	No. of SLP		
<b>Sub-Total</b>											

## BARANGAY/COMMUNITY ACTIVITY MINUTES FORM

Region: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Municipality: \_\_\_\_\_  
 Barangay/Community: \_\_\_\_\_  
 Venue: \_\_\_\_\_  
 Date: \_\_\_\_\_

Total HH in the Barangay \_\_\_\_\_  
 Total IP HH in the Barangay \_\_\_\_\_  
 Total Pantawid Pamilya HH in the Barangay \_\_\_\_\_

### 1. Activity Profile

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_  
 Cycle: \_\_\_\_\_  
 Activity Name/Purpose: \_\_\_\_\_  
 Facilitator/s: \_\_\_\_\_  
 Documenter/Secretary: \_\_\_\_\_

### 2. Attendance

Male attendees \_\_\_\_\_ Female attendees \_\_\_\_\_  
 Male IP attendees \_\_\_\_\_ Female IP attendees \_\_\_\_\_  
 Male attendees 60 years old and above \_\_\_\_\_ Female attendees 60 years old and above \_\_\_\_\_  
 Total HH represented \_\_\_\_\_  
 No. of IP HH represented \_\_\_\_\_ No. of IP Families represented \_\_\_\_\_  
 No. of SLP HH represented \_\_\_\_\_ No. of SLP Families represented \_\_\_\_\_  
 No. of Pantawid HH represented \_\_\_\_\_ No. of Pantawid Families represented \_\_\_\_\_  
 Purok/Sitios represented \_\_\_\_\_  
 Sectors represented \_\_\_\_\_

### 3. Agenda/Objectives

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

### 4. Highlights of the activity including details of facilitation process and quality of participation of men and women during the activity. (Attach the LGU prescribed minutes)

### 5. PINCOs and Grievances

Who raised the Concern and Profile of the Person	PINCOs and Grievances	Resolution/Next Steps/Agreements
e.g. Juan, IP member		

Prepared by:

Approved by:

\_\_\_\_\_  
*Signature over Printed Name*

\_\_\_\_\_  
*Signature over Printed Name*

\_\_\_\_\_  
*Position*

\_\_\_\_\_  
*Position*

Attachments (not limited to the following; depending on the activity):

1. Attendance Sheet
2. Resolutions
3. Results/Outputs of the Activity (Copy of Plans)

**COMMUNITY VOLUNTEER'S PROFILE**

Province: \_\_\_\_\_ Municipality: \_\_\_\_\_

Barangay: \_\_\_\_\_

Program: \_\_\_\_\_ Cycle: \_\_\_\_\_

Name: \_\_\_\_\_, \_\_\_\_\_ M.I.

*Last Name* *First Name*

Birth date (month/day/year): \_\_\_\_\_

Sex (Male or Female): \_\_\_\_\_ Civil Status: \_\_\_\_\_

No. of Children: \_\_\_\_\_

Highest Educational Attainment: \_\_\_\_\_

Occupation: \_\_\_\_\_

Sector Represented: \_\_\_\_\_

Current Position in Barangay LGU: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Address: \_\_\_\_\_

I.P.?: \_\_\_\_\_ I.P. Leader?: \_\_\_\_\_

Pantawid Familyang Pilipino Program Beneficiary? \_\_\_\_\_ Parent Leader? \_\_\_\_\_

Sustainable Livelihood Program Beneficiary? \_\_\_\_\_ SLP Officer? \_\_\_\_\_

Date of Volunteer's Identification/Appointment: \_\_\_\_\_

BSPMC Chair?: \_\_\_\_\_ Date Started: \_\_\_\_\_ Date Ended: \_\_\_\_\_

**Committee Membership in KC**

Name of Committee	Position	Date	
		Start	End

**Previous Trainings Attended (Non-KC)**

Title of Training	Training Provider	Year Attended

**Membership in Other Organization (Non-KC)**

Organization	Position

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Signature over Printed Name  
Community Empowerment Facilitator

## BARANGAY/COMMUNITY MEETING/TRAINING ATTENDANCE SHEET

Province: \_\_\_\_\_

Date/Duration: \_\_\_\_\_

Municipality: \_\_\_\_\_

Program/Project (e.g. NCDDP, KC-MCC, etc): \_\_\_\_\_

Barangay/Community: \_\_\_\_\_

Cycle: \_\_\_\_\_

Venue: \_\_\_\_\_

Title: \_\_\_\_\_

Last Name	First Name	M.I.	P a n t a w i d	S L P	I P	Sex		Age	Sitio/Purok	CDD Committee Membership			M/BLGU Official?	Sector (farmer, women, etc.)	Signature
						M	F			Committee Name (BRT, PPT, etc.)	Chair	Member			
<b>Sub-total</b>															



**SUB-PROJECT'S HOUSEHOLD BENEFICIARIES****Target? (SP Concept Form Attachment)****Actual? (SP Completion Report Attachment)**

Municipality: \_\_\_\_\_

Program/Project: \_\_\_\_\_

Barangay/Community: \_\_\_\_\_

Cycle: \_\_\_\_\_ Date: \_\_\_\_\_

Sub-Project Name: \_\_\_\_\_

Sub-Project Type: \_\_\_\_\_

Sitio / Purok	Household Head Name (HH Beneficiary of SP)	# of SP Beneficiaries within the HH			# of Families within the HH (Beneficiaries of SP only)			
		Male	Female	Total Individuals	IP	Pantawid	SLP	Total Families
	1							
	2							
	3							
	4							
	5							
	6							
	7							
	8							
	9							
	10							
	11							
	12							
	13							
	14							
	15							
	16							
	17							
	18							
	19							
	20							
	21							
	22							
	23							
<b>Sub-Total</b>								

Note: This is an optional form. It can be replaced by other documents available at the community which capture information on Households and Families including the Pantawid Pamilya Beneficiaries, IP and SLP benefitting from the sub-project.

## OVERSIGHT AND COORDINATING COMMITTEES CHECKLIST

Region: \_\_\_\_\_

Date accomplished: \_\_\_\_\_

Oversight/ Coordinating Committee Name	# of Male Members	# of Female Members	Date Organized (mm/dd/yy)	Regular Meetings Conducted (frequency of meetings)	Regional	Provincial	Municipal	Name of Province / Municipality

Prepared by:

\_\_\_\_\_  
*Name of Regional M&E / Area Coordinator*

### CDD SUB-PROJECT WORKERS' BASIC PROFILE

For the Period of (Month/Day/Year) From: \_\_\_\_\_ To: \_\_\_\_\_

Municipality: \_\_\_\_\_ Cycle: \_\_\_\_\_ Sub-Project Name: \_\_\_\_\_

Covered Barangays by SP: \_\_\_\_\_  Hauling  Pakyaw  CFA Sub-Project ID: \_\_\_\_\_

Last Name	First Name	Middle Name	Nature of Work (e.g. laborer, Carpenter, etc.)	Birthday (mm/dd/yy)	Sex	Barangay Name	IP	Beneficiaries	
								Pantawid	SLP

**Prepared by:**

**Noted by:**

\_\_\_\_\_  
*Community Empowerment Facilitator*

\_\_\_\_\_  
*Head, Project Implementation Team*

### PTA INTEGRATION PLANS CHECKLIST

Region: \_\_\_\_\_ Province: \_\_\_\_\_ Municipality: \_\_\_\_\_

Program/Project (KC-NCDDP, KC-PAMANA, etc): \_\_\_\_\_ Cycle: \_\_\_\_\_ Date MOA was signed: \_\_\_\_\_ Date SIA was signed: \_\_\_\_\_

Requirements	If complied, provide the following data:
<b>ACCOUNTABILITY</b>	
<b><i>Legislation/Resolution/Ordinances passed in support of CDD and Participatory Governance</i></b>	
Institutionalization of People’s PTA in LGU development, planning and poverty reduction programs, plans, and activities	Resolution No.: _____ Date of Approval: _____
Convergence of NGA poverty reduction PPAs in the Municipality	Resolution No.: _____ Date of Approval: _____
Formation of MIAC (Executive Order/Resolution issued)	Executive Order/Resolution No.: _____ Date of Approval: _____
Formation of MCT (Executive Order/Resolution issued)	Executive Order/Resolution No.: _____ Date of Approval: _____
NGO and PO Accreditation Guidelines	Resolution No.: _____ Date of Approval: _____
Support to BDP Formulation and BDP-MDP implementation including GAD plans	Resolution No.: _____ Date of Approval: _____
Municipal resolution expanding MDC membership to include CDD volunteers/representative	Resolution No.: _____ Date of Approval: _____ No. of CDD Volunteers as members of MDC: Male: _____ Female _____
<b><i>Support to KC-NCDDP Implementation</i></b>	
Allocation of LCC	SB Resolution No.: _____ Date of Approval: _____
Opening of Municipal Trust Fund	Account No.: _____ Date Opened: _____
Provision of KC Municipal Office and Equipment	KC Municipal Office Address: Equipment provided for KC?: If yes, attach list of equipment provided with information on: 1. Equipment/Item Name/Type 2. Quantity 3. Date Provided 4. End-user 5. Functionality
Provision of personnel (including MCT, Municipal Database Encoder and GAD Focal Person)	No. of LGU paid Staff provided for KC: (attach list of Staff with designation)
Assist community volunteers in KC-NCDDP procurement and fiduciary processes	No. of TAs provided: (attach list of Activities with dates)

<b>TRANSPARENCY</b>	
<b>Available Information on the State of Municipality</b>	
Income and Expenditure	Location of Posting: _____ Date Posted: _____
Budget and data used for formulating the budget	Location of Posting: _____ Date Posted: _____
LGU Plans and Activities	Location of Posting: _____ Date Posted: _____
<b>PARTICIPATION</b>	
NGO-PO engaged and represented in MDC and LSB	No. of NGO/PO accredited: Total No. of NGO/PO representatives in MDC: Male _____ Female _____ Total No. of NGO/PO representatives in LSB: Male _____ Female _____ (with Percentage vis-à-vis total composition)
Representation of highly marginalized/vulnerable groups in MDC and BDC (Pantawid, IPs, Women, Youth, Elderly, PWD)	Pantawid representative: Male _____ Female _____ IPs representative: Male _____ Female _____ Women representative: Male _____ Female _____ Youth representative: Male _____ Female _____ Elderly representative: Male _____ Female _____ PWD representative: Male _____ Female _____ (attached list of representative)
Regular LGU-CSO consultation and dialogue	No. of consultations conducted: (include dates conducted)
Conduct of participatory review and assessment of the gender responsiveness of GAD Plans and GAD-funded projects	No. of reviews/assessments conducted: (include dates conducted)
NGO participation in project implementation and monitoring	No. of NGOs involved in activities: (include dates conducted)

**Prepared by:**

**Noted by:**

\_\_\_\_\_  
Signature over Printed Name  
Area Coordinator

\_\_\_\_\_  
Signature over Printed Name  
Municipal Area Coordinator

## GRIEVANCE REDRESS SYSTEM (GRS) INTAKE FORM

<i>Date Received</i>	: _____	<i>Date Resolved:</i>	: _____
<i>GRS Form</i>	: <input type="checkbox"/> PINCOs	<input type="checkbox"/> Filed Grievance	
<i>Intake Level</i>	: <input type="checkbox"/> Central	<input type="checkbox"/> Region	<input type="checkbox"/> Municipal
<i>Grievance Location</i>	: Region : _____	Province: _____	Municipality: _____ Barangay: _____
<i>Mode of Filing</i>	:		
	<input type="checkbox"/> Mail/Letter	<input type="checkbox"/> Walk-in/verbal narration	<input type="checkbox"/> Phone/Fax <input type="checkbox"/> BA <input type="checkbox"/> Reports (specify) _____
	<input type="checkbox"/> E-mail	<input type="checkbox"/> Text Message	<input type="checkbox"/> Suggestion Box <input type="checkbox"/> Media <input type="checkbox"/> Others (specify) _____

### I. Complainant/Sender's Information

<i>Name (optional)</i>	: _____	<i>IP Group:</i>	: _____
<i>Sex</i>	: <input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Unknown <input type="checkbox"/> Group/Organization/Institution (specify): _____
<i>Designation/Position</i>	:		
	<input type="checkbox"/> MLGU Official/Staff	<input type="checkbox"/> BLGU Official/Staff	<input type="checkbox"/> DSWD/KC-NCDDP Personnel <input type="checkbox"/> Volunteer <input type="checkbox"/> Ordinary Resident
	<input type="checkbox"/> Contractor	<input type="checkbox"/> Service provider/Supplier	<input type="checkbox"/> Other Participating Agencies (specify): _____ <input type="checkbox"/>
	Others(specify) _____		
<i>Contact Information (Address/Tel/Fax/Cel./Email):</i>	: _____		

### II. Details of the Issue/Concern

<i>Nature of Issue/Concern:</i>			
<input type="checkbox"/>	<b>Type A:</b> Queries, Comments and Suggestions (non-contentious)		
<input type="checkbox"/>	<b>Type B:</b> Compliance with project processes, MOA and other KC-NCDDP implementation arrangements (non-performance of obligations)		
<input type="checkbox"/>	<b>Type C:</b> Conformance with KC-NCDDP/government procurement and finance guidelines (violation of law)		
 <i>Subject of Complaint:</i>			
<input type="checkbox"/>	<input type="checkbox"/> MLGU Official/Staff	<input type="checkbox"/> BLGU Official/Staff	<input type="checkbox"/> DSWD/KC-NCDDP Personnel <input type="checkbox"/> Volunteer <input type="checkbox"/> Ordinary Resident <input type="checkbox"/> Contractor
<input type="checkbox"/>	<input type="checkbox"/> Service provider/Supplier <input type="checkbox"/> Other Participating Agencies (specify): _____		<input type="checkbox"/> Others(specify) _____
 <i>Category of Concerns</i>			
<input type="checkbox"/>	<input type="checkbox"/> Administrative	<input type="checkbox"/> CEAC Schedule/Timeline	<input type="checkbox"/> Community Participation <input type="checkbox"/> Delivery of LCC <input type="checkbox"/> Delivery of Materials
<input type="checkbox"/>	<input type="checkbox"/> Financial Mgmt	<input type="checkbox"/> Gender Concerns	<input type="checkbox"/> Graft and Corruption <input type="checkbox"/> KC-NCDDP Process/Design/Guidelines
<input type="checkbox"/>	<input type="checkbox"/> LGU Participation	<input type="checkbox"/> O&M/Sustainability	<input type="checkbox"/> Positive Comments <input type="checkbox"/> Procurement
<input type="checkbox"/>	<input type="checkbox"/> Quality and Operations of SP <input type="checkbox"/> RFR Processing <input type="checkbox"/> Salary and allowances		<input type="checkbox"/> Social and Env't'l Safeguards
<input type="checkbox"/>	<input type="checkbox"/> SP Imple.		<input type="checkbox"/> TA/support, information dissem. and capability building <input type="checkbox"/> Other concerns specify) _____

Details of Concern (if PINCOs, indicate if Community and/or Operation and Management Concern):

<b>Details/Narrative Summary</b> (Use additional sheet if table is not enough.)	<b>Actions Taken/Resolution of the Issue</b>	<b>FOR PINCOs ONLY</b> <b>Recommendations</b> (Action needed from RPMO/NPMO/Other agencies)

**III. Complainant's Feedback on Resolution of Grievance**

- No comment     
  Not Satisfied     
  Satisfied     
  Very Satisfied

**Name of Intake Office**

**Designation**

**List of Categories**

Concerns	Cases/Examples
<input type="checkbox"/> Administrative (includes HR concerns - (recruitment, hiring, staffing, behavior of staff))	<ul style="list-style-type: none"> <li>• Misconduct</li> <li>• Tardiness/absences</li> <li>• CF should smile more</li> </ul>
<input type="checkbox"/> CEAC Schedule/Timeline	<ul style="list-style-type: none"> <li>• Schedule of MIBF</li> <li>•</li> </ul>
<input type="checkbox"/> Community participation (functionality of committees, volunteers' responsibility, etc.)	<ul style="list-style-type: none"> <li>• Volunteers not attending trainings</li> <li>• Resignation of volunteers</li> <li>• Low participation in BAs</li> </ul>
<input type="checkbox"/> Delivery of LCC	<ul style="list-style-type: none"> <li>• LCC Cash commitment not yet downloaded to community account</li> </ul>
<input type="checkbox"/> Delivery of materials	<ul style="list-style-type: none"> <li>• Contractor failed to deliver gravel and sand</li> <li>• Delivery of substandard materials</li> </ul>
<input type="checkbox"/> Financial Management	<ul style="list-style-type: none"> <li>• Pay roll padding</li> <li>• Inconsistent signatories in vouchers</li> <li>• Misuse of funds</li> </ul>
<input type="checkbox"/> Gender concerns	<ul style="list-style-type: none"> <li>• Sexual harassment</li> <li>• Gender discrimination</li> </ul>
<input type="checkbox"/> Graft and corruption	<ul style="list-style-type: none"> <li>• Bribery of contractor</li> <li>• Pilferage of materials</li> </ul>
<input type="checkbox"/> KC-NCDDP Process/design/guidelines	<ul style="list-style-type: none"> <li>• Collusion in MIBF</li> <li>• Intervention to community decisions</li> <li>• Non-inclusion in selection of volunteer</li> <li>• Tedious KC-NCDDP process</li> <li>• Fraudulent filing up of attendance sheet by CF</li> </ul>
<input type="checkbox"/> LGU Participation	<ul style="list-style-type: none"> <li>• Barangay Captain does not support KC-NCDDDP activities</li> </ul>
<input type="checkbox"/> O&M/Sustainability (includes financial management issues, functionality of SPs and ODM)	<ul style="list-style-type: none"> <li>• Water system association not active</li> <li>• No funding from barangay to maintain SP</li> </ul>
<input type="checkbox"/> Positive Comments	<ul style="list-style-type: none"> <li>• The community expressed appreciation to the entry of KC-NCDDP in their barangay.</li> </ul>
<input type="checkbox"/> Procurement	<ul style="list-style-type: none"> <li>• Can shopping be conducted in lieu of bidding?</li> <li>• No bidding conducted</li> </ul>
<input type="checkbox"/> Quality and operation of SPs	<ul style="list-style-type: none"> <li>• Unfinished footbridge</li> <li>• POW/design of SP not followed</li> </ul>
<input type="checkbox"/> RFR Processing	<ul style="list-style-type: none"> <li>• Reason why RFR not downloaded</li> </ul>
<input type="checkbox"/> Salary and allowances	<ul style="list-style-type: none"> <li>• Delay in salary of staff</li> <li>• Travel allowances not enough</li> </ul>
<input type="checkbox"/> Social and environmental safeguards	<ul style="list-style-type: none"> <li>• No deed of donation</li> <li>• IP not consulted</li> </ul>
<input type="checkbox"/> Subproject implementation	<ul style="list-style-type: none"> <li>• Delays in subproject implementation due to weather</li> <li>• Labor issues</li> </ul>
<input type="checkbox"/> TA/support, information dissemination and capability building	<ul style="list-style-type: none"> <li>• Non-provision of technical assistance by LGU staff</li> <li>• Non-consistency of information during KC-NCDDP implementation</li> </ul>

**GRIEVANCE REDRESS SYSTEM BARANGAY INSTALLATION CHECKLIST**

Region: \_\_\_\_\_

Province: \_\_\_\_\_

Municipality: \_\_\_\_\_

Barangay/Community: \_\_\_\_\_

Program/Project (e.g. KC-NCDDP, KC-PAMANA, etc): \_\_\_\_\_

Cycle: \_\_\_\_\_

<b>Requirement</b>	<b>Date Complied</b>	<b>MOVs</b>
1. GRS Orientation conducted (1 <sup>st</sup> Barangay Assembly)		BA Minutes
2. GRS volunteers identified		Volunteers' Profile
3. Training of community members on handling grievances conducted		Training Attendance Sheet
4. Information materials available with grievance hotline (at least one of the following: manual at the Barangay Hall, pamphlets/brochures given to HHs, posters)		Inspection
5. Means of reporting grievances available (at least one of the following: grievance/suggestion box, phone numbers, office address)		Inspection

\_\_\_\_\_  
*Signature over Printed Name*  
*Community Empowerment Facilitator*



**GRIEVANCE REDRESS SYSTEM MUNICIPAL INSTALLATION CHECKLIST**

Region: \_\_\_\_\_

Province: \_\_\_\_\_

Municipality: \_\_\_\_\_

Program/Project (e.g. KC-NCDDP, KC-PAMANA, etc): \_\_\_\_\_

Cycle: \_\_\_\_\_

<b>Requirement</b>	<b>Date Complied</b>	<b>MOVs</b>
1. Information dissemination on GRS (Municipal Orientation)		MO Minutes of the Meeting
2. Municipal GRS Committee identified		MO Minutes of the Meeting Resolution
3. Training of ACT /MCT on handling grievances conducted		Training Attendance Sheet
4. Information materials available with grievance hotline (at least one of the following: manual at the ACT Office, pamphlets/brochures, posters)		Inspection
5. Means of reporting grievances available (at least one of the following: grievance/suggestion box, phone numbers, office address)		Inspection
Grievance /Suggestion Box <input type="checkbox"/>		
Phone Number/s Hotline:		
Office Address:		

---

*Signature over Printed Name*  
*Area Coordinator*

**BARANGAY PROFILE FORM****BASIC INFORMATION**

Region	
Province	
Municipality	
Barangay	
Cycle	
No. of Sitios/Puroks	
Inclusive Years under KC	

**Population Profile**

1. Total number of households	
2. Total number of families	
3. No. of male	
4. No. of female	
5. No. of male children ages 0-5 years old	
6. No. of female children ages 0-5 years old	
7. No. of male <u>children ages</u> 6-12 years old	
8. No. of female <u>children ages</u> 6-12 years old	
9. No. of male children ages 13-17 years old	
10. No. of female children ages 13-17 years old	
11. Total male voting population	
12. Total female voting population	
13. Total male labor force	
14. Total female labor force	

## Indigenous People

Are there indigenous people (IP) in your barangay? \_\_\_\_\_

IP group	Location/Sitio	Total households	Total families	Total male	Total female
Total					

## Conflict-affected / Pantawid Pamilya and SLP Beneficiaries

Is the barangay affected by armed conflict? \_\_\_\_\_

If yes, please give additional details of the armed conflict in the area

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No. of Pantawid Pamilya household beneficiaries in the barangay \_\_\_\_\_

No. of Pantawid Pamilya family beneficiaries in the barangay \_\_\_\_\_

No. of SLP household beneficiaries in the barangay \_\_\_\_\_

No. of SLP family beneficiaries in the barangay \_\_\_\_\_

## AREA PROFILE

Is this a Poblacion Barangay? \_\_\_\_\_

If not, how many hours does it take to travel to Poblacion? \_\_\_\_\_

No. of kilometers from the Poblacion \_\_\_\_\_

What is the geographic characteristic of the Barangay? (i.e upland, hilly, lowland, island, coastal)? \_\_\_\_\_

Is the barangay isolated from the rest of the barangays? \_\_\_\_\_

## Affected by any of the following Peace and Social Cohesion issues? Check if 'Yes'.

\_\_\_\_ Armed conflict

\_\_\_\_ Boundary and territorial disputes

\_\_\_\_ Political and extra judicial killings

\_\_\_\_ Family and gender-based violence

\_\_\_\_ RIDO or clan wars/Tribal wars of 'pangayao'

\_\_\_\_ Crime

### **BARANGAY ORGANIZATION**

What organizations operate within the barangay? (Use another sheet for more organizations)

	Organization 1	Organization 2
Name		
Type of Organization (ex. PO, NGO, Private institution/CSR)		
Formal? (Registered, answer yes or no)		
LGU-accredited? (Yes or No)		
Advocacy (Savings, religious, farmers, fisherfolk, women, etc.)		
Area of operation (ex. nationwide, municipal, different barangays, etc.)		
Years operating in barangay		
Active or inactive organization?		
Activities (Identify major activities)		
Total male members from barangay		
Total female members from barangay		
Male IP members from barangay		
Female IP members from barangay		
Marginalized sectors represented		

**LOCAL GOVERNANCE**

**BLGU Officials' Profile**

<b>Name</b>	<b>Sex</b>	<b>Age</b>	<b>Civil Status</b>	<b>IP Group</b>	<b>Educational Attainment</b>	<b>Position in Barangay Council</b>	<b>Inclusive Date (Start and End Date)</b>	<b>Name of Non-KC Organization</b>

*\*to be updated once the Program starts*

**Barangay Development Council Profile (Identify only those not listed in BLGU Officials' Profile)**

Name	Sex	Age	Civil Status	IP Group	Educational Attainment	Position in Barangay Council	Inclusive Date (Start and End Date)	Name of Non-KC-Organization	Sector Represented

*\*to be updated once the Program starts*

During the past year, how many times were the BAs conducted?	
On the average, how many barangay households are present during the meetings?	
<ul style="list-style-type: none"> <li>• How many male residents were present?</li> </ul>	
<ul style="list-style-type: none"> <li>• How many female residents were present?</li> </ul>	
<ul style="list-style-type: none"> <li>• How many IP households were present?</li> </ul>	
<ul style="list-style-type: none"> <li>• What other sectors were present?</li> </ul>	
During the past year, how many times did the BDC meet?	
How many, on the average, attend the BDC meetings? (refer to attendance sheet)	
<ul style="list-style-type: none"> <li>• Male BLGU Officials</li> </ul>	
<ul style="list-style-type: none"> <li>• Female BLGU Officials</li> </ul>	
<ul style="list-style-type: none"> <li>• Male PO/CBO representatives</li> </ul>	
<ul style="list-style-type: none"> <li>• Female PO/CBO representatives</li> </ul>	

**What is the total annual budget of the barangay? How much was the IRA the past year? What are other sources of funds of the barangay?**

<b>Source of Funds</b>	<b>Amount</b>
IRA	
Other Sources:	
<b>TOTAL</b>	

**How were the barangay funds allocated in the previous year? (Refer to Barangay Annual Investment Plan)**

<b>Category</b>	<b>Amount</b>
Environment	
Economic Sector	
Infrastructure	
Social development	
Institutional Sector	
Gender and Development	
DRRM	
Other allocation	
TOTAL	

**How was the 5% GAD fund utilized by the barangay?**

<b>Activity</b>	<b>Cost</b>
TOTAL	



Over the past year, what development project/s has/have been implemented in your barangay?

Project	Location	Scope (Coverage, Unit, Physical Target)	Cost of Project	Source of Funds	Cost Sharing (%)	Beneficiaries		
						M	F	IPs

*Examples of Development Projects*

- 1 Roads
- 2 Water Supply
- 3 Toilet
- 4 Livelihood
- 5 Education
- 6 Electrification
- 7 Health and Nutrition
- 8 Others

*Types of Source of Funds*

- 1 Barangay Fund
- 2 Municipal Fund
- 3 Provincial Fund
- 4 National government agencies  
(e.g. DSWD, DA, etc.)
- 5 ODA ( Foreign-assisted projects)
- 6 Others

**POVERTY**

Identify top three economic activities in the barangay

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Identify major crops in the barangay

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

What is the average annual household income in the barangay? \_\_\_\_\_

What is the average annual income for males? \_\_\_\_\_

What is the average annual income for females? \_\_\_\_\_

What is the average annual income for IPs? \_\_\_\_\_

What types of road traverse through the barangay?

<b>Types of Road</b>	<b>%</b>
Dirt	
Gravel	
Asphalted	
Cemented/All Weather Road	

What are the modes of transportation available?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Which of the following establishments and services are available in the barangay? If not available, how far is your barangay to the nearest establishment/service provider? (if the listed services and establishments are not applicable or “no use” to your barangay, write n/a)

<b>Facilities/Establishments/Services</b>	<b>Please check if available</b>	<b>If none, distance to nearest facility (hours)</b>	<b>Mode of Transport and cost</b>
Barangay hall			
Multi-purpose building			
Tribal hall			
Evacuation center			
Market place/bagsakan center			
Stores			
Mini port			
Daycare center			
Elementary School			
Secondary School			
College or university			
Health station			
Hospital			
Irrigation			
Pre/Post Harvest Facilities			
Water supply system			
Drainage System			
Waste facility			
Cemetery			
Electricity			
Telecommunication Access			
Bank			
Credit facility			
Tanod/police			
Emergency services			
Environmental protection			
Postal service			
Capability/skills training			
<ul style="list-style-type: none"> <li>• Health</li> </ul>			

Facilities/Establishments/Services	Please check if available	If none, distance to nearest facility (hours)	Mode of Transport and cost
• Organizational development			
• Agriculture and enterprise			
• Education			
• Others			

What are the main problems in the barangay? Identify.

Problem	Details	Are these problems being addressed properly?	Remarks
Access/ Mobility			
Water and Sanitation			
Health and Nutrition			
Literacy/Education			
Employment/Income Generation			
Land Ownership/Asset Distribution			
Agricultural Service Facilities (i.e. post-harvest)			
Peace and Order			
Environment			
Power Supply			
Communications			
Others, specify			

## Poverty Profile

Indicators	Value	Reference
<b>Health</b>		
1. Proportion of children aged 0-5 years old who died		
a) Number of children aged 0-5 years old who died		
b) Total children aged 0 -5 years old		
2. Proportion of women who died due to pregnancy-related causes		
a) Number of pregnant women who died due to pregnancy-related causes		
b) Total pregnant women		
<b>Nutrition</b>		
3. Proportion of children aged 0-5 years old who are malnourished		
a) Number of children aged 0-5 years old who are malnourished		
b) Total children aged 0-5 years old		
<b>Access to Basic Amenities</b>		
4. Proportion of households with access to safe water		
a) Number of households with access to potable water (within 250m)		
b) Total number of households		
5. Proportion of households with access to sanitary toilet facilities		
a) Number of households with access to sanitary toilet facilities		
b) Total number of households		
<b>Shelter</b>		
6. Proportion of households who are squatting		
a) Number of households who are squatting		
b) Total number of households		
7. Proportion of households living in makeshift housing		
a) Number of households living in makeshift housing		
b) Total number of households		
<b>Peace and Order</b>		
8. Proportion of households with members victimized by crimes		
a) Number of households with members victimized by crimes		
b) Total number of households		
<b>Income</b>		
9. Proportion of households with income less than the poverty threshold		

Indicators	Value	Reference
a) Number of households with income less than the poverty threshold		
b) Total number of households		
10. Proportion of households with income less than the food threshold		
a) Number of households with income less than the food threshold		
b) Total number of households		
11. Proportion of households who eat less than three (3) meals a day		
a) Number of households who eat less than three (3) meals a day		
b) Total number of households		
Basic Education		
12. Proportion of 6-12 years old children who are not in elementary school		
a) Number of children 6-12 years old who are not in elementary school		
b) Total number of children 6-12 years old		
13. Proportion of 13-16 years old children who are not in secondary school		
a) Number of children 13-16 years old who are not in secondary school		
b) Total number of children 13-16 years old		
Employment		
14. Proportion of the members of the labor force who are not working		
a) Number of labor force who are not working		
b) Total number of labor force		

\_\_\_\_\_  
*Signature over Printed Name*  
 Community Empowerment Facilitator

\_\_\_\_\_  
*Signature over Printed Name*  
 Area Coordinator

Date Started: \_\_\_\_\_

Date Accomplished: \_\_\_\_\_

## MUNICIPAL PROFILE FORM

### BASIC INFORMATION

Region	
Province	
Municipality	
No. of Barangays	
Cycle	
Inclusive Years of KC	

### MUNICIPAL ORGANIZATION

**What organizations operate within the municipality?** (Use another sheet for more organizations)

	Organization 1	Organization 2	Organization 3
Name			
Type of Organization (ex. PO, NGO, Private institution/CSR)			
Formal? (Registered, answer yes or no)			
LGU-accredited? (Yes or No)			
Advocacy (Savings, religious, farmers, fisher folk, women, etc.)			
Area of operation (ex. nationwide, municipal, different barangays, etc.)			
Years operating in municipality			
Active or inactive organization?			
Activities or Services (identify major activities)			
Total male members from municipality			
Total female members from municipality			
Male IP members from municipality			
Female IP members from municipality			
Marginalized sectors represented			

**LOCAL GOVERNANCE**

**MLGU Officials' Profile**

Name	Sex	Age	Civil Status	IP Group	Educational Attainment	Current Position in LGU	Inclusive Date (Start and End Date)

*\*to be updated once the Program starts*

**Municipal Development Council Profile (Identify only those not listed in MLGU Officials' Profile)**

Name	Sex	Age	Civil Status	IP Group	Educational Attainment	Position in MDC	Inclusive Date (Start and End Date)	Sector Represented



What is the total annual budget of the municipality? How much was the IRA in the previous year? What are other sources of funds of the municipality?

Source of Funds	Amount
IRA	
Other Sources:	
TOTAL	

How were municipal funds allocated in the previous year?

Category	Amount
Environment	
Economic Sector	
Infrastructure	
Social development	
Institutional Sector	
Gender and Development	
DRRM	
Other allocation	
TOTAL	

How was the GAD fund utilized by the municipality?

Activity	Cost
TOTAL	

How was the DRRM fund utilized by the municipality?

Activity	Cost
TOTAL	

## **POVERTY/SOCIO-ECONOMIC SITUATION**

### **Economic Activities**

Identify top three income-generating activities in the Municipality, average income per activity and number of HHs involved

Income-Generating Activity	Average Income	No. of HHs involved	Seasonality

**Land Tenure Status**

Tenurial Status	No. of HHs	No. of HH Head	
		Male	Female
Owner			
Tenant			
Renting			
Squatting			

What is the average annual household income? \_\_\_\_\_

What is the average annual income for male-headed HHs? \_\_\_\_\_

What is the average annual income for female-headed HHs? \_\_\_\_\_

What is the average annual income for IP-headed HHs? \_\_\_\_\_

**Mode of Transportation and Cost**

Mode of Transport	Cost (Minimum – Maximum)
1.	
2.	
3.	
4.	
5.	
Etc.	

\_\_\_\_\_  
*Signature over Printed Name*  
*Area Coordinator*

\_\_\_\_\_  
*Signature over Printed Name*  
*Technical Facilitator*

\_\_\_\_\_  
*Signature over Printed Name*  
*Municipal Financial Analyst*

Date Started: \_\_\_\_\_

Date Accomplished: \_\_\_\_\_

## COMMUNITY MONITORING PLAN TEMPLATE

Areas of Monitoring	Required Key Activities	Expected Outputs/ Beneficiaries	Sources of Information	Accomplishments by Mid Cycle	Accomplishments by End of Cycle	Remarks
BAP						
Commitments						
KC-NCDDP Implementation						
SPI						

## COMMUNITY MONITORING WORK PLAN

Major Activities	Specific Activities	When	Who are Involved?	Resources Needed
Mid Cycle Monitoring	Ex. Community meeting, Interview MPDC, Review KC database			
End of Cycle Monitoring				

## Deed of Donation

### KNOW ALL MEN BY THESE PRESENTS:

That I, \_\_\_\_\_ of legal age, single / married to \_\_\_\_\_ with postal address at \_\_\_\_\_ hereinafter referred to as the DONOR, and (name of barangay), Municipality of (name of municipality), Province of (name of province), herein represented by (name of Barangay Chairperson), Barangay Chairperson, of legal age, with postal address at \_\_\_\_\_ hereinafter called the DONEE, witnesseth:

That the DONOR is the registered owner of a parcel of land, more particularly described as follows:  
*(Insert description of property to be donated)*

That the DONEE is the duly elected Barangay Chairperson of the Barangay where the parcel of land of the DONOR is located;

That FOR AND IN CONSIDERATION of the DONEE'S desire to contribute to the development of the Barangay and its residents, and as an act of gratitude and liberality on his part, the DONOR hereby voluntarily GIVES, TRANSFERS, and CONVEYS by way of donation, unto the said DONEE, his heirs and assigns, the above described property, together with all the improvements found thereon, free from all liens and encumbrances;

That the DONOR affirms that this donation is not made with intent to deceive his creditors, and that he has reserved for himself sufficient funds and property;

That the DONEE hereby accepts and receives this donation made, in favor of the Barangay Sub-Project Management Committee (BSPMC) of Barangay (name of barangay) for the implementation of (name of sub-project), by the DONOR, and hereby manifests his gratefulness for the latter's generosity.

IN WITNESS WHEREOF, both the DONOR & DONEE have hereunder subscribed their names this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_ at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
DONOR

\_\_\_\_\_  
DONEE

\_\_\_\_\_  
WITNESSES:

### ACKNOWLEDGEMENT

Republic of the Philippines)  
\_\_\_\_\_ ) S.S

BEFORE ME, a notary for and in the Municipality of \_\_\_\_\_, personally appeared:

Name	CTC Number	Date/Place Issued
(Donee)	00000000	June 28, 200_ / _____

Known to me and to me known to be the same persons who executed the foregoing Deed of Donation and acknowledged to me that the same is their free and voluntary act and deed.

**WITNESS MY HAND AND SEAL**, on the date and place first above written.

Doc. No. \_\_\_\_\_;  
Page No. \_\_\_\_\_;  
Book No. \_\_\_\_\_;  
Series of 200\_.

Notary Public

*This is a sample of a Deed of Donation. You may freely copy and revise this form.*

## Environmental and Social Safeguards Checklist

Name of Subproject: \_\_\_\_\_

Location: \_\_\_\_\_

Community Representative and Address: \_\_\_\_\_

RPMO Representative and Address: \_\_\_\_\_

### I. Subproject Screening:

- a. Has the subproject been screened against the list of ineligible activities (negative list)? If yes, proceed. If no, contact ACT to conduct screening.

### II. Site Selection:

- a. When considering the location of a subproject, rate the sensitivity of the proposed site in the following table according to the given criteria. Higher ratings do not necessarily mean that a site is unsuitable. They do indicate a real risk of causing undesirable adverse environmental and social effects, and that more substantial environmental and/or social planning may be required to adequately avoid, mitigate or manage potential effects.

Issues	Site Sensitivity			Rating
	Low	Medium	High	
Natural Habitats	No natural habitats present of any kind	No critical natural habitats; other natural habitats occur	Critical natural habitats present. Within declared protected areas.	
Water quality and water resource availability and use	Water flows exceed any existing demand; low intensity of water use; potential water use conflicts expected to be low; no potential water quality issues.	Medium intensity of water use; multiple water users; water quality issues are important	Intensive water use; multiple water users; potential for conflicts is high; water quality issues are important	
Natural hazards vulnerability, floods, soil stability/erosion	Flat terrain; no potential stability/erosion problems; no known volcanic/seismic/ flood risks	Medium slopes; some erosion potential; medium risks from volcanic/seismic flood/typhoons	Mountainous terrain; steep slopes; unstable soils; high erosion potential; volcanic seismic or flood risks.	
Physical Cultural Property	No known or suspected physical cultural heritage sites	Suspected cultural heritage sites; known heritage sites in broader area of influence	Known heritage sites in subproject area	
Involuntary Resettlement	Low population density; dispersed population; legal tenure is well defined;	Medium population density; mixed ownership and land tenure;	High population density; major towns and villages; low income families and/or illegal ownership of land; communal properties.	
Indigenous Peoples	No indigenous population	Dispersed and mixed indigenous populations; highly acculturated indigenous populations	Indigenous territories (CADT), reserves and /or lands; vulnerable indigenous populations.	

### III. Areas for Potential Environmental and Social Impact

		Yes	No
<b>A. Environment - Will the Subproject:</b>			
1	Risk the contamination of drinking water?		
2	Cause poor water drainage and increase the risk of water related diseases such as malaria, dengue and schistosomiasis		
3	Harvest or exploit a significant amount of natural resources such as trees, wood for fuel or water?		
4	Be located within or nearby environmentally sensitive areas, protected areas (e.g. intact natural forests, mangroves, wetlands or threatened species?)		
5	Create a risk of increased soil degradation or erosion?		
6	Create a risk of increasing soil salinity?		
7	Produce, or increase the production of solid wastes (e.g. water, medical/healthcare, domestic or construction wastes)?		
8	Affect the quantity or quality of surface waters (e.g. rivers, streams, wetlands), or groundwater (e.g. wells)		
9	Result in the production of solid or liquid waste, or result in an increase in waste production, during construction or operation?		
<i>If the answer to any question from 1-9 is "Yes", please include an Environmental and Social Management Plan (ESMP) with the subproject application</i>			
<b>B. Land Acquisition and access to resources – Will the Subproject:</b>			
10	Require that land (public or private) be acquired (temporarily or permanently) for its development?		
11	Use land that is currently occupied or regularly used for productive purposes (e.g. gardening, farming, pasture, fishing, forests)		
12	Physically or economically <sup>1</sup> Displace individuals, families, businesses? Have any individuals, families, businesses been displaced up to 2 years prior to subproject enrolment?		
13	Result in the temporary or permanent, partial or total loss of crops, fruit trees, fixed assets, and/or household infrastructure such as crop storage facilities, outside toilets and kitchens		
14	Result in the involuntary restriction of access by people to legally designated parks and protected areas <sup>2</sup> ?		
<i>If the answer to any of the questions 10 -14 is "Yes", please inform the RPMO and prepare appropriate documents required under the LARR Framework (see Annex G).</i>			
<b>C. Indigenous People – Are there:</b>			
15	Any indigenous groups living within the boundaries of the barangay where the subproject will be located?		

<sup>1</sup> Loss of income sources and means of livelihoods due to land acquisition

<sup>2</sup> e.g. the project will affect access to natural resources, communal facilities and services; due to change in land use, project will have an adverse impact on social and economic activities; access to land and resources owned communally or by the state will be restricted due to the project

16	Resources (land, water, etc.) to be used for the subproject, over which the Indigenous People have prior claim?		
17	Members of these indigenous groups who would be affected (ie. benefit from, or be adversely affected) by the subproject?		
<i>If the answer to any of the questions 15 - 17 is "Yes" please inform the RPMO and if needed, prepare an Indigenous Peoples Plan (IPP)<sup>3</sup>..</i>			
<b>D. Pesticides and Agricultural Chemicals - Will the subproject:</b>			
18	Will the subproject increase agricultural productivity? This may happen when the subproject is an irrigation or water impounding activity.		
<i>If the answer to Question 18 is "Yes" please inform the RPMO and coordinate with the Municipal Agricultural Officer of the LGU. Integrated Pest Management techniques should be promoted among the beneficiaries.</i>			

**CERTIFICATION**

We certify that we have thoroughly examined all the potential adverse effects of this subproject. To the best of our knowledge, the subproject plan as described in the application and associated planning reports (e.g. ESMP, RAP, IPP), if any, will be adequate to avoid or minimize all adverse environmental and social impacts.

Community Representative (signature) \_\_\_\_\_

PMO team representative (signature) \_\_\_\_\_

Date: \_\_\_\_\_

<sup>3</sup> If the screening and SIA indicate that the proposed project will have impacts, positive and/or negative, on Indigenous Peoples, the borrower/client will prepare an IPP in the context of the SIA and through meaningful consultation with the affected Indigenous Peoples communities; however, for subprojects where IPs are the sole or overwhelming majority of direct project beneficiaries, and when only positive impacts are identified, a stand-alone IPP will not be required. Elements of an IPP (meaningful consultations, information disclosure, and beneficial measures to IP communities) are included in the overall project design document (such as CMP) and a report of these subprojects (including an assessment of the benefits accruing to IP communities) will be submitted as part of the periodic project progress reports submitted to the DSWD



## Environmental and Social Management Plan (ESMP) and Mitigating Measures for Eligible Sub-projects under the KC-NCDDP

( \_\_\_\_\_ Barangay, Municipality of \_\_\_\_\_ Province of \_\_\_\_\_, Region \_\_\_\_\_ )

**NOTE:** Summary of consultations (signed by community empowerment facilitator) must be attached with the following information for each consultation: (i) date of consultation; (ii) venues of consultation; (iii) who are the participants (for example: residents of the barangay, women, indigenous peoples, etc.), number of participants (number of women, number of men, number of members of ethnic minority/indigenous peoples); (iv) topics discussed; (v) issues and questions raised by participants; (v) conclusion on issues and questions raised.

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
<b>Phase 1: Planning, Development, and Pre-Implementation/Pre-Construction Phase</b>						
1.1 In Compliance with: <b>Govt. Policies on a) Program policies on participation of women, and Gender and Development, and; b) GOP: RA 7192 Women in Development and Nation Building;</b>						
1.1.1						
1.1.2						
...						
1.2 In compliance with <b>RA 8371 Indigenous Peoples Rights Act (IPRA) and NCIP AO No. 3 series 2012, and WB and ADB safeguards policies on Indigenous Peoples</b>						
1.1.1						
1.1.2						
Notes:						
1. Describe the <u>positive</u> and/or <u>negative</u> impacts on indigenous peoples and include the following information: - Types of impact <sup>1</sup> and number of affected IP households and IP persons <u>for each ethnic group</u>						

<sup>1</sup> Impacts can be NEGATIVE or POSITIVE in one or more of the following aspects: (i) customary/traditional rights of use and access to land and natural resources; (ii) socioeconomic status; (iii) cultural and communal integrity; (iv) health, education, livelihood and social security status; (v) indigenous knowledge.

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
<ul style="list-style-type: none"> <li>- Severity of impacts<sup>2</sup></li> <li>- Baseline socioeconomic information on affected IP communities<sup>3</sup></li> </ul>						
<b>1.3 In compliance with PD 1067 Water Code of the Philippines, regulations on easements, and guidelines on No build, No dwelling, and Multi-hazard risk areas.</b>						
1.1.1 1.1.2 ...						
<b>1.4 In compliance with RA 8974 and RA 7279; EO 1035 Acquisition of Private Property, and latest issuances on WB and ADB safeguards policies on involuntary resettlement</b>						
1.1.1 1.1.2 ... Note: 1. Where there are land acquisition and/or involuntary resettlement impacts, include details on: <ul style="list-style-type: none"> <li>- Number of Affected Households for each category of impact or type of loss<sup>4</sup> (disaggregated by ethnic group and gender of household head)</li> <li>- Number of Affected Persons</li> <li>- Severity of loss<sup>5</sup></li> </ul>	Note: For sub-projects with involuntary resettlement and/or land or right of way (ROW) acquisition, state amount and arrangements for compensation and other rehabilitation measures for <u>each type of loss</u> on land and non-land fixed assets and/or income sources and/or access to resources based on the Project					

<sup>2</sup> State whether or not the impacts can be reversed or mitigated and if these are permanent

<sup>3</sup> For example, include the following information on each affected indigenous group: percentage of the indigenous group in the total population; literacy/education level; main source of livelihood; poverty status, other **factors that may affect their effective participation in the Project and whether or not they benefit from the Project.**

<sup>4</sup> Example of type of loss: permanent and/or temporary loss of residential land, commercial land, productive land, etc.; total or partial loss of structures (house, fence, etc); loss of crops, trees, etc.

<sup>5</sup> For example: (number) of households will permanently/temporarily lose a total of \_\_\_\_ m2 of \_\_\_\_ land. There are (number) of severely affected households with (number) of severely affected persons (severely affected households are those who (i) lose 10% or more of their total productive assets (e.g. productive land, income sources); and/or (ii) are physically displaced or relocated due to the project.

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
	Resettlement Framework and prior consultation <sup>6</sup> with project-affected persons					
1.5 In compliance with PD 1144 Fertilizer and Pesticides Act, and ADB and WB regulations on the use of pesticides.						
1.1.1 1.1.2 ...						
1.6 In compliance with other relevant laws and regulations						
1.1.1 1.1.2 ...						
<b>Phase 2: Implementation / Construction Phase</b>						
<b>2.1 Physical Environment</b>						
2.1.1 Land a. b. ...						
2.1.2 Water Quality/Hydrology a. b. ...						
2.1.3 Air Quality a. b. ...						
<b>2.2 Biological Environment</b>						
2.2.1 Forest and plant life a. b. ...						
2.2.2 Wildlife						

<sup>6</sup> This must be reflected in the summary of consultations that will be attached to the plan.

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
a. b. ...						
2.2.3 Fisheries, Aquatic life a. b. ...						
<b>2.3 Social Environment</b>						
2.3.1 Participation of women in paid labor and implementation management a. b. ...						
2.3.2 impacts on indigenous peoples (IP), including participation in paid labor and implementation/management of the sub-project, participatory monitoring  Note: include information on the number of affected IP households and persons for each type of impact and for each ethnic group a. b. ...						
2.3.3 Safety in construction a. b. ...						
2.3.4 Resettlement Impacts during construction, including access restriction, temporary impacts on livelihood Note: provide the following information:						

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
<ul style="list-style-type: none"> <li>- Number of affected households and affected persons</li> <li>- Ethnicity of the affected households</li> <li>- Any other factors that make the affected household vulnerable<sup>7</sup></li> </ul> a. b. ...						
<b>2.4 Other impacts</b>						
a. b. ...						
<b>Phase 3: Operation and Maintenance Phase</b>						
<b>3.1 Physical Environment</b>						
3.1.1 Land a. b. ...						
3.1.2 Water Quality/Hydrology a. b. ...						
3.1.3 Air Quality a. b. ...						
<b>3.2 Biological Environment</b>						
3.2.1 Forest and plant life a. b.						

<sup>7</sup> For example, socioeconomic status (the house is poor), headed by a woman or the elderly without additional means of support, etc.

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
...						
3.2.2 Wildlife a. b. ...						
3.2.3 Fisheries, Aquatic life a. b. ...						
<b>3.3 Social Environment</b>						
3.3.1 Participation of women in management of O&M a. b. ...						
3.3.2 IP participation in O&M a. b. ... Notes:  1. Information to be disaggregated by ethnic group 2. Consider and state the factors that may affect the households' ability to participate in O&M						
3.3.3. Participation of Households affected by involuntary resettlement in O&M a. b. ... Note: consider and state the factors that may affect the households' ability to participate in O&M						
3.3.4 Access and/or use restriction a. b.						

Potential Impacts	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds	Remarks
... Note: Information to be disaggregated by ethnic group						
3.3.5 Induced activities with negative cumulative effects a. b. ...						
Note: Information to be disaggregated by ethnic group						
<b>3.4 Other impacts</b>						
a. b. ...						
Note: Information to be disaggregated by ethnic group						
<b>Phase 4: Abandonment Phase</b>						

Prepared by:

\_\_\_\_\_

**PPT**

Date: \_\_\_\_\_

The LGU OF BRGY. \_\_\_\_\_ is confirming its willingness and commitment to implement and allocate funds for the abovementioned ESMP.

\_\_\_\_\_

**Barangay Chairperson**

Date: \_\_\_\_\_

Approved and noted by:

\_\_\_\_\_  
**Municipal Mayor**  
Date: \_\_\_\_\_

<p>Reviewed and Endorsed to the SRPMO by:</p> <p>_____ <b>Area Coordinator</b> Date: _____</p>	<p>Reviewed and Endorsed to the RPMO by:</p> <p>_____ <b>SRPMO Head</b> Date: _____</p>
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### Resettlement Plan<sup>1</sup>/Indigenous Peoples Plan<sup>2</sup> Template

**Note:** For the RP and IPP, summary of consultations must be attached with the following information for each consultation: (i) date of consultation; (ii) venues of consultation; (iii) who are the participants (for example: residents of the barangay, women, indigenous peoples, etc.), number of participants (number of women, number of men, number of members of ethnic minority/indigenous peoples); (iv) topics discussed; (v) issues and questions raised by participants; (v) conclusion on issues and questions raised

Region	Province	Municipality	Barangay	Fund Source	Cycle	Modality	Sub-project Title	Sub-project description	Potential Impacts <sup>3</sup>	Mitigation/ Enhancement Measures	Monitoring Parameter	Responsible Entity	Implementation Schedule	Cost and Source of Funds

<sup>1</sup> Resettlement Plan to be prepared per municipality and forwarded to ADB for approval where there are sub-projects that involve involuntary resettlement impacts.

<sup>2</sup> Indigenous Peoples Plan to be prepared per municipality and forwarded to ADB for approval where there are sub-projects that have adverse (negative) impacts on indigenous peoples

<sup>3</sup> Include details specified in the ESMP template

**SUB-PROJECT AGREEMENT**  
FOR THE IMPLEMENTATION OF (NAME OF SUB-PROJECT)

**BARANGAY:** \_\_\_\_\_  
**MUNICIPALITY:** \_\_\_\_\_  
**PROVINCE:** \_\_\_\_\_  
**REGION:** \_\_\_\_\_

This Sub-Project Agreement made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

The **Department of Social Welfare and Development - Field Office** \_\_\_\_\_, a government agency existing under the laws of the Republic of the Philippines, with main office at \_\_\_\_\_, and represented by its Regional Director, (name of Regional Director), herein referred to as the “**DSWD**”;

The **Municipality of** \_\_\_\_\_, a Local Government Unit existing under the laws of the Republic of the Philippines, with principal address at the Municipal Hall, \_\_\_\_\_, province of \_\_\_\_\_, and represented by its Municipal Mayor, \_\_\_\_\_, and hereinafter referred to as the “**Municipality**”.

-and-

The **Barangay of** \_\_\_\_\_, a local government unit existing under the laws of the Republic of the Philippines, with principal address at the Barangay Hall, \_\_\_\_\_, Municipality of \_\_\_\_\_, and represented by its Barangay Chairperson \_\_\_\_\_, and Barangay Sub-Project Management Committee Chairperson \_\_\_\_\_, and hereinafter referred to as the “**Barangay**”.

**WITNESSETH:**

**WHEREAS**, the World Bank and Asian Development Bank under Loan Agreement Nos. 8335PH dated April 2, 2014 and 3100PHI dated March 26, 2014, respectively, extended to the Republic of the Philippines a loan to finance the KALAHI CIDSS-NCDDP, herein also referred to as the “Program”;

**WHEREAS**, DSWD envisions a society where the poor, vulnerable and disadvantaged individuals, families, and communities are empowered for an improved quality of life;

**WHEREAS**, the KC-NCDDP aims to empower local communities through improved participation in local governance and involvement in the identification, preparation and implementation of poverty reduction interventions;

**WHEREAS**, the Program is jointly funded by a loan from the World Bank and Asian Development Bank, and the Government of the Republic of the Philippines to finance the community development subprojects identified during the Municipal Inter-Barangay Forum for Participatory Resource Allocation (MIBF-PRA);

**WHEREAS**, the Municipality of \_\_\_\_\_ and all its barangays was selected as one of the covered areas of the Program;

**WHEREAS**, Barangay \_\_\_\_\_ participated in the KC-NCDDP processes and accordingly submitted a proposal for \_\_\_\_\_;

**WHEREAS**, the MIBF, after due consideration, evaluation and appraisal based on the socio-economic merits and financial and technical feasibility of the sub-project, duly approved the proposed sub-project of the Barangay. Hence, this Tripartite Memorandum of Agreement between the DSWD, the Municipality and the Barangay;

**NOW, THEREFORE**, for and in consideration of the foregoing, the parties hereby agree as follows:

**Article I - Definition of Terms**

- 1.1. **KALAHI CIDSS-NCDDP**, also known as the Program refers to “Kapit Bisig Laban sa Kahirapan Comprehensive and Integrated Delivery of Social Services – National Community Driven Development Program”, is the government’s flagship poverty reduction program being implemented by the Department of Social Welfare and Development.
- 1.2. **Sub-Project** refers to the sub-project of the barangay approved for implementation.
- 1.3. **WB** refers to the World Bank, one of the funding donors of the KC-NCDDP.
- 1.4. **ADB** refers to the Asian Development Bank, one of the funding donors of the KC-NCDDP.
- 1.5. **NPMO** means National Program Management Office of the Program based at the Central Office of the DSWD, which assumes full responsibility for the overall management of the Program.
- 1.6. **RPMO** refers to the Regional Program Management Office based in the Regional Office of the DSWD, which takes responsibility for Program implementation in the Region.
- 1.7. **SRPMO** refers to the Sub-regional Program Management Office based in the provinces covered by KC-NCDDP, which is responsible for the day-to-day operations of the Program.
- 1.8. **MIBF** refers to Municipal Inter-Barangay Forum, which is convened by the Municipal Mayor and composed of three members from each of the barangays. The MIBF develops local criteria, sanctions and ground rules for sub-project selection, implementation and monitoring.
- 1.9. **MIAC** refers to the Municipal Inter-Agency Committee. It is chaired by the Mayor and is composed of the Municipal Planning and Development Coordinator, Municipal Social Welfare and Development Officer, Municipal Local Government Operations Officer, Municipal Health Officer, Municipal Agriculture Officer, Municipal Budget Officer, Municipal Disaster Risk Reduction and Management Officer, It shall monitor ongoing barangay sub-projects.
- 1.10. **Barangay Sub-Project Management Committee** refers to the Committee formed under the Barangay Development Council to provide overall management of the sub-project.
- 1.11. **Grant** refers to the funds taken from the Loan Proceeds and the GOP released to the Barangay for implementation of the approved sub-project.
- 1.12. **Local Counterpart Contribution** refers to the contribution of the local government units and the communities for the implementation of the approved sub-project. It can be in the form of cash or in kind.
- 1.13. **Tripartite Sub-Project Agreement** refers to this agreement.

**Article II - Sub-Project Description and Cost Estimates**

- 2.1. The sub-project covered by this Agreement is entitled \_\_\_\_\_ and has a total cost indicated in the table below:

PARTICULARS	APPROVED SCHEDULE OF PROJECT COST			
	TOTAL	GRANT	LOCAL COUNTERPART CONTRIBUTION	
			Cash	In-Kind
1. Pre-engineering cost				
2. Materials				
3. Labor				
4. Equipment				
5. Administrative cost				
6. Other cost				
7. Contingency				
<b>TOTAL</b>				

- 2.2. Sub-Project implementation is targeted to start on \_\_\_\_\_ and completed on \_\_\_\_\_. Implementation details are described in the Detailed Design, Program of Work or Program Implementation Plan and Implementation Schedule, and Procurement Plan herein attached as Annex "1" and made an integral part of this Agreement.

### ***Article III - Execution of the Sub-Project***

- 3.1. Roles and Responsibilities of the Parties:

#### **DSWD**

- a. Authorize the transfer of Grant funds from the Land Bank of the Philippines to the Barangay's account in the local LBP Branch;
- b. Inspect, by itself or jointly with representatives of organizations involved in the Program, goods and the sites, works, plans and construction included in the Barangay Sub-Project, the operation thereof and any relevant records and documents;
- c. Review the Status of Sub-Project Fund Utilization Reports, Cash Book, Local Counterpart Contribution Journal, Bank Reconciliation Statements and other financial documents, books and reports of the Sub-Project to determine if all expenditure items are within the approved Sub-Project budget and are properly documented;
- d. Ensure that funds within the approved Sub-Project budget are made available when requested by the Barangay upon submission of valid, correct, and complete documentary requirements enumerated under Section 4.3 of this Agreement;
- e. Provide a Municipal Financial Analyst to render technical assistance to the Barangay Sub-Project Management Committee (BSPMC) Finance Team in carrying out their financial responsibilities including, but not limited to, processing of payments, bookkeeping, preparation of reports, and auditing;
- f. Monitor sub-project implementation and fund utilization;
- g. Provide technical assistance to the barangay in sub-project implementation;
- h. Provide capacity building program for the Municipality and the Barangay through formal training, on-the-job training or job coaching; and
- i. Suspend, terminate or withdraw the right of the Barangay to the use of the Grant proceeds upon failure by such Barangay to perform its obligations under this Sub-Project Agreement.

#### **Municipality**

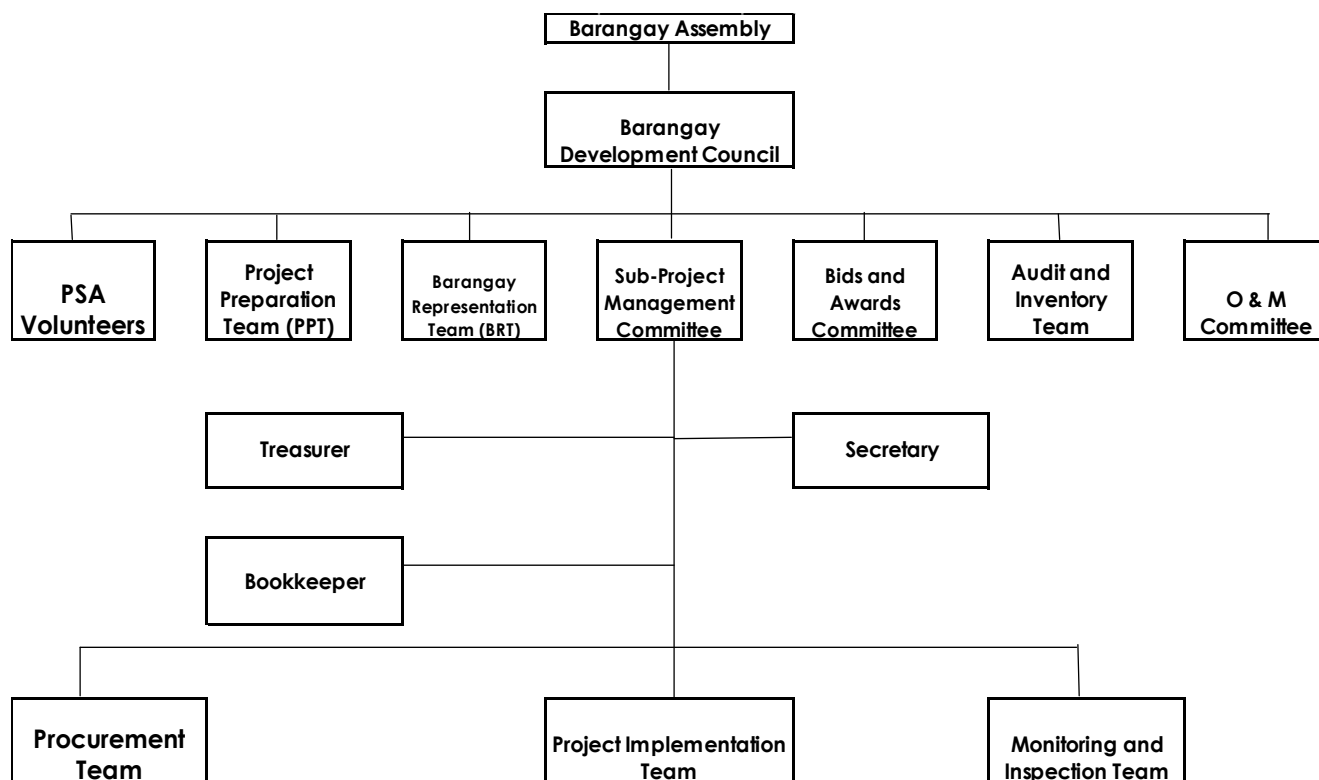
- a. Provide counterpart contribution in support of the Barangay Sub-Project, which may be in the form of cash from its Development Fund, or provision of office space, equipment, materials, and/or personnel. Total LCC amounts to P\_\_\_\_\_, of which cash counterpart amounts to P\_\_\_\_\_;
- b. Provide technical assistance to the barangay in the implementation of the Sub-Project;
- c. Act as convener of the Municipal Inter-Barangay Forum, through the Mayor or his/her duly authorized representative;
- d. Authorize the Local Poverty Reduction Action Officer or in the absence of an LPRAO, the Municipal Social Welfare and Development Officer to assist the DSWD Area Coordinator in the implementation of KC-NCDDP in the municipality;
- e. Convene, through the Mayor, the Municipal Inter-Agency Committee, and conduct regular meetings;
- f. Endorse through the MIAC, requests for fund releases of barangays to DSWD-RPMO;
- g. Receive capacity building interventions from the DSWD;

- h. Monitor and evaluate overall implementation of the Sub-Project;
- i. Incorporate the sub-project in the Municipal Development Plan (MDP) and allocate funds for Operation and Maintenance (O&M) of the completed subproject; and
- j. Facilitate the approval of municipal level permits and clearances related to implementation of the Barangay Sub-Project.

### **Barangay**

- a. Provide an office space in the barangay hall for the BSPMC. The office shall also serve as repository of all Sub-Project properties and resources;
- b. Maintain a project implementation team through the Barangay Sub-Project Management Committee (BSPMC) with defined responsibilities and members in adequate number to manage the implementation of the Barangay Sub-Project;
- c. Organize committees and/or sub-committees or teams as maybe necessary for the successful implementation of the Sub-Project;
- d. Provide counterpart contribution to the Sub-Project, Cash counterpart contribution P\_\_\_\_\_, In-kind counterpart contribution: Materials P\_\_\_\_\_ Labor P\_\_\_\_\_ Equipment P \_\_\_\_\_ and Others P\_\_\_\_\_.
- e. Prepare and implement operation and maintenance or sustainability plan to ensure that benefits from the sub-project would continue after its completion;
- f. Attend and participate in all Municipal Inter-Barangay Forums and mobilize the communities to attend Barangay assemblies;
- g. Ensure completion of Sub-Project implementation within the timeframe set.
- h. Incorporate the sub-project in the Barangay Development Plan (BDP) and allocate funds for O&M of the completed subproject;
- i. Formulate internal rules or policies to guide the implementation of the Sub-Project that must be consistent with the KC-NCDDP Policies. This includes the system for re-flows of income generated from a livelihood sub-project;
- j. Receive capacity building interventions from DSWD;
- k. Provide assistance to the ACT members and other KC-NCDDP workers when their personal safety and security is at risk in the locality; and
- l. Establish and maintain a Sub-Project management and implementation committee within the barangay upon agreement of the barangay assembly with the following minimum structure/ composition (please refer to **Annex 2** for composition and functions).

## BARANGAY SUB-PROJECT MANAGEMENT COMMITTEE (BSPMC)



### **Barangay (through the Subproject Management Committee)**

- a. Carry out the Barangay Sub-Project with due diligence and efficiency in accordance with sound technical, financial, managerial, social and environmental standards and practices, and maintain adequate records;
- b. Procure the goods and works to be financed out of the Grant proceeds in accordance with the Community Procurement guidelines of the Program;
- c. Prepare and implement an environmental management plan and social safeguards plan on resettlement, and indigenous people's participation in the Program, if applicable;
- d. Open to the Program for inspection and audit all goods, sites, works, plans and construction, operations and relevant records and documents of the sub-project;
- e. Provide to the Program all such information as may be reasonably requested relating to the implementation of the sub-project, the administration, operations and financial conditions of the Barangay Sub-Project Management Committee;
- f. Establish and maintain a financial management system, including records and accounts, and prepare financial reports as required by the Program;
- g. Have the records, accounts and financial reports of the sub-project audited by auditors acceptable to the Program following auditing standards, and furnish the Program copies of the audited financial statements together with an opinion on such statements, records and accounts and report of such audit;
- h. Record separately all financial transactions relating to receipts and utilization of income generated from the Sub-Projects;
- i. Keep custody and preserve all records and supporting documents of transactions and make them available for Audit by the Municipality, Commission on Audit, World Bank and ADB Missions, NGO's and media;

- j. Be transparent in all decisions related to the Sub-Project by regularly reporting the physical progress and fund utilization to the Barangay Assembly, posting Sub-Project updates, reports, notices of bidding, approved contracts, etc. in community billboards and bulletin boards in conspicuous places within the barangay;
- k. Safeguard all properties and resources of the Sub-Project. In line with this, the Barangay through the BSPMC shall keep custody and preserve all materials and equipment of the Sub-Project in a secure shed or structure under the care of a materials and equipment custodian from the community; and
- l. Submit physical progress and financial reports to the Municipality and the DSWD-RPMO.

**Article IV - Program and Financial Management**

- 4.1. The sub-project fund, whether from the Grant or equity contribution of the municipality, barangay or the community members shall be administered in accordance with the financial management system under KC-NCDDP;
- 4.2. The Barangay Council through a Resolution shall authorize the Barangay Treasurer, the Chairperson of the Barangay Sub-Project Management Committee and the DSWD Area Coordinator to open a KC-NCDDP account with the nearest LBP branch bank in the locality with the three of them as signatories;
- 4.3. The DSWD shall release the Grant component to the Barangay's Bank Account in three tranches under the following schedule and requirements:

**A. FIRST TRANCHE**

- 1. Request for Fund Release Form (prepared by the Municipal Financial Analyst and duly approved by authorized signatories)
- 2. Barangay Council and Barangay Assembly Resolutions
- 3. Notarized Sub-Project Agreement
- 4. Bond Premium of Treasurer
- 5. Subproject Proposal and Filled-up Subproject Concept Form
- 6. Notarized Deed of Donation, Conditional Deed of Donation or Extrajudicial Settlement of Estate with Quit Claim for titled lot or Quit Claim for non-titled lots
- 7. MIBF/MF Resolution
- 8. Program of Works with detailed estimates (with signature of Municipal Mayor and Barangay Chairperson to confirm LCC commitments).
- 9. Community Procurement Plan and Schedule of In-kind LCC
- 10. Local Counterpart Contribution for Sub-Project Implementation Monitoring Report (prepared by Municipal Financial Analyst)
- 11. Bank Snap Shot indicating the community bank account number or Bank Statement
- 12. Geo-tagged photographs of the proposed site (at least three). For water system, source, reservoir and pipeline right-of-way; roads, photo covering starting stations projected towards the mid-section or the whole road right-of-way, if possible and photo projected from the end station towards mid-sections
- 13. Environmental and Social Safeguards Checklist, and applicable safeguards instruments (i.e., Environmental and Social Management Plan (ESMP), Certificate of Non-Coverage (CNC), Environmental Compliance Certificate (ECC), as applicable)

Additional Requirements per Project Type

For Access Infrastructure projects (Roads, Bridges and Drainage System):

- 1. Guides for Technical Review of Proposed Infrastructure Sub-Project
- 2. Implementation Work Schedule (Gantt Chart)
- 3. Bill of Quantities / Quantity Take-Offs
- 4. Indirect Cost breakdown
- 5. Municipal Engineer Certification on the approved productivity outputs, and prevailing unit rates for materials and labor
- 6. Certification on the Materials Quality/Availability of aggregates, from one of the following:
  - a. DPWH, for existing approved quarry sites, or;

- b. Municipal Engineer, for new or not recognized quarry sites, but which the LGU deems suitable for use in rural infrastructure
- 7. Technical Plans and Detailed Drawings
  - a. For Road Construction/Road Opening
    - Specifications
    - Profile indicating slope percentage and proposed and existing structures (if any)
    - Traverse indicating proposed and existing structures (station defined)
    - Cross section (cut and fill) at 20 meter interval
    - Schedule of cross / side ditches and canal
    - Road sections where slope protection and cross drainage maybe required
    - Typical and Structural Details
    - Structural / Standard Design for Box Culvert and Bridges
  - b. For Road Improvement
    - Straight line diagram that clearly indicates stationing of works/structures to be done
    - Materials and works specifications
    - Cross sections and profile of the proposed and existing grade/structures (for the sections affected if any)
    - Schedule of cross / side ditches and canal (if any)
    - Road sections where slope protection and cross drainage maybe required
    - Typical and Structural Details
    - Structural / Standard Design for Box Culvert and Bridges (if any)

For Water System Sub-Project:

1. Hydraulic Study/Analysis
2. Certification from the Municipal Health Office (MHO) on the bacteriological examination of the proposed water source, including appropriate recommendations.

For Enterprise and Human Resource Development Sub-Project:

1. Proposal containing the study on feasibility and cost-benefit

For Waste Disposal Sub-Project:

1. Proposal and Feasibility Study
2. Training design for the conduct of solid waste management
3. Applicable Environmental Requirements

For Sub-Project that will Charge Users' Fee

1. Proposal containing the study on the feasibility, cost-benefit, and derivation of the agreed users' fee computation.

**B. SECOND TRANCHE**

1. Request for Fund Release Form (prepared by the Municipal Financial Analyst and duly approved by authorized signatories)
2. Narrative Report (if there is a big variance (more than 15%) in physical and financial accomplishment)
3. Minutes of Barangay Assembly Meeting
4. Geo-tagged photographs of Sub-Project progress
5. Certified true copy of the annotated title with the Registry of Deeds (ROD), for privately-owned and titled lots with a notarized Deed of Donation
6. Status of Sub-project Fund Utilization
7. List of Checks Issued (Form No. 64)
8. Local Counterpart Contribution for Sub-project Implementation Monitoring Report (prepared by Municipal Financial Analyst)
9. Physical Progress Report
10. Materials Quality Test Results
10. Bank Statement/Snapshot
11. Operation and Maintenance Plan with notarized Mutual Partnership Agreement



### C. THIRD TRANCHE

1. Request for Fund Release Form (prepared by the Municipal Financial Analyst and duly approved by authorized signatories)
2. Status of Sub-project Fund Utilization
3. List of Checks Issued
4. Geo-tagged photographs of subproject progress
5. Local Counterpart Contribution for Sub-project Implementation Monitoring Report
6. Physical Progress Report
7. Materials Quality Test Results
8. Bank Statement/Snapshot
9. Certification indicating the total cost of remaining materials to be procured and total cost of labor and other related expenditures to be incurred to complete the Sub-project
10. Certification of any pending financial obligations e.g. unpaid delivered materials, services rendered but not yet paid (wages/ payroll) and other incurred but unpaid related expenditures
11. Barangay Assembly resolutions confirming the certifications
12. Joint Inspection Report

#### If Contingency Cost is requested:

1. Justification, which may include Certification of Price Escalation and/or Underestimated Program of Work (POW)
2. Certificate of Extra Work or variations
3. Cost Comparison Analysis (CPP vs Actual)
4. Variance Analysis

The division of tranches depends on the procurement packaging of the sub-project, and in some cases the First Tranche may be as much as 80%. In case of Disaster Response implementation, 90% First Tranche is allowed. The larger the first tranche, the more physical progress must be made before the Second Tranche is released.

1st Tranche of:	Required Physical Progress Before Release of 2nd Tranche
50%	30% of project in place
51%-60%	40% of project in place
61%-70%	50% of project in place
71%-80%	60% of project in place

In all cases, the required physical progress for the release of the 3rd and final tranche shall be 90%.

Once the physical progress requirement is reached, and the grant fund balance is 10% or less of the most recent tranche, the Treasurer prepares and submits the next RFR.

- 4.4. The Municipality or Barangay, through the Municipal or Barangay Treasurer, shall submit to MIBF, through the Area Coordinator, a Certificate of Deposit or photo copy of the validated passbook entry of deposit to cover cash contribution from their Development Fund, or Certificate of Availability of Labor, Equipment or Materials, or other contributions in kind, in accordance with their commitment during the selection of sub-projects. Copies of these certifications shall be attached as integral part of this Agreement;
- 4.5. The Barangay shall deposit any cash contribution from the Municipality or Barangay Councils or Community members to the same KC-NCDDP Community Bank Account. The BSPMC shall issue acknowledgement receipt for such contribution;
- 4.6. If the Sub-Project generates income, the Barangay shall open a separate bank account for the sub-project's income and shall not mix it with the Grant received;
- 4.7. Fund replenishment, liquidation and audit shall be in accordance with the existing guidelines as embodied in the KC-NCDDP Community-based Finance Manual;
- 4.8. The Grant component of Sub-Project budget duly approved by the MIBF is not subject to change. If there are savings realized in implementing the sub-project, the Barangay shall draw a plan on the utilization of the savings to be approved by

the Barangay Assembly in a meeting held for that purpose. Savings can be used for expansion of the same sub-project or other community development projects not included in the negative list of the KC-NCDDP. The Plan approved by the Barangay Assembly shall be submitted to the MIBF for review and concurrence to ensure that it is within the Guidelines of KC-NCDDP; and

- 4.9. Cost overruns shall be covered through augmentation of local counterpart contributions.

**Article V - Other Terms and Conditions**

- 5.1. The Barangay agrees to commence the sub-project within ten (10) days upon approval of this Sub-Project Agreement and receipt of funds and to complete the sub-project as indicated in the Sub-Project Work Schedule, herein attached as integral part of the sub-project documents;

In the event that the schedule stipulated in this Agreement is delayed, the Barangay shall submit a written explanation and a catch-up plan included in the Physical Progress Report to DSWD-S/RPMO and the MIAC. The DSWD-S/RPMO and the MIAC shall assess the validity of the grounds for the delay. Catch-up Plan shall be closely monitored by the DSWD and the MIAC;

- 5.2. In the event that the Barangay could not undertake certain activity/ies due to lack of materials and/or pertinent equipment support, and other reasons, the DSWD-RPMO and ACT shall provide technical assistance through its designated Regional Procurement Officer;

- 5.3. Final project cost and corresponding adjustment shall be effected after cost reconciliation between the amounts indicated in the Sub-Project Concept Form and the Sub-Project Completion Report;

- 5.4. Any complaint lodged against the Barangay for violation or non-compliance with the principles of the Program or provisions of this Agreement shall be brought to the attention of the MIBF, which shall review and investigate the complaint and the response or explanation of the Barangay. The MIBF shall then submit its recommendation to the DSWD-RPMO, who acting through the Regional Program Director, based on substantial evidence, shall issue an order imposing the sanction or dismissing the complaint.

- 5.5. By mutual consent, this Agreement or any part thereof may be revised, amended or supplemented for effective implementation and management;

- 5.6. The right of the Barangay to the use of the proceeds of the Grant shall be suspended or terminated upon failure to perform its obligations under this Sub-Project Agreement;

- 5.7. In the event that the amount released (1<sup>st</sup> tranche) has not been fully utilized and the required 30% physical accomplishment is not likely to be achieved after the lapse of three months, and the cause of delay is other than fortuitous event, the Program, through the DSWD-RPMO will initiate the recall of the remaining unutilized balance based on the guidelines issued for the purpose;

- 5.8. In the event that the subproject is not completed on or before the closing date of the KC-NCDDP, the MLGU and BLGU shall complete the subproject and ensure its functionality using their own funds; and

- 5.9. Any dispute arising from this Agreement and not settled between the Parties shall be elevated to the NPMO, for resolution.

**IN WITNESS THEREOF**, the Parties have signed this Agreement this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_.

\_\_\_\_\_  
Regional Director

\_\_\_\_\_  
Municipal Mayor

**BARANGAY OF** \_\_\_\_\_

\_\_\_\_\_  
Barangay Chairperson

\_\_\_\_\_  
Barangay Sub-Project Management Committee Chairperson

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

**ACKNOWLEDGMENT**

REPUBLIC OF THE PHILIPPINES) S.S.  
\_\_\_\_\_

BEFORE ME, on this \_\_\_ day of \_\_\_\_\_ 201\_\_ personally appeared the following persons exhibiting to me their respective Community Tax Certificates, to wit:

Name	Community Tax Certificate No.	Date Issued	Date/Place Issued
1.			
2.			
3.			
4.			
5.			
6.			

Known to me to be the same persons who executed the foregoing instrument consisting of \_\_\_ pages, including this page, signed by the parties and their instrumental witnesses, which instrument they acknowledge to be their free and voluntary act and deed, as well as that of the juridical persons which they represent.

WITNESS MY HAND AND SEAL on the place and date above written.

**NOTARY PUBLIC**

Doc. No.  
Page No.  
Book No.  
Series of 201\_\_.

**ANNEX 1**

Detailed Design, Program of Work or Program Implementation Plan and Implementation Schedule, and Procurement Plan

## **ANNEX 2**

### **Barangay Subproject Management Committee Composition and Functions**

#### **Sub-project Management Executive Committee (Execom)**

*Composition.* BSPMC Chairperson, Punong Barangay (if he is not elected as the BSPMC Chair; if the Punong Barangay is the BSPMC Chair, then the BDC shall elect one representative from among the NGO/PO representatives in the BDC), One Kagawad chosen by the Barangay Council, Treasurer, Heads of the different Teams and Chairperson of the Project Preparation Team (since the work of the Team ends after the approval of the sub-project).

*Functions.*

- Approves Weekly Schedule of Disbursements.
- Elects one (1) member for Bids and Awards Committee.
- Convenes to discuss and approve reports, clarifies issues and prepare narrative/explanatory report, catch up plan and revised Schedule of Fund Release if necessary.
- Holds Barangay Assembly to present status of physical and financial accomplishments and addresses issues and questions raised.
- As a transparency measure, the Execom should see to it that up to date simple financial data on the community information board be posted in the barangay hall.

#### **Participatory Situation Analysis (PSA) Volunteers**

*Composition.* In a typical NCDDP barangay, about two to three persons from each purok are chosen to serve as a PSA volunteer. Volunteers are either elected or chosen during the 1<sup>st</sup> barangay assembly.

*Functions.* Lead in the conduct of participatory situational analysis, from data gathering to community validation.

#### **Project Preparation Team (PPT)**

*Composition.* Composed of community residents, there are no limits to the number of people who can be chosen to serve in this team. They can be as few as three people or as many as required by more complex sub-projects.

*Functions.* Assist in the preparation of community proposals which will be recommended by the barangays for prioritization during the MIBF.

#### **Barangay Representation Team (BRT)**

*Composition.* Composed of volunteers who are chosen or elected by the Barangay Assembly during the 1st BA meeting, or can be elected during the 2nd BA, prior to the CSW.

*Functions.* Represent the barangay in the Municipal Inter-Barangay Forums.

#### **Barangay Sub-Project Management Committee (BSPMC)**

*Composition.* It is composed of community residents representing various teams to implement the sub-project. However, these three teams are mandatory: **Procurement Team, Sub-Project Implementation Team and Monitoring and Inspection Team.** The BSPMC is formed on or before the 2nd Barangay Assembly of the CEAC as a committee under the Barangay Development Council (BDC). (Note: The Local Government Code allows the BDC to form sectoral or functional committees to assist it in mobilizing people's participation in local development efforts, preparing barangay development plans and monitoring and evaluating implementation of national or local programs.)

*Functions.* Directly responsible for the overall management of the sub-project.

### **Audit and Inventory Committee (AIC)**

*Composition.* The team is composed of at least three members selected by the community.

*Functions.*

- Acts as the community's watchdog since they are independent from other implementation units.
- Its Head sits as non-voting member of the Bids and Awards Committee (BAC).
- Checks compliance of the BSPMC with the provisions of the KC-NCDDP Community Finance Manual/Guidelines. As such the team shall:
  - ✓ Review Disbursement Vouchers and its supporting documents to ascertain validity, accuracy and completeness of the procurement and financial transactions.
  - ✓ Conduct surprise cash counts.
  - ✓ Conduct regular inventory of all properties acquired under the sub-project.
  - ✓ Pre-audit petty cash replenishments.
  - ✓ Visit the sub-project to validate physical and financial status.
  - ✓ Review and certify records and reports of the Bookkeeper.
- Provides feedback report to Barangay Development Council (BDC).

### **Project Implementation Team (PIT)**

*Composition.* The team is composed of at least three members selected by the community.

*Functions.*

- Co-prepares and endorses Weekly Schedule of Disbursements to the Execom.
- Prepares the following documents for the approval of the BSPMC Chairperson:
  - ✓ Daily Construction Logbook
  - ✓ Physical Accomplishment Reports
  - ✓ Statement of Works Accomplished
- Reviews and signs time sheets and community employment record sheets as recommending authority for labor payments.
- Its team head approves requests for petty cash fund.

### **Bids and Awards Committee (BAC)**

*Composition.* Composed of the Treasurer, Head of the Project Preparation Team and one (1) member (except barangay officials) to be elected by Execom.

*Functions.*

- In charged of ensuring that the BSPMC abides by the standards set forth in the Community Procurement Manual.
- Specifically, they are tasked to:
  - ✓ Advertise/Post invitation to bid
  - ✓ Conduct pre-procurement and pre-bid conferences
  - ✓ Determine eligibility of prospective bidders
  - ✓ Receive bids
  - ✓ Conduct the evaluation of bids with assistance of the TWG
  - ✓ Undertake the post-qualification proceedings
  - ✓ Recommend the award of contract to BSPMC Chairperson. When BSPMC Chairperson disapproves the recommendation, such disapproval shall be based on valid, reasonable and justifiable grounds to be expressed in writing, copy furnished the BAC.

### **Monitoring and Inspection Team (MIT)**

*Composition.* The team is composed of at least three members selected by the community.

*Functions.*

- In charged of monitoring the progress of sub-project implementation.
- Validates the physical accomplishments based on reports prepared by the Implementation Team and the approved detailed work and financial plan and make appropriate recommendations to BSPMC Chairperson. (Note: May refer to the Community Infrastructure sub-manual for infrastructure related sub-projects).

- Ensures that delivery of material, supplies and services and its utilization are properly accounted and monitored. As such the team shall:
  - ✓ Spot check actual deliveries and utilization of construction materials; and
  - ✓ Check entries made in the construction materials record, tools and equipment record, construction daily logbook and other records of the sub-project.

### **Procurement Team (PT)**

*Composition.* The team is composed of at least three members selected by the community.

*Functions.*

- In charged of procurement for the sub-project. As such, the team shall:
  - ✓ Prepare procurement documents
  - ✓ Act as Canvassers
  - ✓ Prepare and finalize Planned Community Procurement Packaging (PCPP) and Community Employment Record Sheet (CERS) with the assistance of Technical Facilitator
  - ✓ Assist in the presentation of PCPP and CERS during Barangay Assembly
  - ✓ Receive and record bids/quotations
  - ✓ Assist in updating the status of PCPP and CERS
- Prepares the community procurement plan based on the community procurement sub-manual.
- Act as Secretariat to the Bids and Awards Committee.

### **Treasurer**

- The Barangay Treasurer is automatically designated as the BSPMC Treasurer.
- Acts as one of the co-signatories of the community's bank account. She/He ensures that funds are utilized as intended.
- Custodian over the funds and properties of the sub-project.
- Acts as the disbursing officer of the sub-project.
- Prepares the following documents:
  - ✓ Breakdown of estimated sub-project cost in the Program of Work, if there's no contracted Service Provider.
  - ✓ Proposed Schedule of Fund Releases/Tranches
  - ✓ Local Counterpart Contribution Plan
  - ✓ Vouchers for receipts of LCC for SPI
- In charged in the preparation of Requests for Fund Release (RFR) and gathering of its supporting documents.
- Posts list of donors and amount of donations in the Barangay Hall or public place.
- Submits original Disbursement Vouchers (DV) and its supporting documents to the RPMT thru the AC.
- Reports financial status during barangay assemblies.
- Maintains a complete set of photocopies of all RFRs, DVs and other financial documents.
- Regularly updates the checkbook (i.e. cash in, cash out, cumulative balance).

### **Community Bookkeeper**

- Records TAF receipts and utilization in the TAF Journal.
- Records all receipts and utilization of funds in the Cash Journal.
- Records all LCC deliveries in the LCC Journal.
- Prepares Status of Sub-project Fund Utilization on a monthly basis or when requesting for fund release.
- Prepares monthly Bank Reconciliation Statement.
- Ensures that books are updated.

## INVENTORY OF EXISTING INFRASTRUCTURES<sup>1</sup>

Municipality: \_\_\_\_\_

Classification: \_\_\_\_\_

No. of Barangays: \_\_\_\_\_

Province: \_\_\_\_\_

Region: \_\_\_\_\_

**A. Rural Access:**

- i. Municipal Roads: Paved = \_\_\_\_\_ kms. Gravel = \_\_\_\_\_ kms.
- ii. Barangay Roads: Paved = \_\_\_\_\_ kms. Gravel = \_\_\_\_\_ kms.
- iii. Bridges: Concrete = \_\_\_\_\_ ln.m Bailey = \_\_\_\_\_ ln.m Suspension = \_\_\_\_\_ ln.m
- iv. Other Structures: \_\_\_\_\_

**B. Social Infrastructures:**

- i. Rural Health Unit: \_\_\_\_\_ barangays
- ii. Barangay Health Station: \_\_\_\_\_ barangays
- iii. Day Care Center: \_\_\_\_\_ barangays
- iv. School Buildings: Elementary = \_\_\_\_\_ barangays No. of Classrooms = \_\_\_\_\_  
High School = \_\_\_\_\_ barangays No. of Classrooms = \_\_\_\_\_
- v. Potable Water Supply: Level I = \_\_\_\_\_ barangays  
Level II = \_\_\_\_\_ barangays  
Level III = \_\_\_\_\_ barangays
- vi. Others: (Barangay Hall) \_\_\_\_\_ barangays

**C. Agricultural & Trade Facilities:**

- i. Post-harvest facilities  
(Warehouse/Storage): \_\_\_\_\_ barangays
- ii. Training Center: \_\_\_\_\_ barangays
- iii. Markets/ Trading Center: \_\_\_\_\_ barangays
- iv. Raw Materials: \_\_\_\_\_

**Prepared by:**

**Validated by:**

\_\_\_\_\_  
MLGU-TF

\_\_\_\_\_  
ACT-TF

<sup>1</sup> All barangays must have the same inventory



## INVENTORY OF AVAILABLE TECHNICAL RESOURCES

Name of Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

Province: \_\_\_\_\_

Region: \_\_\_\_\_

Municipal Class: \_\_\_\_\_

**A. Heavy Equipment**

Type	Current Condition	Current Capability per Hour	Fuel & POL Product Consumption	Prevailing Rental Rates

**B. Technical and Skilled Staffs**

Name	Type of Skill	No. of Years of Work Experience	Employment Status

**C. Labor Force (Barangay)**

Name	Position	Employment Status

Prepared by:

Concurred:

\_\_\_\_\_  
MLGU-TF

\_\_\_\_\_  
Municipal Engineer

CBIM Form A-3

**INVENTORY OF AVAILABLE SERVICE PROVIDERS<sup>1</sup>**

Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

Region: \_\_\_\_\_

Province: \_\_\_\_\_

Municipal Class: \_\_\_\_\_

**A. ENGINEERS/ARCHITECTS**

Name	Address	Field of Expertise

**B. CONTRACTORS**

Name of Construction Firm	Postal Address	Category	Classification

**C. SUPPLIERS**

Name of Establishment	Postal Address	Category <sup>2</sup>	Products/Materials Supplied

<sup>1</sup> One that can provide technical assistance such as survey works, engineering design and plan preparations, laboratory test results

<sup>2</sup> Whether hardware store, electrical store, lumberyard, sand & gravel supplier, etc

**MATRIX OF NON-REGISTERED SUPPLIERS**

Name of Supplier	Postal Address	Category

**Prepared by:**

**Noted:**

\_\_\_\_\_  
MTF and/or ACT TF

\_\_\_\_\_  
Regional Community Infrastructure Specialist and/or DRCIS

*Note: To be conducted in coordination with market survey of available suppliers and contractors prepared by the Procurement Team*

## SITE VALIDATION REPORT

(For Rural Access Component)

Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_  
 Name of proposed sub-project: \_\_\_\_\_  
 Location: Station Limits (Sitio/Barangay): \_\_\_\_\_  
 Name of contact person (PPT/BRT member) \_\_\_\_\_  
 No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_  
 Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgy's)

1. Current status of the proposed road section: (Please Mark)  
 \_\_\_ trail; \_\_\_ earth/dirty road ; \_\_\_ potholes present ; \_\_\_ canal w/in the roadway  
 \_\_\_ existing canal silted; \_\_\_ loose surface materials ; \_\_\_ some sections are cemented
2. Estimated length of the proposed road: \_\_\_ (in Kilometers); indicate the following references or benchmarks @  
 Point (start or sta. 0+000) \_\_\_\_\_  
 (end of sta. \_\_\_\_\_)
3. Existing road network for which the proposed road will connect:  
 \_\_\_ provincial road ; \_\_\_ barangay road ; \_\_\_ NIA access road ; \_\_\_ private road
4. Types of vehicles currently passing the proposed road:  
 \_\_\_ none ; \_\_\_ motorcycles/tri-cycles ; \_\_\_ four-wheel ; \_\_\_ 6-wheelers truck ; \_\_\_ Others
5. Frequency count of vehicles currently passing the proposed road per day:  
 \_\_\_ times for motorcycles/tri-cycles ; \_\_\_ times for Four-wheel ; \_\_\_ times for 6-wheeled & others
6. Existing cost of fare from the area to the municipal proper:  
 \_\_\_\_\_ per person ; \_\_\_\_\_ per sack of farm product
7. Existing farm products within the influence area of the proposed road: ( ex. Palay, vegetable )  
 \_\_\_\_\_
8. Topography of the proposed area (route):  
 \_\_\_\_\_ flat terrain ; \_\_\_\_\_ flat to rolling ; \_\_\_\_\_ rolling to hilly ; \_\_\_\_\_ mountainous
9. Will the proposed road requires major excavation? \_\_\_ yes (estimated vol.) \_\_\_\_\_ cu.m; \_\_\_ No
10. Will the road requires significant volume of filling/embankment? \_\_\_ yes \_\_\_ no
11. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_  
 \_\_\_\_\_
12. Availability of filling/embankment at the area (distance)  
 \_\_\_ within the proposed area ; \_\_\_ 5-10 kms form the area ; \_\_\_ more than 10 kilometers
13. Availability of surface materials at the area (distance)  
 \_\_\_ within the proposed area ; \_\_\_ 5-10 kms form the area ; \_\_\_ more than 10 kilometers
14. Availability of culverts and cement materials the area (distance)  
 \_\_\_ within the proposed area ; \_\_\_ 5-10 kms form the area ; \_\_\_ more than 10 kilometers
15. Availability of heavy equipment at the area/locality: \_\_\_ yes \_\_\_ no  
 \_\_\_ LGU owned ; \_\_\_ privately owned ( contractors)
16. Availability of labor force at the area: \_\_\_ skilled (identify) \_\_\_\_\_ ; \_\_\_ unskilled
17. Current cost of labor at the area: skilled: \_\_\_\_\_ /day ; unskilled: \_\_\_\_\_ / day

Other observations:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, range of options for technical design must be presented to the community. Appropriate technology will be finalized and confirmed once the information are analyze.*

*Attach Photos of the proposed site.*

Prepared by:

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## SITE VALIDATION REPORT

(For Rural Access Component – Bridges/Spillway/Culverts)

Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_

Name of proposed sub-project: \_\_\_\_\_

Location: Station Limits (Sitio/Barangay): \_\_\_\_\_

Name of contact person (PPT/BRT member) \_\_\_\_\_

No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_

Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgy's)

1. Existing status of the proposed road leading to the bridge site: *(Please Mark)*  
 trail ;  earth/dirty road ;  potholes present ;  canal w/in the roadway  
 existing canal silted ;  loose surface materials ;  some sections are cemented
2. Estimated width of the water body for which the structure will be constructed: \_\_\_\_\_ (ln.m)
3. Type of water body for which the proposed structure will be constructed:  river ;  creek
4. From the strongest typhoon that hit the area, what was the maximum flood level? \_\_\_\_\_ m.
5. Existing type of soil at the area:  clay;  sandy;  rocky
6. Is there any existing bridge or similar structures within the area / locality?  yes  no
7. Quarrying within the area ( 200 meters radius from the proposed bridge site)  yes  no
8. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_  
 \_\_\_\_\_
9. Other barangay that would benefit the proposed structures: \_\_\_\_\_
10. Available indigenous materials at the area that can be used for the proposed structures: List of materials;  
 \_\_\_\_\_
11. Availability of filling/embankment materials at the area: (distance)  
 within the proposed area ;  5-10 kms from the area ;  more than 10 kms
12. Availability of sand and gravel at the area: (distance)  
 within the proposed area;  5-10 kms from the area ;  more than 10 kms
13. Availability of culverts, cement and other construction materials in the area: (distance)  
 within the proposed area;  5-10 kms from the area;  more than 10 kms
14. Availability of heavy equipment at the area/locality:  yes  no  
 LGU owned ;  privately owned (contractors)
15. Existing means of transportation servicing the community:  
 none ;  motorcycle/tricycle;  jeep;  6-wheelers truck ;  
 other (specify)
16. Existing cost of fare from the area to the municipal proper:  
 per person ;  per sack of farm product
17. Existing farm products within the influence area : (ex. Palay, Vegetable) \_\_\_\_\_
18. Availability of labor force at the area: \_\_\_\_\_ skilled (identify) \_\_\_\_\_ ; \_\_\_\_\_ unskilled
19. Current cost of labor at the area: skilled: \_\_\_\_\_ /day; unskilled: \_\_\_\_\_ / day

Other observations:

\_\_\_\_\_

\_\_\_\_\_

**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, range of options for technical design must be presented to the community. Appropriate technology will be finalized and confirmed once the information are analyze.*

*Attach Photos of the proposed site.*

Prepared by:

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## SITE VALIDATION REPORT (For Buildings)

Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_  
 Name of proposed sub-project: \_\_\_\_\_  
 Location: Station Limits (Sito/Barangay): \_\_\_\_\_  
 Name of contact person (PPT/BRT member) \_\_\_\_\_  
 No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_  
 Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgys)

1. Existing status of the road leading to the proposed site: (Please Mark)  
 \_\_\_ trail ; \_\_\_ all weather gravel road; \_\_\_ gravel road w/some cemented portion
2. Distance of the area from the municipal proper : \_\_\_\_\_ (kilometers)
3. Means of transportation from the Poblacion to the proposed site:  
 \_\_\_ none; \_\_\_ motorcycle/tricycle; \_\_\_ jeep; \_\_\_ banca ; \_\_\_ others (specify) \_\_\_\_\_
4. Ownership of the property for which the building will be constructed:  
 \_\_\_ Barangay site ; \_\_\_ School site ; \_\_\_ LGU owned ; \_\_\_ Privately owned; Titled Y\_\_\_ N\_\_\_
5. Terrain of the proposed sub-project site:  
 \_\_\_ for clearing ; \_\_\_ need filling/embankment ; \_\_\_ for side cut excavation
6. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_  
 \_\_\_\_\_
7. Name other barangay/s that will benefit from the sub-project: \_\_\_\_\_
8. Available indigenous materials at the area can be used for the proposed structures: List the materials;  
 \_\_\_\_\_
9. Availability of filling/embankment materials at the area: (distance)  
 \_\_\_ within the proposed area ; \_\_\_ 5-10 kms from the area ; \_\_\_ more than 10 kms
10. Availability of sand and gravel at the area: (distance)  
 \_\_\_ within the proposed area; \_\_\_ 5-10 kms from the area ; \_\_\_ more than 10 kms
11. Availability of construction materials in the area: (distance)  
 \_\_\_ within the proposed area; \_\_\_ 5-10 kms from the area; \_\_\_ more than 10 kms
12. Availability of concrete mixer and concrete vibrator at the area/locality: \_\_\_ yes \_\_\_ no  
 \_\_\_ LGU owned; \_\_\_ privately owned (contractors)
13. Availability of labor force at the area: \_\_\_ skilled ( identify) \_\_\_\_\_ ; \_\_\_ unskilled
14. Current cost of labor at the area: skilled: \_\_\_\_\_ /day; unskilled: \_\_\_\_\_ / day
15. Who will provide the following software for the proposed sub-project? (please specify)
  - a. For school building (teacher, books) \_\_\_\_\_
  - b. For health station (Health Worker (BHW, Midwife), medicines) \_\_\_\_\_
  - c. For day care center (Day Care Worker, etc) \_\_\_\_\_
16. Any existing organization at the barangay: (please specify) \_\_\_\_\_  
 \_\_\_ active; \_\_\_ in-active
17. Willingness to organize group to handle the operation of the sub-project: \_\_\_ yes \_\_\_ no

Other observations:  
 \_\_\_\_\_  
 \_\_\_\_\_



**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, though standard designs in terms of floor area for usage are available, range of options for the technical design in terms of materials to be used will be finalized and confirmed once the information are analyze.*

*Attach Photos of the proposed site.*

Prepared by:

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## SITE VALIDATION REPORT

### (For Post-Harvest Facilities)

Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_

Name of proposed sub-project: \_\_\_\_\_

Location: Station Limits (Sitio/Barangay): \_\_\_\_\_

Name of contact person (PPT/BRT member) \_\_\_\_\_

No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_

Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgy's)

1. Existing status of the road leading to the proposed site: *(Please Mark)*  
 trail ;  all weather gravel road;  gravel road w/some cemented portion
2. Distance of the area from the municipal proper : \_\_\_\_\_ (kilometers)
3. Means of transportation from the Poblacion to the proposed site:  
 none;  motorcycle/tricycle;  jeep;  banca ;  others (specify) \_\_\_\_\_
4. Ownership of the property for which the building will be constructed:  
 Barangay site ;  School site ;  LGU owned ;  Privately owned; Titled Y\_ N\_
5. Terrain of the proposed sub-project site:  
 for clearing ;  need filling/embankment ;  for side cut excavation
6. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_  
 \_\_\_\_\_
7. Name other barangay/s that will benefit from the sub-project: \_\_\_\_\_
8. Any existing similar facilities within the area or locality:  yes (distance) \_\_\_\_\_ (km);  no
9. Availability of construction materials in the area: (distance)  
 within the proposed area ;  5-10 kms from the area ;  more than 10 kms
10. Availability of equipment/machinery needed for the sub-project?  yes;  no  
 within the municipality ;  outside the municipality (specify place) \_\_\_\_\_
11. Availability of labor force at the area:  skilled ( identify) \_\_\_\_\_ ;  unskilled
12. Current cost of labor at the area: skilled: \_\_\_\_\_ /day; unskilled: \_\_\_\_\_ / day
13. Availability of technician/mechanic for the equipment/machinery?  yes;  no  
 within the municipality ;  outside the municipality (specify place) \_\_\_\_\_
14. Availability of technical staff familiar with the operation of the proposed sub-project:  
 yes; (indicate name) ; \_\_\_\_\_ ;  none
15. Any existing organization at the barangay: (please specify) \_\_\_\_\_  
 active ;  in-active
16. Training/s needed relative to the implementation of the proposed sub-project:  
 \_\_\_\_\_
17. Willingness to organize group to handle the operation of the sub-project:  yes  no
18. Willingness of the community member to contribute/pay for the services provided by the sub-project:  
 willing to pay ;  not willing to pay
19. How much do they think they can initially afford? \_\_\_\_\_

Other observations:

\_\_\_\_\_

\_\_\_\_\_

**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, though standard designs in terms of floor area for usage are available, range of options for the technical design in terms of materials to be used will be finalized and confirmed once the information are analyze.*

*Attach Photos of the proposed site.*

Prepared by:

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## SITE VALIDATION REPORT

(For Irrigation Component)

Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_  
 Name of proposed sub-project: \_\_\_\_\_  
 Location: Station Limits (Sitio/Barangay): \_\_\_\_\_  
 Name of contact person (PPT/BRT member) \_\_\_\_\_  
 No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_  
 Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgy's)

1. Existing status of the road leading to the proposed site: *(Please Mark)*  
 \_\_\_\_ trail ; \_\_\_\_ all weather gravel road; \_\_\_\_ gravel road w/some cemented portion
2. Distance of the area from the municipal proper : \_\_\_\_\_ (kilometers)
3. Means of transportation from the Poblacion to the proposed site:  
 \_\_\_\_ none; \_\_\_\_ motorcycle/tricycle; \_\_\_\_ jeep; \_\_\_\_ banca ; \_\_\_\_ others (specify) \_\_\_\_\_
4. Category of the proposed sub-project: \_\_\_\_\_ new/expansion of irrigation system  
 \_\_\_\_\_ rehabilitation/improvement

### For the New System

1. Estimated irrigable area to be covered by the proposal: \_\_\_\_\_ hectares
2. Name and location of water source: \_\_\_\_\_
3. Estimated discharge of water source: \_\_\_\_\_
4. Distance of the water source to the target area: \_\_\_\_\_ (kilometers)
5. Existing crops planted within the target area: \_\_\_\_\_
6. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_

### For Rehabilitation/Improvement

7. Name of existing system: \_\_\_\_\_
8. Area of coverage: \_\_\_\_\_ (has.) Date completed and operated by the IA: \_\_\_\_\_
9. Proposed scope of work covered by the proposal: \_\_\_\_\_
10. Effective area covered by the proposed sub-project: \_\_\_\_\_ (hectares)
11. Number of farm lots affected by the improvement covered by the proposed sub-projects:  
 \_\_\_\_\_ farm lots; \_\_\_\_\_ covered areas
12. Status of existing Irrigation Association (IA): \_\_\_\_ Active \_\_\_\_ In-active
13. Name of Irrigation Association: \_\_\_\_\_
14. Status of operation and maintenance of the IA: \_\_\_\_\_
15. Availability of labor force at the area: Skilled (identify) \_\_\_\_\_; \_\_\_\_ unskilled
16. Current cost of labor at the area: skilled: \_\_\_\_\_ /day; unskilled: \_\_\_\_\_ / day
17. Any existing organization at the barangay aside from IA: (please specify)  
 \_\_\_\_\_

Other observations:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, range of options for technical design must be presented to the community. Appropriate technology will be finalized and confirmed once the information are analyze.*

*Attach Photos of the proposed site.*

Prepared by:

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## SITE VALIDATION REPORT

(For Water Supply Sub-project)

- Date of field visit: \_\_\_\_\_ Barangay \_\_\_\_\_ Municipality \_\_\_\_\_
- Name of proposed sub-project: \_\_\_\_\_
- Location: Station Limits (Sitio/Barangay): \_\_\_\_\_
- Name of contact person (PPT/BRT member) \_\_\_\_\_
- No. of present population of the target area: \_\_\_\_\_; Male: \_\_\_\_\_ Female: \_\_\_\_\_
- Total No. of Households: \_\_\_\_\_ Ave. No./HH: \_\_\_\_\_ (For joint barangay proposal, total for the participating brgy's)
1. No. of population affected by insufficiency supply of potable water: \_\_\_\_\_
  2. Existing water system in the area: \_\_\_\_\_ Open Dug Well; \_\_\_\_\_ Hand Pumps; \_\_\_\_\_ Piped System
  3. Source of existing water system: \_\_\_\_\_ Underground ; \_\_\_\_\_ Spring; \_\_\_\_\_ Others: \_\_\_\_\_
  4. Location of the existing water source: \_\_\_\_\_
  5. Type of source of the proposed water system: \_\_\_\_\_
  6. Name of the source: \_\_\_\_\_ Location: \_\_\_\_\_
  7. Discharge (Q) or Flow rate: \_\_\_\_\_ lps. Elevation: \_\_\_\_\_ meters
  8. Quality of water: \_\_\_\_\_
  9. Geographical Coordinates: \_\_\_\_\_ latitude; \_\_\_\_\_ longitude
  10. Reliability of source: perennial \_\_\_\_\_ intermittent \_\_\_\_\_ fluctuating \_\_\_\_\_
  11. Geology (Type of soil/rock at the source): \_\_\_\_\_
  12. Vegetation cover of the source: \_\_\_\_\_
  13. Accessibility of the source: road \_\_\_\_\_ trail \_\_\_\_\_ none \_\_\_\_\_
  14. Distance of proposed water source to the target area: \_\_\_\_\_
  15. Distance of the water source to the nearest road access: \_\_\_\_\_
  16. Presence of power supply in the area: \_\_\_\_\_
  17. Distance of the nearest electric post: \_\_\_\_\_
  18. Ownership of the source: \_\_\_\_\_ LGU owned; \_\_\_\_\_ Public Land; \_\_\_\_\_ Privately owned; Titled Y\_\_ N\_\_
  19. Name of Owner: \_\_\_\_\_
  20. Any potential environmental disaster risks noted on the proposed site: \_\_\_\_\_
- 
21. Available construction materials in the area: \_\_\_\_\_
  22. Name of existing association in the area: \_\_\_\_\_
  23. Status of the association: No. of active members \_\_\_\_\_ in-active \_\_\_\_\_

Other observations:

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**Recommendation:** This will be filled by technical staff of the validating team (Service Provider, RIE, TF, or M.E.)

*On this section, range of options for technical design must be presented to the community. Appropriate technology will be finalized and confirmed once the information are analyze.*

*Attach pictorials of the proposed water source, location of water reservoir, existing water system of the barangay and other vantage point needed for preparing engineering plans.*

Prepared by:

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## TECHNICAL ASSISTANCE ELIGIBILITY CHECKLIST

Barangay : \_\_\_\_\_

Municipality : \_\_\_\_\_

Province : \_\_\_\_\_

Please Check Appropriate Box

	Yes	No
1. Is there a resolution passed by the Barangay Assembly for the availment of TAF?		
2. Does the project fall under technically complicated sub-projects as indicated in section 3.3 of amendments of Technical Assistance Fund Policy of 18 September 2012?		
3. Is the expertise not available in the community or the cluster of communities?		
4. Is the technical assistance beyond the capacity of the existing project and Municipal staff?		
5. Is there already an organized Project Preparation Team?		
6. Is the lead Barangay already selected to manage the engagement of Service Provider/s?		
7. Are the cluster communities willing to open a current account and provide initial deposit of Php 1,000.00 as Local Community Contribution?		

Date: \_\_\_\_\_

**MEMORANDUM**

FOR : The Regional Project Manager  
KC-NCDDP

FROM : (The Area Coordinating Team)

SUBJECT : Technical Assistance Fund for the Municipality of \_\_\_\_\_

In compliance with the provisions of (Name of Donor/Source of Fund) (Name of Manual/Document), we have reviewed/validated the identified projects of Barangay \_\_\_\_\_ to determine their eligibility to the \_\_\_% Technical Assistance Fund (TAF) and have found that on the basis of the above information of the abovementioned barangays are eligible to avail of said Technical Assistance Fund.

We certify that all information supplied herein are true and correct to the best of my knowledge.

Signed: \_\_\_\_\_  
Area Coordinator



## SUB-PROJECT CONCEPT FORM

Barangay: \_\_\_\_\_ Municipality: \_\_\_\_\_  
 Province: \_\_\_\_\_ Region: \_\_\_\_\_  
 Total number of Household (HH) in the barangay: \_\_\_\_\_  
 Total Population: \_\_\_\_\_ Male: \_\_\_\_\_ (% of total) Female: \_\_\_\_\_ (% of total)

<b>A. GENERAL INFORMATION</b>										
<b>Name of proposed sub-project:</b> _____										
Category:		Public Goods _____			Enterprise _____			Human Resource Dev't _____		
<b>Problem Statement:</b> <i>(articulate thematic dimension)</i>										
<b>Project Purpose:</b> <i>(articulate thematic dimension)</i>										
<b>Project Beneficiaries and Expected Benefits:</b> <i>(disaggregate by estimated number, sex, &amp; type of benefit)</i>										
Total Number of HH Beneficiaries: _____			Total Male Beneficiaries: _____			Total Female Beneficiaries: _____				
Pantawid HH Beneficiaries of SP: _____			SLP HH Beneficiaries of SP: _____			IP HH Beneficiaries of SP: _____				
Pantawid Families Beneficiaries of SP: _____			SLP Families Beneficiaries of SP: _____							
<i>(Also indicate type of benefits)</i>										
<b>B. DESCRIPTION OF PROJECT COMPONENTS</b>										
<b>1. Physical/Infrastructure component (Program of Works)</b>										
Physical Target:					Cost Parameter:					
Persons who assisted in the preparation of technical proposal:										
Proposed scope of works to be undertaken:										
Labor/Workforce requirement/sources: <i>(disaggregate by skill level and sex)</i>										
Equipment requirement/sources:										
Procurement Method/s to be adopted:										
<b>2. Training component</b> <i>(disaggregate by training topics and estimated number of women and men participants)</i>										
<b>3. Women-specific component</b> <i>(mention strategies to remove barriers to women's participation)</i>										
<b>4. Management component</b> <i>(disaggregate by estimated number of management positions and sex of prospective staff)</i>										
<b>C. SAFEGUARD CONCERNS</b>										
Any displacement or relocation of community members during implementation? <i>(disaggregated by sex and income class)</i>							Yes _____		No _____	
Acquisition of proposed site/location? <i>(sex of owner)</i>		Deed of Sale __		Donated __		LGU Owned __		Other: (specify) __		
Proposed site within the reservation area?		Yes ____		No ____						
Necessary permit/s accomplished? (e.g. ECC, CNC)		Yes ____		No ____		EMP Only ____				
Mitigating measures to be undertaken for the environmental impact of the sub-project?										
<b>D. FINANCIAL ECONOMIC ASPECT</b>										
Cost Items Per Component	Total Cost	CDD Grant	Local Counterpart Contribution (LCC)							Total LCC
			Community		BLGU	MLGU	PLGU	Others		
			Men	Women						
Total Estimated Cost – POW (Infrastructure)										
Training										
Women-Specific										

Management									
Others, Specify									
<b>Total</b>									
	(100%)	(__%)	(__%)	(__%)	(__%)	(__%)	(__%)	(__%)	(__%)

**E. SUB-PROJECT SUSTAINABILITY**

Is there an existing O&M group or does it still have to be organized? *(if existing, disaggregate leaders and members by sex. If it is yet to be formed, indicate participation of women as leaders and members)*

What are the major Operations and Maintenance (O&M) components of the sub-project? *(In a school building project, for example, the major O&M components would include teachers, books and supplies, and periodic repair of the school building and desks and chairs, etc.)*

How do we plan to maintain the completed sub-projects?

Is the community willing to pay for tariff and by how much?

Other sources of funds for the operation and maintenance activities?

Identified capability building requirements for O&M group? *(disaggregate capability-building requirements by sex)*

*Prepared by:*

\_\_\_\_\_  
Head, Project Preparation Team

*Approved for endorsement to the MIBF*

\_\_\_\_\_  
Brgy. Chairperson

\_\_\_\_\_  
BSPMC Chairperson

*Approved for endorsement to  
(CDD Project Name):*

\_\_\_\_\_  
Municipal Mayor/MIBF Convenor

*Technical Verification by:*

\_\_\_\_\_  
Area Coordinator

\_\_\_\_\_  
MIAC Representative

## CHECKLIST FOR TECHNICAL REVIEW OF PROPOSED INFRASTRUCTURE SUB-PROJECTS<sup>1</sup>

### I. General Information

Particular Trigger Points	Pass	Verify	Remarks
1. <b>Eligibility</b> - <i>the identified SP is not included on the Negative list &amp; eligible for KC-NCDDP funding.</i>			
2. <b>Responsiveness</b> – <i>base on the PSA result</i>			
3. <b>Name of SP</b> – <i>clearly defined whether construction, rehabilitation/improvement, concreting, repair</i>			
4. <b>Physical Target</b> – <i>clearly stated in kms for roads, ln.m for bridges, number of classrooms &amp; area in sq.m, and others as to agreed mode of measurement</i>			
5. <b>Duration</b> – <i>within the agreed timelines to complete per sub-project type and supported with Ghant Chart; realistic &amp; attainable to complete as planned</i>			
6. <b>Technical Description</b> – <i>properly described as to size, length of major work items to be undertaken</i>			
7. <b>Total Estimated Cost</b> – <i>within the current regional cost parameter of sub-project type</i>			
8. <b>Safeguards</b> – <i>requirements complied, on File (EMP/CNC, DOD, Cert/Res)</i>			
9. <b>Accountability</b> - <i>Name of T.A. Provider</i>			

### II. Technical Plans and Specifications

Particular Trigger Points	Pass	Verify	Remarks
1. <b>Appropriate Technology</b> – <i>design considered the O&amp;M capacity</i>			
2. <b>Completeness of Plans</b> – <i>minimum required plans are attached (sections, details, floor plans, traverse, profiles)</i>			
3. <b>Specifications</b> – <i>appropriate and complete technical specifications are attached to the proposal</i>			
4. <b>Details of Plan</b> – <i>cross-sections, profiles, traverse are complete and appropriate scale was adopted</i>			
5. <b>Earth Works Computations</b> – <i>volume computation on the result of cross sections is attached to the proposal (Road SP)</i>			
6. <b>Design Analysis</b> – <i>conformed to structural analysis or hydraulic analysis</i>			

### III. POW and Detailed Cost Estimates

Particular Trigger Points	Pass	Verify	Remarks
1. <b>Work Items</b> – <i>list of pay items and mode of measurement are appropriate based on agreed standards work items</i>			
2. <b>Work Pay Items</b> – <i>are necessary and appropriate to complete the works; no unnecessary pay items are include in the program</i>			

3. <b>Unit Cost</b> – major work items unit cost are within the prevailing allowable cost parameter			
4. <b>Indirect Cost</b> – list of indirect cost are within the agreed payable items; - cost of indirect items should be within the allowable ranges as stated in Sep 11 of ACT Manual			
5. <b>Derivation of Unit Cost</b> - Equipment capability outputs are indicated and used as basis for the duration for rentals of equipment; - Indicate type and capability of equipment; - Manpower capability outputs are indicated and used as basis for computation of manpower requirement and duration of workers			
6. <b>Labor Rates</b> – local rates of labor as agreed during the barangays assemblies will be adopted			
7. <b>Materials Cost</b> – unit prices are within the current prevailing market price at the locality			

Reviewed by:

\_\_\_\_\_

<sup>1</sup> To be attached to the proposal once it passes the screening and review of the regional technical staff (RIE/DRIE)

## PROGRAM OF WORKS

Barangay: \_\_\_\_\_ Municipality: \_\_\_\_\_ Province: \_\_\_\_\_

Sub-Project Title: \_\_\_\_\_

Category: \_\_\_\_\_

Physical Target: \_\_\_\_\_

Total Sub-Project Cost: \_\_\_\_\_

Mode of Implementation: \_\_\_\_\_

Project Description: \_\_\_\_\_

Sub-Project Duration: \_\_\_\_\_ Technical Personnel: \_\_\_\_\_

Equipment Needed: \_\_\_\_\_

Item No.	Scope of Work (Direct Cost)	% Wt.	Quantity	Unit of Measure	Unit Price	Total
<b>Total</b>						

Breakdown Estimated Project Cost	Sources of Fund				
	CDD Grant	Community	Local Gov't Units	Other Source	Total Cost
<b>A. Direct Cost</b>					
Material Cost					
Equipment Rental					
Labor Cost:					
a. Skilled (Men)					
b. Skilled (Women)					
c. Unskilled (Men)					
d. Unskilled (Women)					
Contractor's Profit					
Taxes					
<b>Sub-Total A</b>					
<b>B. Indirect Cost</b>					
Pre-Engineering					
Supervision					
PPE					
Hand Tools					
Material Testing					
Admin and Overhead					

<b>Sub-Total B</b>					
<b>Total (A+B)</b>					
ADD: Contingency					
%					
Total Estimated Cost					
Add: O&M (Other amenities)					
Grand Total					

Prepared by:

Approved by:

\_\_\_\_\_  
*Service Provider/ACT-TF*

\_\_\_\_\_  
*BSPMC Chairperson*

Reviewed by:

Concurred by:

\_\_\_\_\_  
*ACT-TF/Municipal Engineer*

\_\_\_\_\_  
*Barangay Chairperson*

\_\_\_\_\_  
*Municipal Mayor*

Recommending Approval:

Noted by:

\_\_\_\_\_  
*Municipal Engineer*

\_\_\_\_\_  
*Regional Community Infrastructure Specialist*

## SCHEDULE OF IN-KIND LOCAL COUNTERPART CONTRIBUTION

Date Prepared: \_\_\_\_\_  
 Barangay: \_\_\_\_\_  
 Municipality: \_\_\_\_\_  
 Province: \_\_\_\_\_

Name of proposed subproject: \_\_\_\_\_  
 Total Estimated Cost: \_\_\_\_\_ CDD Cost: \_\_\_\_\_  
 Subproject Duration: \_\_\_\_\_ LCC: \_\_\_\_\_

In-kind: \_\_\_\_\_  
 Cash: \_\_\_\_\_

Estimated Cost: 1<sup>st</sup> Tranche \_\_\_\_\_ 2<sup>nd</sup> Tranche \_\_\_\_\_ 3<sup>rd</sup> Tranche \_\_\_\_\_

Mode of Implementation: CFA " \_\_\_\_\_ by Contract " \_\_\_\_\_

PACKAGES	PACKAGE ITEMS	QTY.	UNIT	TOTAL	PROC. METHOD	Estimated Cost Involved and Schedule of Delivery				Proposed Implementation Schedule								
						1 <sup>ST</sup> tranche	2 <sup>nd</sup> Tranche	3 <sup>RD</sup> tranche	Total	MONTH								
						CDD Grant	CDD Grant	CDD Grant	CDD Grant	1	2	3	4	5	6	7	8	
Package 1																		
Package 2																		
<b>TOTAL</b>																		

Workshop output of: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Submitted by: \_\_\_\_\_

\_\_\_\_\_  
*Procurement Team Head*  
 Name and Signature

\_\_\_\_\_  
*TF/Municipal Engineer*  
 Name and Signature

\_\_\_\_\_  
*BSPMC Chairperson*  
 Name and Signature

RURAL INFRASTRUCTURE COMPONENT

**BILL OF QUANTITIES AND ESTIMATED CONTRACT COST\***

Name and Location of Subproject: \_\_\_\_\_

Item No. (1)	Description (2)	Quantity (3)	Unit of Measure (4)	Rate/ Unit (5)	Estimated Direct Cost (6) = (3) x (5)	Estimated Indirect Cost (7)	Total Cost (8) = (6) + (7)
<b>Total Contract Cost</b>							

\*May be prepared in an Excel Spreadsheet

Prepared by:  
  
\_\_\_\_\_

Reviewed & Checked by:  
  
\_\_\_\_\_

Noted by:  
  
\_\_\_\_\_

Service Provider and/or ACT-TF

ACT- Technical Facilitator

Municipal Engineer







## RURAL INFRASTRUCTURE COMPONENT

### CONSTRUCTION SCHEDULE AND S-CURVE\*

Name and Location of Subproject: \_\_\_\_\_ Proposed Implementation  
 Period: \_\_\_\_\_

Item No.	Work/Activity Description	Construction Schedule			Construction Cost		Month												
		No. of Days	Cumulative No. of Days	Start Date	Cost	Cumulative Cost	1	2	3	4	5	6	7	8	9	10	11	12	
<b>Total No. of Days</b>																			

*\*List all activities/work description based on Work Breakdown Structure, Indicate estimated no. of days to complete each activity and cumulative number of days, Indicate planned start date, indicate cost of each activity and cumulative cost. Use data from cumulative schedule and costs to plot the S-Curve. During Project Implementation, reserve an additional row for each activity to plot data based on actual schedule and costs.*

Prepared by: \_\_\_\_\_  
 \_\_\_\_\_  
 Service Provider and/or ACT-TF

Reviewed & Checked by: \_\_\_\_\_  
 \_\_\_\_\_  
 ACT- Technical Facilitator

Noted by: \_\_\_\_\_  
 \_\_\_\_\_  
 Municipal Engineer

RURAL INFRASTRUCTURE COMPONENT

**MANPOWER SCHEDULE**

Name and Location of Subproject:

Item No.	Work Item/Activity Name	Position*	No. of Men Required	Programmed Man-Days	Schedule of Deployment (Month)										
					1	2	3	4	5	6	7	8	9	10	

*\*Please identify women workers to be hired*

Prepared by:

Reviewed & Checked by:

\_\_\_\_\_  
Service Provider and/or ACT-TF

\_\_\_\_\_  
ACT- Technical Facilitator

Noted by:

\_\_\_\_\_  
Municipal Engineer

**RURAL INFRASTRUCTURE COMPONENT  
EQUIPMENT SCHEDULE**

Name and Location of Subproject: \_\_\_\_\_

Item No.	Work Item/Activity Name	Type of Equipment	No. of Units Required	Programmed Man-Days Utilization	Schedule of Deployment (Month)										
					1	2	3	4	5	6	7	8	9	10	

*\*Please identify women workers to be hired*

Prepared by:

Reviewed & Checked by:

\_\_\_\_\_  
Service Provider and/or ACT-TF

\_\_\_\_\_  
ACT- Technical Facilitator

Noted by:

\_\_\_\_\_  
Municipal Engineer

CBIM Form B-2

# CONSTRUCTION LOGBOOK

Name of sub-project: \_\_\_\_\_  
 Physical Target: \_\_\_\_\_ Total Approved Cost: \_\_\_\_\_  
 Location: \_\_\_\_\_

Date: \_\_\_\_\_ Day: \_\_\_\_\_ Weather: \_\_\_\_\_

**Labor Force Available:**

Skilled Men: Foreman - _____	Unskilled Men : _____
Carpenter - _____	Unskilled Women : _____
Mason - _____	Skilled Women (Specify): _____
Plumber - _____	
Welder - _____	
H.E. Operator - _____	
L.E. Operator - _____	

*Equipment/Tools present at site: (specify and number)*

_____	_____	_____
_____	_____	_____
_____	_____	_____

*Activities undertaken:*

	Output/s of the day
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*Problems encountered & action taken:*

_____	_____
_____	_____
_____	_____

*BSPMC/Project Staff/Visitors:*

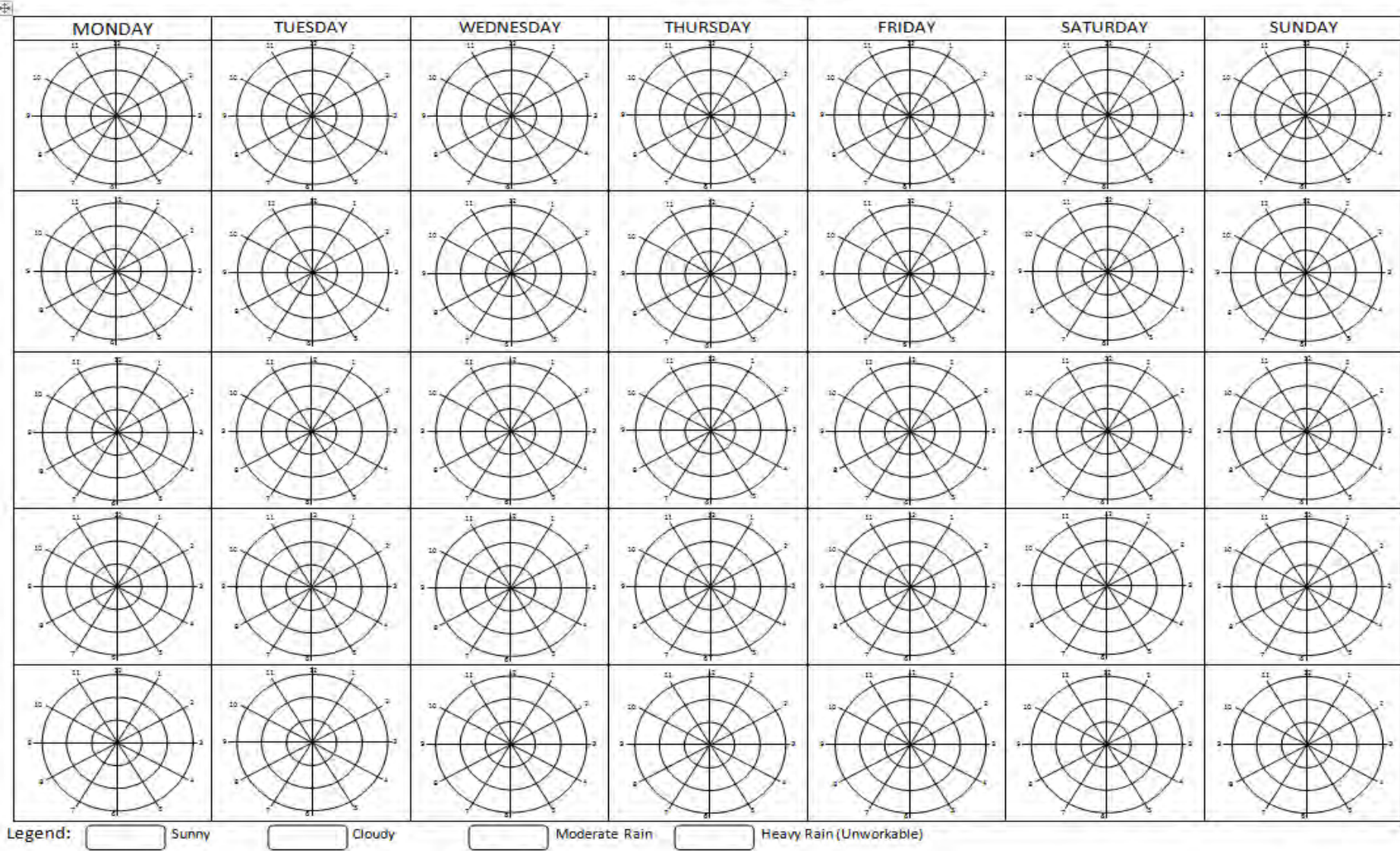
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*Comments/Observations/Recommendations:*

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

# WEATHER CHART

Month of \_\_\_\_\_, 20\_\_



## BARANGAY SUB-PROJECT WORK SCHEDULE & PHYSICAL PROGRESS REPORT

For the Month of \_\_\_\_\_, \_\_\_\_\_

Name of Sub-project: _____ Physical Target: _____ Region: _____ Province: _____ Municipality: _____ Barangay: _____	Total Sub-Project Cost: _____ Direct Cost: _____ Indirect Cost: _____ Date Started: _____ Target Completion Date: _____ Mode of Implementation: _____	<b>Labor Generated</b>	<b>Total</b>	<b>No. of Days</b>	<b>Ave. Rate/Day</b>
		Skilled	Male		
			Female		
		Unskilled	Male		
			Female		
		TOTAL			

**I. To be filled up by MLGU-Deputy Area Coordinator**

Item No.	Description	QTY	Unit	Amount	Weight (%)	Physical Target	Previous Cumm.	Duration						
								Month 1	Month 2	Month 3	Month 4			
						<i>Planned</i>								
						<i>Actual</i>								
						<i>Planned</i>								
						<i>Actual</i>								
						<i>Planned</i>								
						<i>Actual</i>								
						<i>Planned</i>								
						<i>Actual</i>								
						<i>Planned</i>								
						<i>Actual</i>								
	<b>TOTAL</b>													

**II. To be filled up by MLGU-Deputy Area Coordinator**

Physical	% PROGRESS (PLANNED)				PERIODIC							
					CUMULATIVE							
	% PROGRESS (ACTUAL)				PERIODIC							
						CUMULATIVE						
Financial	% of slippage (+)				PERIODIC							
					CUMULATIVE							
	% PROGRESS (PLANNED)				PERIODIC							
						CUMULATIVE						
	% PROGRESS (ACTUAL)				PERIODIC							
					CUMULATIVE							



**III. Major Issues Encountered:**

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*Note: Attach Material Records Sheet if physical accomplishment lags behind financial disbursements.*

**IV. Recommendations:**

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Prepared by:

Concurred by:

Reviewed & Checked by:

\_\_\_\_\_  
MLGU-ACT-Technical Facilitator and/or Service Provider

\_\_\_\_\_  
Project Implementation Team and MIT Leaders

\_\_\_\_\_  
ACT-Technical Facilitator

Approved by:

Noted by:

\_\_\_\_\_  
BSPMC Chair

\_\_\_\_\_  
Municipal Engineer

\_\_\_\_\_  
Regional Community Infrastructure Specialist



## GUIDE DURING SUPERVISION AND MONITORING INFRASTRUCTURE SUB-PROJECTS<sup>1</sup>

**I. General Information:**

Name of sub-project: \_\_\_\_\_  
 Physical Target: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Approved Cost: \_\_\_\_\_  
 % of Grant released: \_\_\_\_\_ % of LCC delivered: \_\_\_\_\_  
 Mode of Implementation: \_\_\_\_\_ *By Force Account*      \_\_\_\_\_ *By Contract*  
 Procurement Method: Goods: \_\_\_\_\_ *Local Shopping*      \_\_\_\_\_ *Local Bidding*  
 Works: \_\_\_\_\_ *Local Shopping*      \_\_\_\_\_ *Local Bidding*

Particular Trigger Points	Pass	Verify	Remarks
1. <b>Transparency:</b> Prescribed Signboard installed in an area accessible to community members and Minutes of Meeting(s) and/or Brgy. Assembly - SP Information and the latest updates posted ➤ Physical accomplishment ( <i>at the time of visit</i> ) ➤ Financial utilization ( <i>at the time of visit</i> ) - Sub-project meetings/conference ( <i>e.g. BSPMC, BAs, Pre-Const. etc</i> )			
2. <b>Environmental &amp; Social Safeguards:</b> Required documents readily available at BSPMC. - Acquisition documents ( <i>e.g. DOD, Certification, Resolution</i> ) on file - EMP and latest monthly reports on file - Planned mitigating measures observed during construction. - Permits ( <i>blgd.; water application; tapstand installation, etc.</i> )			
3. <b>Sustainability:</b> Availability of Operation and Maintenance plan - O&M group formed/organized - Ad Hoc members formulated policies for O&M - O&M plan formulated and on file - Tariff recalibrated and agreed by end-users			
4. <b>Accountability:</b> Experienced technical staff was assigned to supervise the construction of the sub-project ( <i>Name _____</i> )			

**II. Technical Plans, Specifications and Construction Forms**

Particular Trigger Points	Pass	Verify	Remarks
5. <b>Availability of approved plans</b> – Presence and completeness of approved engineering plans and specification at BSPMC office			
6. <b>Availability of other construction documents</b> – proper filing and maintenance of required documents at BSPMC office - Logbook, Weather Chart - Physical and Financial Reports - Satisfactory results of material testing conducted - Statement of Work Accomplished ( <i>if by Contract</i> ) - Approved Variation Order ( <i>If any</i> ) - Site instructions issued by the Project Engineer			

<sup>1</sup> To be used during the conduct of regular monitoring of on-going and completed sub-projects. Leave one (1) copy with the BSPMC office. For completed sub-project, review the Final Inspection Report, SPCR and the Mutual Partnership Agreement

### III. Community Procurement

Particular Trigger Points	Pass	Verify	Remarks
7. <b>Availability of procurement documents</b> – proper filing of procurement documents ( <i>PCPP, Canvass Form, Abstract, POs, etc</i> )			
8. <b>Red Flags</b> – Community Empowerment Facilitators observed and utilized the Red Flag templates & on-file according to procurement method/process adopted. - Finding was referred to the TF for appropriate technical advice			
9. <b>Principles</b> – all stakeholders observed the procurement principles: - <i>Fairness</i> , competitive procurement process was observed <i>Economy</i> , awards were based on lowest evaluated, responsive and complying bid or quotations. - <i>Efficiency</i> , procurement activities were conducted within the given timeframe per procurement method adopted - <i>Transparency</i> , bid opening was conducted in public and Purchase Order and/or Notice of Award posted - <i>Accountable</i> , people involved in the procurement are aware of their roles and functions.			
10. <b>Fiduciary review</b> – all completed transactions are submitted to COA. - Receiving copy or transmittal ( <i>submitted to FO or COA</i> ) on file. - Noted red flags were properly resolved ( <i>if any</i> )			

### IV. Sub-project Physical Inspection

Particular Trigger Points
11. <b>Plan vs Actual</b> – list all the observations and findings on the sub-project implementation at the time of inspection ( <i>either during construction or after completion</i> ) vis-a-vis the approved plans and work items listed on the Program of Works. ( <i>Include in your evaluation the physical appearance of the sub-project during the inspection and <u>cost comparison</u></i> )
12. <b>Agreed recommendations</b> – list down appropriate recommendations as discussed with the BSPMC/MCT members to correct the technical observations on the implementation of the sub-project. ( <i>Recommendations will serve as the site instructions for the PIT and BSPMC to follow</i> )
13. <b>Photo documentation</b> – if possible, insert or attach latest pictures on the progress of the sub-project implementation

**V. Safety Measures**

**Particular Trigger Points**

Describe the safety measures observed by the Project Implementation Team and the additional safety measure needed.

Inspection conducted by:

Date:

\_\_\_\_\_

\_\_\_\_\_

With the presence of:

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Republic of the Philippines  
DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT  
(Name of CDD Project/Program)

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

Office of the Barangay Sub-Project Management Committee

Barangay \_\_\_\_\_

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

**CHANGE/EXTRA WORK ORDER NO.** \_\_\_\_\_

Name of Sub-Project: \_\_\_\_\_

Location: \_\_\_\_\_

TO: \_\_\_\_\_

You are hereby directed to make the herein described changes from the PLANS and SPECIFICATIONS, or do the following described works included in the PLANS and SPECIFICATION.

**DESCRIPTION OF WORK TO BE DONE:**

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

**REASON FOR CHANGE/S:**

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

**CHANGES REQUESTED BY:**

\_\_\_\_\_  
Works to be performed at original approved total cost.

**ITEMIZED QUANTITIES AND COST REVISION ON REVERSE SIDE OF THIS SHEET**

We, the undersigned implementers have given careful consideration to the proposed changes and hereby agree thereto, following this proposal is approved we will provide adequate materials, labor and equipment to perform any or all services necessary for the process shown on the reverse side of this sheet.

Difference in cost this changes \_\_\_\_\_

Net Cost of Previous changes \_\_\_\_\_

Original Contract/Approved Amount \_\_\_\_\_

Estimated Revised Contract/Approved Amount \_\_\_\_\_

By reason of this Proposed Change, \_\_\_\_\_ days extension of working time will be allowed.

Prepared by:

\_\_\_\_\_

Date: \_\_\_\_\_

MCT-TF/Service Provider

Reviewed and Checked by:

Recommending Approval:

Noted :

Approved:

ACT – Technical Facilitator

Municipal Engineer

RCIS

BSPMC Chairperson

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Note: No proposed work will be implemented unless the Variation Order is noted and approved by the RCIS and BSPMC



**Name of Project/Program**

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

Office of the Barangay Sub-Project Management Committee

Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

**SUSPENSION ORDER NO. \_\_\_\_\_**

Name of Sub-project: \_\_\_\_\_

Location : \_\_\_\_\_

Date: \_\_\_\_\_

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

You are hereby directed to suspend operation of the above sub-project, on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, for a period of \_\_\_\_\_ days. This takes effect seven (7) days upon receipt of this notice.

Please acknowledge the receipt of this order by dating, signing and returning three (3) of the attached copies. Retain one (1) copy for your file.

\_\_\_\_\_  
**BSPMC Chairperson**

Concurred by:

\_\_\_\_\_  
**Technical Facilitator**

Date: \_\_\_\_\_

\_\_\_\_\_  
I hereby acknowledge the receipt of the above notice.

\_\_\_\_\_  
**Contractor**

Date: \_\_\_\_\_



**Name of Project/Program**

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

Office of the Barangay Sub-Project Management Committee

Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

**RESUMPTION ORDER NO. \_\_\_\_\_**

Name of Sub-project: \_\_\_\_\_

Location : \_\_\_\_\_

Date: \_\_\_\_\_

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

You are hereby directed to resume construction operation of the above sub-project, on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Please acknowledge the receipt of this order by dating, signing and returning three (3) of the attached copies. Retain one (1) copy for your file.

\_\_\_\_\_  
**BSPMC Chairperson**

Concurred by:

\_\_\_\_\_  
**Technical Facilitator**

Date: \_\_\_\_\_

\_\_\_\_\_  
I hereby acknowledge the receipt of the above notice.

\_\_\_\_\_  
**Contractor**

Date: \_\_\_\_\_



**Name of Project/Program**

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

Office of the Barangay Sub-Project Management Committee

Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

**TIME EXTENSION ORDER NO. \_\_\_\_\_**

Name of Sub-project: \_\_\_\_\_

Location : \_\_\_\_\_

Date: \_\_\_\_\_

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

You are hereby directed to extend the contract time for a period of \_\_\_\_ days from \_\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_, due to the following reasons: \_\_\_\_\_ as authorized under Section 4.3.12 of the Community Based Infrastructure Manual.

Please acknowledge the receipt of this order by dating, signing and returning three (3) of the attached copies. Retain one (1) copy for your file.

\_\_\_\_\_  
**BSPMC Chairperson**

Concurred by:

\_\_\_\_\_  
**Technical Facilitator**

\_\_\_\_\_  
Date

\_\_\_\_\_  
I hereby acknowledge the receipt of the above notice.

\_\_\_\_\_  
**Contractor**  
Date: \_\_\_\_\_

# JOINT INSPECTION REPORT<sup>1</sup>

Name of Sub-project: \_\_\_\_\_

Location: \_\_\_\_\_

Total Approved Cost: \_\_\_\_\_

Revised Cost: \_\_\_\_\_

Cost Sharing:

CDD Project/Program: \_\_\_\_\_

CDD Project/Program: \_\_\_\_\_

Community: \_\_\_\_\_

Community: \_\_\_\_\_

Barangay Unit: \_\_\_\_\_

Barangay Unit: \_\_\_\_\_

Municipal/Others: \_\_\_\_\_

Municipal/Others: \_\_\_\_\_

**FINDINGS:**

**I. SUB-PROJECT SCOPE OF WORK**

Work Items	Orig. Qty	Unit Cost	Approved Cost	%	Acc. Qty	Actual Cost	%	Rem. Qty.	Estimated Cost	%
<i>Construction of Intake Box*</i>										
<i>Installation of Pipelines</i>										
<i>Construction of Reservoir</i>										
<i>Construction of Tap stands</i>										
<b>Total</b>										

*\*Examples only*

**II. PHYSICAL DESCRIPTION**

*(Describe any unacceptable appearance from that of the plan e.g. physical dimension, workmanship)*

<sup>1</sup> This report should be attached to the RFR for Last Trance.

**III. PHYSICAL APPEARANCE**  
(Aesthetic, Visual)

**IV. PROJECT QUALITY**

Required Material Tests

Actual Tests Performed

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**V. FINANCIAL:**

Releases

Disbursed

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Fund Balance as of Final Inspection: (If any) \_\_\_\_\_

**VI. ANY IDENTIFIED ENVIRONMENTAL IMPACT:**

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**VII. MITIGATING MEASURES PROVIDED**

**VIII. FINDINGS/COMMENTS:** (Attach cost analysis for the remaining works)

**IX. RECOMMENDATIONS:<sup>2</sup>**

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<sup>2</sup>Inspectorate Team should prepare official communication to the LGU & BSPMC on the results of inspection for their appropriate action. This report will serve as an attachment.

**INSPECTORATE TEAM:**

\_\_\_\_\_  
(Mun. Engineer/LGU Representative)

\_\_\_\_\_  
(Technical Facilitator)

\_\_\_\_\_  
(BSPMC-PIT Representative)

\_\_\_\_\_  
(Roving Bookkeeper)

\_\_\_\_\_  
(BSPMC-Chairperson)

\_\_\_\_\_  
(Area Coordinator)

Date of Inspection: \_\_\_\_\_

Notes & Comments of RCIS:	_____ Regional Community Infrastructure Specialist
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**Triggers to conduct Joint Inspection for sub-projects:** When the sub-project accomplished almost 90% physical accomplishment (Particularly for Community Force Account Mode), the Technical Facilitator should advise the BSPMC to request for the Joint Inspection Team (JIT). In cases where in a particular municipality, more sub-projects reach the triggers, schedules of the JIT should be coordinated by the ACT with the communities.

## FINAL INSPECTION REPORT (for Rural Roads)

Department of Social Welfare and Development  
(Name of CDD Project/Program)

Name of sub-project: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Program Length: \_\_\_\_\_

Actual Length: \_\_\_\_\_

Funding Source: Loan Proceed: Php \_\_\_\_\_

Local Counterpart Contributions:

Community: Php \_\_\_\_\_

Municipal LGU: Php \_\_\_\_\_

Barangay LGU: Php \_\_\_\_\_

Others (Specify): Php \_\_\_\_\_

Mode of Implementation:

Force Account \_\_\_\_\_ Mixed (FA & by Contract) \_\_\_\_\_

By Contract \_\_\_\_\_

### SCOPE OF WORKS

Work Item /Description	Programmed Quantity Unit	Actual Quantity Unit	Explanatory Notes/Observations
Item 100 Clearing &Grubbing OK Rejected _____ _____	_____ sq.m	_____ sq.m	_____ _____ Line & design grade As to the design width (m)
Item 102.1 Road Excavation OK Rejected _____ _____	_____ cu.m	_____ cu.m	_____ _____ Line & design grade As to the design width (m)
Item 103 Structure Excavation OK Rejected _____ _____	_____ cu.m	_____ cu.m	_____ _____ Line & design grade
Item 104 Embankment OK Rejected _____ _____	_____ cu.m	_____ cu.m	_____ _____ Line & design grade Test results (FDT)
Item 105 Sub-Grade Preparation OK Rejected _____ _____ _____	_____ sq.m	_____ sq.m	_____ _____ Line & design grade As to the design width (m) Test results (FDT)
Item 200 Aggregate Sub-Base Course OK Rejected _____ _____ _____ _____	_____ cu.m	_____ cu.m	_____ _____ Line & design grade As to the design width (m) Test results (FDT) Test results (Grading)
Item 201 Aggregate Base Course OK Rejected	_____ cu.m	_____ cu.m	_____

_____	_____	Line & design grade	_____	_____
_____	_____	As to the design width (m)	_____	_____
_____	_____	Test results (FDT)	_____	_____
_____	_____	Test results (Grading)	_____	_____
Item 311 Portland Cement Concrete Pavement		_____ sq.m	_____ sq.m	_____
OK	Rejected			_____
_____	_____	Line & design grade	_____	_____
_____	_____	Test results (Grading)	_____	_____
_____	_____	Test results (Compression)	_____	_____
Item 404 Reinforcing Steel		_____ kgs	_____ kgs	_____
OK	Rejected			_____
_____	_____	Test results (Tensile stress)	_____	_____
Item 405 Structural Concrete		_____ cu.m	_____ cu.m	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s	_____	_____
_____	_____	As to the design dimensions of the RC structure	_____	_____
_____	_____	Test results (Design mixture)	_____	_____
_____	_____	Test results (Compression)	_____	_____
Item 500 Pipe Culverts & Storm Drains (dia)		_____ ln.m	_____ ln.m	_____
OK	Rejected			_____
_____	_____	Station Limits	_____	_____
_____	_____	Workmanship (mortar fill)	_____	_____
Item 505 Riprap & Grouted Riprap		_____ cu.m	_____ cu.m	_____
OK	Rejected			_____
_____	_____	Station Limits	_____	_____
_____	_____	Workmanship (mortar fill)	_____	_____
Item 509 Gabions		_____ cu.m	_____ cu.m	_____
OK	Rejected			_____
_____	_____	Station Limits	_____	_____
_____	_____	Workmanship	_____	_____

Note: Any deviations from the approved plans and POW must be supported with approved Variation Orders.

Remarks/Comments and Recommendations:

**Inspected by:**

\_\_\_\_\_  
Municipal Engineer/LGU Representative

\_\_\_\_\_  
Technical Facilitator

\_\_\_\_\_  
BSPMC-PIT Representative

\_\_\_\_\_  
Municipal Financial Analyst

\_\_\_\_\_  
BSPMC-Chairperson

\_\_\_\_\_  
Barangay Council Representative

**Noted by:**

\_\_\_\_\_  
Regional Community Infrastructure Specialist



## FINAL INSPECTION REPORT (for Post-Harvest Facilities)

Department of Social Welfare and Development  
(Name of CDD Project/Program)

Name of sub-project: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Program Dimension and Storey: \_\_\_\_\_

Actual Dimension and Storey: \_\_\_\_\_

Funding Source: Loan Proceed: Php \_\_\_\_\_

Local Counterpart Contributions:

Community: Php \_\_\_\_\_ Municipal LGU: Php \_\_\_\_\_

Barangay LGU: Php \_\_\_\_\_ Others (Specify): Php \_\_\_\_\_

Mode of Implementation:

Force Account \_\_\_\_\_ Mixed (FA & by Contract) \_\_\_\_\_

By Contract \_\_\_\_\_

### SCOPE OF WORKS

Work Item /Description	Programmed Quantity	Unit	Actual Quantity	Unit	Explanatory Notes/Observations
Item 1.0 Clearing	_____	sq.m	_____	sq.m	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
Item 2.1 Earthworks & Foundation	_____	cu.m	_____	cu.m	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
Item 3.0 Formworks/Scaffoldings	_____	bd.ft	_____	bd.ft	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
Item 3.1 Flooring	_____	cu.m	_____	cu.m	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
_____	_____	Finish (Workmanship)			_____
_____	_____	Test Results (Mixture)			_____
_____	_____	Test Results (Compression)			_____
Item 3.2 Columns	_____	cu.m	_____	cu.m	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
_____	_____	Finish (Workmanship)			_____
_____	_____	Test Results (Mixture)			_____
_____	_____	Test Results (Compression)			_____
Item 3.3 Beams	_____	cu.m	_____	cu.m	_____
OK	Rejected				_____
_____	_____	Design Specifications			_____
_____	_____	Finish (Workmanship)			_____
_____	_____	Test Results (Mixture)			_____
_____	_____	Test Results (Compression)			_____
Item 3.4 Reinforcing Steel	_____	kg	_____	kg	_____

OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Test Results (Tensile stress)	_____	_____
Item 4 CHB Wall		_____ sq.m	_____ sq.m	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
_____	_____	Test Results (Mixture)	_____	_____
Item 5 Carpentry		_____ bd.ft	_____ bd.ft	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 6 Roofing (G.I. Sheets)		_____ sq.m	_____ sq.m	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 7.1 Ceiling		_____ sq.m	_____ sq.m	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	(Clearance)	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 7.2 Air Vents		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 8.1 Lavatory		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 8.2 Water Closet		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 9.1 Doors		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 9.2 Windows		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 10.1 Lighting Fixtures		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 10.2 Outlets		_____ pcs	_____ pcs	_____
OK	Rejected			

_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 10.2 Utility Box			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 11 Painting			_____ sq.m	_____ sq.m	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 12.1 Furnitures (Chairs/Desk)			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 12.2 Furnitures (Tables)			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 12.3 Amenities (School Blackboard)			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 12.4 Amenities (Cabinets)			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____
Item 12.5 Other Amenities (Specify)			_____ pcs	_____ pcs	_____
OK	Rejected				_____
_____	_____	Design Specifications	_____	_____	_____
_____	_____	Finish (Workmanship)	_____	_____	_____

Note: Any deviations from the approved plans and POW must be supported with approved Variation Orders.

Remarks/Comments and Recommendations:

**Inspected by:**

\_\_\_\_\_  
Municipal Engineer/LGU Representative

\_\_\_\_\_  
Technical Facilitator

\_\_\_\_\_  
BSPMC-PIT Representative

\_\_\_\_\_  
Municipal Financial Analyst

\_\_\_\_\_  
BSPMC-Chairperson

\_\_\_\_\_  
Barangay Council Representative

**Noted by:**

\_\_\_\_\_  
Regional Community Infrastructure Specialist

## FINAL INSPECTION REPORT (for Water Supply)

Department of Social Welfare and Development  
(Name of CDD Project/Program)

Name of sub-project: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Physical Target: \_\_\_\_\_

# of HH served: \_\_\_\_\_

Funding Source: Loan Proceed: Php \_\_\_\_\_

Local Counterpart Contributions:

Community: Php \_\_\_\_\_

Municipal LGU: Php \_\_\_\_\_

Barangay LGU: Php \_\_\_\_\_

Others (Specify): Php \_\_\_\_\_

Mode of Implementation:

Force Account \_\_\_\_\_

Mixed (FA & by Contract) \_\_\_\_\_

By Contract \_\_\_\_\_

### SCOPE OF WORKS

Work Item /Description	Programmed Quantity	Unit	Actual Quantity	Unit	Explanatory Notes/Observations
Item 1600 Excavation (structure & trench)	_____	cu.m	_____	cu.m	_____
OK	Rejected				_____
_____	_____	Line & design grade			_____
_____	_____	As to the design width (m)			_____
Item 1602-A Installation of Pipeline (Transmission)					_____
1602.1 Steel/G.I. Pipe	_____	In.m	_____	In.m	_____
1602.4 PVC Polyvinyl Chloride Pipe	_____	In.m	_____	In.m	_____
1602.5 Polythelene (PE) Plastic Pipe	_____	In.m	_____	In.m	_____
OK	Rejected				_____
_____	_____	Line & design grade			_____
_____	_____	Station limits			_____
_____	_____	Fittings & appurtenances			_____
_____	_____	Expose pipes			_____
Item 1602-B Installation of Pipeline (Distribution)					_____
1602.1 Steel/G.I. Pipe	_____	In.m	_____	In.m	_____
1602.4 PVC Polyvinyl Chloride Pipe	_____	In.m	_____	In.m	_____
1602.5 Polythelene (PE) Plastic Pipe	_____	In.m	_____	In.m	_____
OK	Rejected				_____
_____	_____	Line & design grade			_____
_____	_____	Station limits			_____
_____	_____	Fittings & appurtenances			_____
_____	_____	Expose pipes			_____
Item 1603 Installation of Valves	_____	pcs	_____	pcs	_____
OK	Rejected				_____
_____	_____	Gate Valves (dia.)			_____
_____	_____	Globe Valves (dia.)			_____

_____	_____	Blow-off Valve (dia.)	_____	_____
_____	_____	Air release Valve (dia.)	_____	_____
Spl Item Intake Box		_____ cu.m	_____ cu.m	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s		_____
_____	_____	Structural Stability		_____
_____	_____	Test Results (Compression)		_____
Spl Item Construction of Water Reservoir (Dimension)		_____ cu.m	_____ cu.m	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s		_____
_____	_____	Structural Stability		_____
_____	_____	Test Results (Compression)		_____
Spl Item Well Development		_____ In.ft	_____ In.ft	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s		_____
_____	_____	Drilling Data		_____
Spl Item Installation of Pumping Facilities		_____ unit	_____ unit	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s		_____
_____	_____	Structural Stability		_____
_____	_____	Initial Operation		_____
Spl Item Tapstand/Communal Faucet		_____ unit	_____ unit	_____
OK	Rejected			_____
_____	_____	Workmanship of structure/s		_____
_____	_____	Structural Stability		_____
_____	_____	Safety of Water Meter		_____
_____	_____	Flow of Water		_____
_____	_____	Drainage System		_____

Note: Any deviations from the approved plans and POW must be supported with approved Variation Orders.

Remarks/Comments and Recommendations:

**Inspected by:**

\_\_\_\_\_  
Municipal Engineer/LGU Representative

\_\_\_\_\_  
Technical Facilitator

\_\_\_\_\_  
BSPMC-PIT Representative

\_\_\_\_\_  
Municipal Financial Analyst

\_\_\_\_\_  
BSPMC-Chairperson

\_\_\_\_\_  
Barangay Council Representative

**Noted by:**

\_\_\_\_\_  
Regional Community Infrastructure Specialist

## FINAL INSPECTION REPORT (for Buildings)

Department of Social Welfare and Development  
(Name of CDD Project/Program)

Name of sub-project: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Program Dimension and Storey: \_\_\_\_\_

Actual Dimension and Storey: \_\_\_\_\_

# of HH served: \_\_\_\_\_

Funding Source: Loan Proceed: Php \_\_\_\_\_

Local Counterpart Contributions:

Community: Php \_\_\_\_\_ Municipal LGU: Php \_\_\_\_\_

Barangay LGU: Php \_\_\_\_\_ Others (Specify): Php \_\_\_\_\_

Mode of Implementation:

Force Account \_\_\_\_\_ Mixed (FA & by Contract) \_\_\_\_\_

By Contract \_\_\_\_\_

### SCOPE OF WORKS

Work Item /Description	Programmed Quantity Unit	Actual Quantity Unit	Explanatory Notes/Observations
Item 1.0 Design Specifications OK Rejected _____ _____	_____ sq.m	_____ sq.m	_____ _____ Design Specifications
Item 2.1 Earthworks and Foundation OK Rejected _____ _____	_____ cu.m	_____ cu.m	_____ _____ Design Specifications
Item 3.0 Formworks/Scaffoldings OK Rejected _____ _____	_____ bd.ft	_____ bd.ft	_____ _____ Design Specifications
Item 3.1 Flooring OK Rejected _____ _____ _____ _____	_____ cu.m	_____ cu.m	_____ _____ Design Specifications Finish (Workmanship) Test Results (Mixture) Test Results (Compression)
Item 3.2 Columns OK Rejected _____ _____ _____ _____	_____ cu.m	_____ cu.m	_____ _____ Design Specifications Finish (Workmanship) Test Results (Mixture) Test Results (Compression)
Item 3.2 Beams OK Rejected _____ _____ _____ _____	_____ cu.m	_____ cu.m	_____ _____ Design Specifications Finish (Workmanship) Test Results (Mixture) Test Results (Compression)

Item 3.4 Reinforcing Steel	_____ kg.	_____ kg.	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Test Results (Tensile stress)	_____
Item 4 CHB Wall	_____ sq.m	_____ sq.m	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
_____	_____	Test Results (Mixture)	_____
Item 5 Carpentry	_____ bd.ft	_____ bd.ft	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 6 Roofing (G.I. Sheets)	_____ sq.m	_____ sq.m	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 7.1 Ceiling	_____ sq.m	_____ sq.m	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 7.2 Air Vents	_____ pcs.	_____ pcs.	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 8.1 Lavatory	_____ pcs	_____ pcs	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 8.2 Water Closet	_____ pcs	_____ pcs	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 9.1 Doors	_____ pcs	_____ pcs	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 9.2 Windows	_____ pcs	_____ pcs	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 10.1 Lighting Fixtures	_____ pcs	_____ pcs	_____
OK	Rejected		_____
_____	_____	Design Specifications	_____
_____	_____	Finish (Workmanship)	_____
Item 10.2 Outlets	_____ pcs	_____ pcs	_____

OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 10.2 Utility Box		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 11 Painting		_____ sq.m	_____ sq.m	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 12.1 Furnitures (Chairs/Desk)		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 12.2 Furnitures (Tables)		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 12.3 Amenities (Writing Board)		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 12.4 Amenities (Cabinets)		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____
Item 12.5 Other Amenities (Specify)		_____ pcs	_____ pcs	_____
OK	Rejected			
_____	_____	Design Specifications	_____	_____
_____	_____	Finish (Workmanship)	_____	_____

*Note: Any deviations from the approved plans and POW must be supported with approved Variation Orders.*

Remarks/Comments and Recommendations:

**Inspected by:**

\_\_\_\_\_  
Municipal Engineer/LGU Representative

\_\_\_\_\_  
Technical Facilitator

\_\_\_\_\_  
BSPMC-PIT Representative

\_\_\_\_\_  
Municipal Financial Analyst

\_\_\_\_\_  
BSPMC-Chairperson

\_\_\_\_\_  
Barangay Council Representative

**Noted by:**

\_\_\_\_\_  
Regional Community Infrastructure Specialist



## SAMPLE OF TARIFF DERIVATION (for PWS Level II Pump-Driven)

Brgy. \_\_\_\_\_, Municipality of \_\_\_\_\_

**Procedures:**

**I. Determine the monthly consumption**

- A. determine the total number of consumers (HH fetching water at the system)
  - i. Number of HH x average number of people/HH x factor for projected population
    - = 109 HH x 6 x 1.15 (projected growth rate of 3% for 5 years)
    - = 752 persons
  - ii. Compute for the daily demand
    - = 752 persons x 100 lpcd (anticipate level III consumption rate)
    - = 75,200 liters/day
    - = 75.20 cu.m/day
  - iii. Compute the monthly consumption in cu.m/month
    - = 75.20 cu.m/day x 30 days/month
    - = 2,256 cu.m/month

**II. Determine the agreed operating expenses**

Power consumption and cost derivations:

<u>Budget Item</u>	<u>Factors and derivation</u>
i. total consumption	= 2,256 cu.m/month
ii. Pump model (CR 5-8 w/ 5.7 cu.m/hr capacity)	= 2,256 cu.m/month /5.7 cu.m/hr
total	= 395.79 hrs/month
III. total KW hr/month	= (3 HP x 0.746 kw/hp) x 395.79 hrs
Total	= 885.78 KW-hr / month
iv. prevailing power rates	= Php6.55 KW-hr (depends on the locality)
v. estimated electric bill/month	= Php5,801.86 / month

Operating and administrative costs:

<u>Budget Item</u>	<u>Budgetary Requirement</u>
i. Maintenance crew/Caretaker	= P1,000.00 / month
ii. Meter reader	= P 500.00 / month
iii. Treasurer	= P 500.00 / month
iv. Office supplies	= P 200.00 / month
v. Repair & Maintenance (25%)	= P1, 250.00 / month
vi. Electrical bill	= P5,801.86 / month
Total	= P9,251.86 / month

## Determine the depreciation cost (Material cost)

A. Compute depreciation cost of system. Assume cost at P100,000 (e.g. pump, pipes) <sup>1</sup>

BUDGET ITEMS	1ST YR (IR .1%)	2ND YR (IR .2%)	3RD YR (IR .3%)	4TH YR (IR .4%)	5TH YR (IR .5%)
Annual Water Consumption in cu.m.	27,072	27,072	27,072	27,072	27,072
Annual Material Depreciation Cost (100,000.00) MC	110,000	120,000	130,000	140,000	150,000
Dep. Cost per cu.m.	4.06	4.43	4.80	5.17	5.54
Average depreciation cost per cu.m.					4.80

### III. Compute for Tariff:

Compute the annual water consumption in cu.m:

$$\begin{aligned} \text{Monthly consumption} \times 12 &= 2,256 \times 12 ; \\ &= 27,072 \text{ cu.m} \end{aligned}$$

Compute annual operating cost per cu.m:

$$\begin{aligned} \text{P9,251.86 / month} \times 12 &= \text{P111,022.32} \\ \text{Divide annual consumption} &= \text{P111,022.32} / 27,072 \\ &= \text{P4.10 / cu.m} \end{aligned}$$

$$\begin{aligned} \text{Depreciation cost per cu.m:} &= \text{P4.80 / cu.m} \\ \text{Add all costs per cu.m} &= \text{P4.10} + 4.80 \\ &= \text{P8.90} \end{aligned}$$

Add 10% revenue (as may agree by the Association)

$$8.90 \times 0.10 = \text{P.89}$$

$$\begin{aligned} \text{Add all costs} &= \text{P8.90} + 0.89 \\ &= \text{P9.79} \\ &= \text{say Php10.00 per cu.m} \end{aligned}$$

Antiquity

For purposes of presentation and easy calculation, P100,000 was used as an investment cost.

<sup>1</sup>For purposes of presentation and easy calculation, P100,000 was used as an investment cost.

Republic of the Philippines  
**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
 (Name of CDD Project/Program)  
 OFFICE OF THE BSPMC CHAIRPERSON

**CERTIFICATE OF COMPLETION AND ACCEPTANCE**

*To Whom It May Concern:*

THIS IS TO CERTIFY that the following Sub-Project has been 100% satisfactorily completed in accordance with the approved plans and specifications:

Name of Sub-Project:	
Address: GPS Coordinates:	
Project Category:	
Physical Measurement:	
Mode of Implementation:	

We hereby CERTIFY to have accepted each and every item accomplishment by (name of contractor) for the contract dated \_\_\_\_\_, which have been inspected and were found to be in accordance with the plans and specification of the contract.

This certification is issued for whatever legal purpose it may serve best.

Done this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at Barangay \_\_\_\_\_, \_\_\_\_\_.

**Certified by the INSPECTORATE TEAM:**

_____ PIT Chairperson	_____ C/Municipal Engineer	_____ C/Municipal-TF
_____ C/MIT Chairperson	_____ Financial Analyst-C/MCT	_____ Technical Facilitator
_____ BSPMC Chairperson	_____ Area Coordinator	<b>Accepted by:</b>

\_\_\_\_\_  
Barangay/PIMC Chairperson

## SUB-PROJECT COMPLETION REPORT

### A. General Information:

Name of sub-project: Sub-Project ID:			
Sub-project category:		Target Physical Accomplishment:	
		Actual Physical Accomplishment:	
Barangay/s covered:		Estimated Total Cost (MIBF Approved):	
		Actual Total Cost:	
Municipality & Class		Total Grant Received:	
Province:		Total Counterpart Delivered:	
Date of MIBF-CSW:		Actual Total Direct Cost:	
Date of MIBF-Prioritization:		Actual Total Indirect Cost:	
Total no. of HH served by the Sub-Project:		Date Started:	
Total no. of Families served by the Sub-Project:		Date Completed:	
No. of Pantawid HH Beneficiaries served by the Sub-Project:		Date of Inauguration:	
No. of Pantawid Families served by the Sub-Project:			
Total Population in the barangay:	Male _____ Female _____	No. of SLP HH Beneficiaries served by the Sub-Project:	
Total Population served by the sub-project:	Male _____ Female _____	No. of SLP Families served by the Sub-Project:	
Total IP Families served by the sub-project	Male _____ Female _____	Total IP HH served by the Sub-Project:	

### B. Sub-project Description:

The sub-project is completed with the following work items and activities constructed/implemented by the concerned community/ies. (insert additional rows if needed)

Item of Works	Quantity	Unit	Unit Cost	Total
1.				
2.				
3.				
4.				
5.				
6.				
Indirect Cost				
<b>Total Project Cost</b>				

**C. Method of sub-project implementation:**

- c.1 Procurement mode and procedures used in the sub-project implementation.
- c.2 Please state the major problems encountered during implementation and actions taken by the ACT and the community volunteers/leaders to solve the issues.

**D. Labor Generated:** (labor provided & paid during the construction period)

Particular	Number	Person Days	Rate/Day	Total Amount Paid
Foreman/Project Supervisor (men)				
Skilled (men)				
Skilled (women)				
Foreman/Project Supervisor (women)				
Unskilled (men)				
Unskilled (women)				
<b>TOTAL PAID LABOR</b>				

**E. Project Benefits:** Highlight the initial impact provided by the sub-project to the covered community/ies.

*e.1 Condition of the community before the Project intervention (How long were you deprived of the service? How costly was it to access the service? How far?)*

*e.2 Condition of the community after the sub-project completion.*

**F. Environmental Aspect:** Discuss any environmental impacts during the construction and the mitigating measure provided by the community. (refer to the Environmental Management Plan, EMP Reports)

**G. Capability Building Impact:** What were the trainings provided by the project to the community and the result observed.

**H. Community Volunteers:** In recognition of the community volunteers who in one way or another made the sub-project possible, list their names and the corresponding team they were involved.

Name of community volunteers	Sitio/Barangay	Designation/Team
1.		PPT
2.		BRT
3.		BAC
4.		AIT
5.		O&M
6.		PT
7.		PIT
8.		MIT
9.		BSPMC
10.		

**I. General Assessment:**

**I.1. Cost Effectiveness:** Actual overall cost compared to similar Project in the locality. Indicate cost of similar project constructed by the agency. What % (Higher/Lower) compared to KC-NCDDP completed SP? Indicate also the Cost per Population served.

<p><b>I.2. Plan vs. Actual:</b> Did the SP incurred overrun or savings? By how much? If savings incurred, how was it utilized?</p>	
<p><b>I.3. Financial Aspect:</b> On-time releases of KC-NCDDP Grant (On the average, how many days did it take from the ACT receipt of community requests to the date of fund release to the community account? List contributing factor of the case.</p>	
<p><b>I.4. Participation:</b> On the average, How many household representatives participated in deliberations of the Sub-project and its endorsement to the Municipal Inter-Barangay Forum?</p>	
<p><b>I.5. Governance:</b></p>	
<p>a. LCC as % to total</p>	
<p>b. Was LCC on time?</p>	
<p>a. Commitment vs. deliveries/fulfillment of all LCC Commitments</p>	
<p>b. Supporting ordinances for O&amp;M activities</p>	
<p>c. Technical Assistance provided by the LGU? (Such as, during planning and implementation)</p>	
<p>d. Commitment of Local Government Units for O&amp;M. (Please attach O&amp;M Partnership agreement)</p>	
<p><b>I.6. Multi-Stakeholdership:</b> Name other organizations, agencies and individuals that provided contributions to the Sub-project. Please indicate amount cash and in-kind.</p>	
<p><b>I.7. External Monitoring:</b> (Name external monitors that visited the Sub-project)</p>	
<p>a. WB missions _____ Date/s _____</p>	
<p>b. NGO members _____ Date/s _____</p>	
<p>c. Others, specify _____ Date/s _____</p>	
<p><b>I.8.</b> If there was any Grievance/Complaint that arose during implementation, how was it resolved?</p>	
<p><b>J. Lessons Learned:</b> Please share any lesson/s and good practice/s learned from your implementation of the Sub-project and the KC-NCDDP in general.</p>	
<p>Prepared by:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">BSPMC Chairperson</p> <p>Date: _____</p>	<p>Certified by:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Barangay Chairperson</p> <p>Date: _____</p>

**VERIFICATION/CONFIRMATION:**

1. Project Signboard Updating and Reporting

a. Billboard:

Yes \_\_\_\_

No \_\_\_\_

b. Statement of expenditures posted in community board?

Yes \_\_\_\_

No \_\_\_\_

c. Expenditures reported to Barangay Assembly?

Yes \_\_\_\_

No \_\_\_\_

Name/Signature, CEF

2. Did community meet basic financial reporting standard in FM & A manual?

Yes \_\_\_\_

No \_\_\_\_

Name/Signature, MFA

3. Did the community implemented the Sub-project as per approved technical plans & specifications?

Yes \_\_\_\_ No \_\_\_\_

Was it within the budget?

Yes \_\_\_\_

No \_\_\_\_

Name/Signature, TF

Noted by:

\_\_\_\_\_  
Area Coordinator

To be submitted together with;

- a. Site Validation Report
- b. Final Inspection Report
- c. Sub-Project Concept
- d. Mutual Partnership Agreement

# MUTUAL PARTNERSHIP AGREEMENT<sup>1</sup>

For the Operation and Maintenance of (Name of Subproject)

## KNOW ALL MEN BY THESE PRESENT:

This Agreement, made and executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_, Philippines by and between:

**The Department of Social Welfare and Development – Field Office** \_\_\_\_\_, a National Government Agency of the Republic of the Philippines, with principal address at the \_\_\_\_\_, represented by its Regional Director, (name of Regional Director), herein referred to as the “**DSWD**”;

**The Local Government Unit of** \_\_\_\_\_, a unit of the Government of the Republic of the Philippines, with principal address at the municipality of \_\_\_\_\_, province of \_\_\_\_\_, represented by its Municipal Mayor, (name of the Municipal Mayor), herein referred to as “**MLGU**”;

**The Local Government Unit of Barangay** \_\_\_\_\_, a unit of the Government of the Philippines in the municipality of \_\_\_\_\_, represented by its Barangay Chairperson, (name of Brqy. Chairperson), herein referred to as “**BLGU**”;

**The (name of Community Association)**, a duly recognized, accredited or registered organization with the (name of agency) with Registration No. \_\_\_\_\_, with principal address at \_\_\_\_\_, municipality of \_\_\_\_\_, established to operate and maintain the completed (name of the subproject) in Barangay \_\_\_\_\_, municipality of \_\_\_\_\_, represented by its Chairperson/President, (name of President), herein referred to as “**Association**”;

-and-

The (name of other stakeholders (NGOs or GOs)) with their office address and their Head of offices.

## WITNESSETH THAT:

**WHEREAS**, the DSWD through the KALAHI CIDSS-NCDDP, funded the priority subprojects of communities during the Municipal Inter-Barangay Forum *(or Municipal Forum for DROM areas)*;

**WHEREAS**, the community, with the leadership of the Barangay Subproject Management Committee (BSPMC) and the assistance provided by the Barangay and Municipal local government units and other stakeholders, satisfactorily completed their subproject entitled (name of sub-project);

**WHEREAS**, the community, municipal and barangay LGUs and other stakeholders (if applicable) shall share the operation and maintenance responsibilities to sustain the delivery of services provided by the completed subproject through proper and timely operation and maintenance activities;

**WHEREAS**, attendant costs related to the performance of O&M responsibilities shall be shouldered by the respective stakeholder, and reflected in their Development and/or Investment Plans;

**WHEREAS**, the BLGU shall primarily be responsible and accountable in ensuring that O&M activities are implemented as planned.

**NOW, THEREFORE**, for and in consideration of the foregoing premises, the PARTIES do hereby mutually agree and bind themselves as follows:

<sup>1</sup> Actual parties to the MPA will depend on those with actual commitments/roles in the O&M of completed subproject.



## ARTICLE I. ROLES AND RESPONSIBILITIES

### 1. Responsibilities of the DSWD

- a. Monitor and ensure the conduct of Sub-project Sustainability Evaluation using the Program's sustainability evaluation tool based on schedule until CY 2019, or until there is KC-NCDDP presence in the municipality or barangay.

### 2. Responsibilities of the Municipal Local Government Unit

- a. Deputize the (name of Community Association) to undertake the Operation and Maintenance of the (name of subproject);
- b. Accredit the Community Association, which will sit in the Municipal Development Council - \_\_\_\_\_ Committee;
- c. Provide technical, administrative and management assistance in the implementation of O&M activities;
- d. Ensure the conduct of regular monitoring by the BLGU on the implementation of the O&M activities as indicated in the O&M Plan prepared by the community association;
- e. Enact ordinance to support the efficient and effective O&M of the completed subproject;
- f. Pursuant to Item I of the Subproject Agreement, the MLGU shall allocate funds exclusively for the operation and maintenance of the completed subproject. Said funds may be used for major repairs and support to minor repairs of the subproject;
- g. Ensure that yearly allocation of O&M funds is reflected in their Municipal Development Plan (MDP) upon final acceptance of the subproject;
- h. Provide technical assistance in the formulation of O&M policies by the Community Association and ensure compliance by the Community Association of the same;
- i. Provide capacity building interventions to the Community Association to ensure the proper implementation of O&M activities, in coordination with other relevant agencies/organizations.
- j. Organize the Multi-Stakeholders Inspectorate Team (MSIT) and mobilize them to conduct subproject sustainability evaluation;
- k. Institutionalize the conduct of sustainability evaluation using NCDDP Sustainability Evaluation Tool based on schedule;
- l. Where applicable, provide continued support to the BLGU and Community to ensure that land annotation for donated lot is completed; and
- m. Booking of assets (For discussion with COA).

### 3. Responsibilities of the Barangay Local Government Unit

- a. Deputize the (name of Community Association) to undertake the Operation and Maintenance of the (name of subproject);
- b. Accredit the Community Association, which will sit in the Barangay Development Council - \_\_\_\_\_ Committee;
- c. Provide technical assistance to the community association in the preparation of the O&M Plan;
- d. Provide technical, administrative and management assistance in the implementation of O&M activities;
- e. Monitor and ensure the proper implementation by the community association of the O&M activities as indicated in the O&M Plan;
- f. Enact ordinance to support the efficient and effective O&M of the completed subproject;
- g. Allocate funds exclusively for the operation and maintenance of completed subproject, to be reflected in the Barangay Annual Investment Plan. Said funds may be used for routine and periodic O&M activities of the completed subproject;
- h. Provide capacity building interventions to the Community Association to ensure the proper implementation of O&M activities, in coordination with relevant agencies/organizations;
- i. Where applicable, provide continued support to the Community to ensure that land annotation for donated lot is completed; and
- j. Booking of assets (for discussion with COA)

### 4. Responsibilities of the Community Association

- a. Seek accreditation and representation in the Barangay and Municipal Development Councils to better represent the community in planning and resource allocation for development;
- b. Prepare and implement an Annual Operation and Maintenance Plan for the completed subproject, in consultation and coordination with all stakeholders and beneficiaries, and ensure the implementation of the same;
- c. Establish mechanisms (e.g., tariff collection) to fully assist in the sustainable conduct of O&M through legislations from the Barangay and Municipal Councils;
- d. Establish networks and coordination mechanisms with different agencies and sectoral bodies on relevant technical, administrative and operational materials regarding O&M, including resource mobilization for O&M activities and expansion of services;
- e. Attend capability building interventions to be provided by the DSWD, LGUs and other relevant agencies/organizations;
- f. Ensure that members and officers abide with the policies, by-laws, as well as applicable statutes of the Republic of the Philippines and the local ordinances legislated by the LGU;

- g. Where applicable, apply for land annotation of donated lot, and seek BLGU and MLGU assistance in ensuring that land annotation is completed; and
- h. Submit regular financial and physical performance reports to the municipal and barangay LGU on the implementation of O&M activities.

**5. Responsibilities of Other stakeholders (e.g. NGO, School or Health Board)**  
*(indicate agreed responsibilities of stakeholders, if applicable)*

**ARTICLE II. OTHER PROVISIONS**

1. By mutual consent, this Agreement or any part thereof may be changed, modified, revised and amended or supplemented for the purpose of effective implementation and quality and sustainable O&M;
2. Provided however, that the modifications or revisions are in conformity to the general practices of KALAHI CIDSS-NCDDP Operation and Maintenance, and that all provisions of the Subproject Agreement for the implementation of the subproject are still met.
3. DSWD, through Field Office \_\_\_\_, shall conduct a review prior to the effectivity of such amendments.
4. DSWD, through Field Office \_\_\_\_, shall take part in the sustainability evaluation of completed subproject as part of the Department’s monitoring and evaluation activities.

**ARTICLE III. EFFECTIVITY**

This Agreement shall take effect upon signing of the Parties concerned and enforceable for as long as there is DSWD presence in the municipality or barangay.

**IN WITNESS THEREOF**, the parties, through their duly authorized representatives, have hereunto entered into this Agreement and affixed their signatures on the date and place herein above-mentioned.

\_\_\_\_\_  
 DSWD-Regional Director

\_\_\_\_\_  
 Municipal Mayor

\_\_\_\_\_  
 Barangay Chairperson

\_\_\_\_\_  
 Community Association President

\_\_\_\_\_  
 Representative of other Stakeholders

Witnesses:

\_\_\_\_\_  
 MPDO

\_\_\_\_\_  
 LPRAO-Designate

\_\_\_\_\_  
 MSWDO

**ACKNOWLEDGEMENT**

Republic of the Philippines        )  
  ) S.S.

BEFORE me, a NOTARY PUBLIC for and in this day of \_\_\_\_\_20\_\_\_, personally appeared before me

Name	Community Tax Certificate No.	Date Issued	Place Issued
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Known to me to be the same persons who executed the foregoing instrument consisting of \_\_\_ pages, including this page wherein this acknowledgement is written, signed by the parties and their instrumental witnesses, which instrument they acknowledge to be their free and voluntary act and deed, as well as that of the juridical persons which they represent.

**IN WITNESS WHEREOF**, I have hereunto affixed my notarial seal and signature this \_\_\_\_\_ day of \_\_\_\_\_201\_\_ at \_\_\_\_\_.

Doc No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of 201\_\_



Department of Social Welfare and Development  
Name of CDD Project/Program

**COMMUNITY OPERATION AND MAINTENANCE/PROJECT IMPLEMENTATION PROGRAM<sup>10</sup>**

CY \_\_\_\_\_

Name of Sub-project: \_\_\_\_\_

Barangay: \_\_\_\_\_

Municipality/Province: \_\_\_\_\_

**A. Organizational and Financial Aspects**

ASPECTS	CAPABILITY BUILDING ACTION PLAN/ ACTIVITIES	SCHEDULE	RESPONSIBLE PERSON/UNIT	BUDGET	FUND SOURCE
Organizational Aspect/ Management					
Financial					

<sup>10</sup> To include non-infrastructure subprojects, Common Service Facilities, Warehouse and similar projects



## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Box Culvert Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year<sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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2) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility <sup>4</sup> ? ___ Yes ___ No  What are these instances?  _____ _____																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<sup>4</sup> Example: A vehicle exceeding load limit/tonnage was prohibited to cross the box culvert

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
What is the decision of the O&M group to address these issue/s? _____ _____	
3) List down the top three benefits derived from the completed project <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
4) What are the planned uses of the sub-project? <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____  Are these being met? ____ Yes ____ No If No, why? _____ _____	
5) Does the O&M group have plans for improvement or construction of additional structures? ____ Yes ____ No What are the plans? <input type="checkbox"/> _____ <input type="checkbox"/> _____	
6) Has the project produced new problems for the community/barangay? ____ Yes ____ No If yes, write down (by order of importance) the top three problems that project has produced. <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>For “Yes” answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2) O&amp;M Group is functional</p> <p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
2) O&M Group is able to access support from partners referred to in No. 1  If yes, what support were accessed? Please check all applicable answers. <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i>			
3) Accessed support are sufficient			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

<b>Box Culverts (Structural)</b>		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> O&amp;M group maintains the facility</li> </ul>		
2) Maintenance Tools/equipment		

<input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Main structure <input type="checkbox"/> Structural stability; cracks on structures <input type="checkbox"/> Condition of top, sides and bottom slab <input type="checkbox"/> Vandalism <input type="checkbox"/> Deflections and deformations		
2) Inlet <input type="checkbox"/> Accessibility of flow <input type="checkbox"/> Condition of apron, scouring <input type="checkbox"/> Wing walls, dissipaters <input type="checkbox"/> Siltation		
3) Environmental sanitation <input type="checkbox"/> Observed cleanliness		
4) Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
5) Other Structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING (Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries

- Serves target beneficiaries
- Serves less than the target beneficiaries
- Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:

---



---

- The following areas/structures need to be addressed/improved:

---



---

- The following factors contributed to subproject functionality and sustainability:

---



---

**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

---

O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

---

SB Representative

---

ACT Representative

---

Mayor's Office Representative

---

RPMT Representative (if available)

---

MSIT Team Leader (MPDC/ME)

---

NPMO Representative (if available)

---

## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For RCDG Bridge Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
<b>GRANT:</b>	<b>GRANT:</b>
<b>LCC:</b>	<b>LCC:</b>
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year<sup>1</sup>:</b>	

<b>A. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<sup>4</sup> Example: A vehicle exceeding load limit/tonnage was prohibited to cross the bridge

A. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>What is the decision of the O&amp;M group to address these issue/s?</p> <p>_____</p> <p>_____</p>	
<p>3) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>4) What are the planned uses of the subproject?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p>Are these being met? ___ Yes ___ No</p> <p>If No, why? _____</p> <p>_____</p>	
<p>5) What types of vehicles are supposed to use the bridge?</p> <p>_____</p> <p>What types of vehicles are actually using the bridge?</p> <p>_____</p> <p>Is the bridge passable during dry and rainy seasons? ___ Yes ___ No</p> <p>If no, explain why.</p> <p>_____</p> <p>_____</p>	
<p>6) Does the O&amp;M group have plans for improvements? ___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>7) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b></p> <p><b>(SP Utilization – 15%)</b></p>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For "Yes" answer, the following should be met: <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members               <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
2) O&M Group is functional  The O&M Group should meet majority of the following indicators to warrant a "Yes" answer: <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b>			
<b>III. INSTITUTIONAL LINKAGE</b>			
1) O&M group is able to establish linkages with other organizations or institutions for support  Established linkages are: <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><b>Note:</b> Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</p>			
2) O&M Group is able to access support from partners referred to in No. 1			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
3) Accessed support are sufficient			
<b>OVERALL NUMERICAL RATING</b> (Institutional Linkage – 10%)			
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> (Finance Component – 15%)			

RCDG Bridge		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> O&amp;M group maintains the subproject</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		



<b>B. SUB-PROJECT STRUCTURES</b>		
1) Sub-Structures <input type="checkbox"/> Pier <input type="checkbox"/> Waterway Upstream and down stream		
2) Slope Protection <input type="checkbox"/> Slope Surface <input type="checkbox"/> Stability of foundation <input type="checkbox"/> Abutment Support structures		
3) Super Structures <input type="checkbox"/> Surface <input type="checkbox"/> Condition of abutment		
4) Road carriage-way & Side walk <input type="checkbox"/> Carriageway Surface <input type="checkbox"/> Condition of asphalt sealer		
5) Railings <input type="checkbox"/> Condition of Railing, cracks, scaling <input type="checkbox"/> Condition of painting		
6) Sign Boards <input type="checkbox"/> Visibility of Bridge sign <input type="checkbox"/> Visibility of bridge policies		
7) Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries

- Serves target beneficiaries
- Serves less than the target beneficiaries
- Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

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BLGU Representative

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MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Day Care Center Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>					
<b>Physical Description:</b>					
<b>Location:</b>			<b>Date of Completion:</b>		
<b>Mode of Implementation:</b>					
<b>Approved cost:</b>			<b>Actual Construction cost:</b>		
GRANT:			GRANT:		
LCC:			LCC:		
<b>Last Sustainability Evaluation Rating:</b>			<b>Date Conducted:</b>		
<b>O&amp;M Group Managing the Subproject:</b>					
<b>O&amp;M Allocation per year<sup>1</sup>:</b>					
<b>I. SP UTILIZATION</b>					<b>Degree of Responsiveness<sup>2</sup></b>
1) Number of beneficiaries					
Type of Beneficiaries	Planned		Actual		Explanation of Variance
	Male/ Male-headed	Female/ Female-headed	Male/ Male-headed	Female/ Female-headed	
Population					
Households (total)					
Families (total) <sup>3</sup>					
Pantawid HHs					
Pantawid Families					
IP HHs					
IP Families					
2) Number of sessions per day					
<input type="checkbox"/> Actual _____ <input type="checkbox"/> Planned _____					
In case planned vs. actual number do not match, explain why.					
_____					
_____					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<p>3) There is a regular teacher Yes ____ No ____ If No, why? _____ _____</p> <p>4) The following amenities are available (please check):</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Tables</li> <li><input type="checkbox"/> Chairs</li> <li><input type="checkbox"/> Shelves</li> <li><input type="checkbox"/> Playhouse</li> <li><input type="checkbox"/> Others (please specify) _____</li> </ul> <p>If No, why? _____ _____</p> <p>What amenities are needed? _____</p> <p>Why were these not included in the design? _____ _____</p>	
<p>5) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ___ Yes ___ No</p> <p>What are these instances? _____ _____</p> <p>What is the decision of the O&amp;M group to address these issue/s? _____ _____</p>	
<p>6) List down the top three benefits derived from the completed project</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	
<p>7) Does the O&amp;M group have plans for expansion/improvement/construction of additional structures? ___ Yes ___ No</p> <p>What are the plans?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	

<sup>4</sup> Example: A child exceeding the age of day care pupils was not accepted as enrollee

<p>8) Has the project produced new problems for the community/barangay? __ Yes __ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b></p>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks <sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1) O&amp;M organization formed and registered and/or accredited</p> <p>For “Yes” answer, the following should be met:</p> <p><input type="checkbox"/> Record/minutes of formation and BA approval</p> <p><input type="checkbox"/> List of Officers and members</p> <p style="padding-left: 20px;"><input type="checkbox"/> Record of election/installation</p> <p style="padding-left: 20px;"><input type="checkbox"/> Posted in the office</p> <p><input type="checkbox"/> Proof/copy of registration or accreditation</p> <p><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</p>			
<p>2) O&amp;M Group is functional</p> <p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <p><input type="checkbox"/> O&amp;M group holds regular meeting</p> <p><input type="checkbox"/> O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</p> <p><input type="checkbox"/> O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</p> <p><input type="checkbox"/> O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>III. INSTITUTIONAL LINKAGE</b>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><b>Note:</b> <i>Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><b>Note:</b> <i>Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b> (Institutional Linkage – 10%)</p>			
<b>IV. FINANCIAL COMPONENT</b>			
<p>1) Funds allocated for O&amp;M</p>			
<p>2) Sufficiency of allocated funds</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> (Finance Component – 15%)</p>			

V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> O&amp;M group maintains the subproject</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Building Structures		
a. Columns, Beams, walls <ul style="list-style-type: none"> <li><input type="checkbox"/> Structural stability; cracks on structures</li> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Vandalism</li> <li><input type="checkbox"/> Deflections and deformations</li> </ul>		
b. Doors and Windows <ul style="list-style-type: none"> <li><input type="checkbox"/> Functionality/appearance of door knobs;</li> <li><input type="checkbox"/> Conditions of doors &amp; Jambs, fittings</li> <li><input type="checkbox"/> Condition of window frames, panels, hinges, locks</li> <li><input type="checkbox"/> Paintings</li> </ul>		
c. Roofing <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of roofing panels</li> <li><input type="checkbox"/> Gutters, ridge rolls</li> <li><input type="checkbox"/> Deformations</li> </ul>		
d. Ceiling <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of ceiling panels</li> <li><input type="checkbox"/> Deformations</li> <li><input type="checkbox"/> Stability of joist and hangers</li> </ul>		
e. Electrical System <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Power Supply</li> <li><input type="checkbox"/> Serviceability of Lights</li> <li><input type="checkbox"/> Condition of Switches and outlets</li> <li><input type="checkbox"/> Safe electrical wiring system</li> </ul>		
f. Plumbing and sanitation <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Potable water supply</li> </ul>		

<input type="checkbox"/> Condition of lavatory and pantry <input type="checkbox"/> Condition of comfort room <input type="checkbox"/> Condition of water pipes and drain pipes		
g. Amenities <input type="checkbox"/> Condition of chairs <input type="checkbox"/> Condition of tables/desks <input type="checkbox"/> Condition of writing boards <input type="checkbox"/> Condition of play pen and others		
h. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
i. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:

\_\_\_\_\_

\_\_\_\_\_



- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

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BLGU Representative

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MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Drainage Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>					
<b>Physical Description:</b>					
<b>Location:</b>			<b>Date of Completion:</b>		
<b>Mode of Implementation:</b>					
<b>Approved cost:</b>			<b>Actual Construction cost:</b>		
GRANT:			GRANT:		
LCC:			LCC:		
<b>Last Sustainability Evaluation Rating:</b>			<b>Date Conducted:</b>		
<b>O&amp;M Group Managing the Subproject:</b>					
<b>O&amp;M Allocation per year <sup>1</sup>:</b>					
<b>I. SP UTILIZATION</b>					<b>Degree of Responsiveness<sup>2</sup></b>
1) Number of beneficiaries					
Type of Beneficiaries	Planned		Actual		Explanation of Variance
	Male/ Male-headed	Female/ Female-headed	Male/ Male-headed	Female/ Female-headed	
Population					
Households (total)					
Families (total) <sup>3</sup>					
Pantawid HHs					
Pantawid Families					
IP HHs					
IP Families					
2) List down the top three benefits derived from the completed project					
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____					
3) What are the planned uses of the subproject?					
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____  Are these being met? ____ Yes ____ No					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

If No, why? _____ _____	
4) Does the O&M group have plans for improvement or construction of additional structures? ____ Yes ____ No What are the plans? <input type="checkbox"/> _____ <input type="checkbox"/> _____	
5) Has the project produced new problems for the community/barangay? ____ Yes ____ No If yes, write down (by order of importance) the top three problems that project has produced. <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>4</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited For “Yes” answer, the following should be met: <input type="checkbox"/> Record/minutes of formation and BA approval <input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> <input type="checkbox"/> Proof/copy of registration or accreditation <input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly			
2) O&M Group is functional			

<sup>4</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

<p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management –20%)</b></p>			
<p style="text-align: center;"><b>Key Areas</b></p>	<p style="text-align: center;"><b>Yes or No</b></p>	<p style="text-align: center;"><b>Degree of Responsiveness / Impact</b></p>	<p style="text-align: center;"><b>Remarks<sup>5</sup></b></p>
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

<b>OVERALL NUMERICAL RATING</b> (Institutional Linkage – 10%)			
<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks<sup>6</sup></b>
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <input type="checkbox"/> Below O&M requirement <input type="checkbox"/> Equal to O&M requirement <input type="checkbox"/> More than O&M requirement			
<b>OVERALL NUMERICAL RATING</b> (Finance Component – 15%)			

<b>Drainage (CHB, Stone Masonry)</b>		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <input type="checkbox"/> Implementation of planned activities <input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> O&M group maintains the facility		
2) Maintenance Tools/equipment <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Main structure <input type="checkbox"/> Structural stability; cracks on walls and flooring <input type="checkbox"/> Cracks on Headwalls of RCPC <input type="checkbox"/> Cracks on RCPC, outlets and outflows <input type="checkbox"/> Deflections and deformations on Flooring <input type="checkbox"/> Obstruction in the Drainage Canal and RCPC <input type="checkbox"/> Siltation in the Drainage Canal, RCPC and Catchbasins		
2) Sign Boards <input type="checkbox"/> Visibility of signboard <input type="checkbox"/> Readable Policies		

<sup>6</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

<input type="checkbox"/> Condition of Signboard		
3) Other Structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:  
\_\_\_\_\_  
\_\_\_\_\_
- The following areas/structures need to be addressed/improved:  
\_\_\_\_\_  
\_\_\_\_\_
- The following factors contributed to subproject functionality and sustainability:  
\_\_\_\_\_  
\_\_\_\_\_

**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

\_\_\_\_\_

O&M Organization Representative

\_\_\_\_\_

BLGU Representative

\_\_\_\_\_

MIAC Representative

\_\_\_\_\_

SB Representative

\_\_\_\_\_

ACT Representative

\_\_\_\_\_

Mayor's Office Representative

\_\_\_\_\_

RPMT Representative (if available)

\_\_\_\_\_

MSIT Team Leader (MPDC/ME)

\_\_\_\_\_

NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Electrification Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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2) Subproject provides 24-hour per day service ___ Yes ___ No If No, why? _____ _____																																																					
3) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility <sup>4</sup> ? ___ Yes ___ No What are these instances? _____																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<sup>4</sup> Disconnection of electric service to a HH which failed to pay monthly dues.



<p>_____</p> <p>What is the decision of the O&amp;M group to address these issue/s?</p> <p>_____</p> <p>_____</p>	
<p>4) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>5) Does the O&amp;M group have plans for expansion/extension/improvement?</p> <p>___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>6) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b></p> <p><b>(SP Utilization – 15%)</b></p>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1) O&amp;M organization formed and registered and/or accredited</p> <p>For “Yes” answer, the following should be met:</p> <p><input type="checkbox"/> Record/minutes of formation and BA approval</p> <p><input type="checkbox"/> List of Officers and members</p> <p style="padding-left: 20px;"><input type="checkbox"/> Record of election/installation</p> <p style="padding-left: 20px;"><input type="checkbox"/> Posted in the office</p> <p><input type="checkbox"/> Proof/copy of registration or accreditation</p> <p><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</p>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>2) O&amp;M Group is functional</p> <p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what supports were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <input type="checkbox"/> Below O&M requirement <input type="checkbox"/> Equal to O&M requirement <input type="checkbox"/> More than O&M requirement			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

Electrification		
V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <input type="checkbox"/> Implementation of planned activities <input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> O&M group maintains the subproject		
2) Maintenance Tools/equipment <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Electrical posts <input type="checkbox"/> Condition of Electrical Posts <input type="checkbox"/> Condition of Cable Support <input type="checkbox"/> Presence of Street light		
2) Primary Power line (Post to Post) <input type="checkbox"/> Condition of Transformer <input type="checkbox"/> Condition of Power lines		
3) Secondary power line <input type="checkbox"/> Condition of Power lines		
4) Household Connection <input type="checkbox"/> Condition of Electric meters		

<input type="checkbox"/> Condition of Wiring installation <input type="checkbox"/> Presence of illegal flying connections		
5) Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
6) Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:  
\_\_\_\_\_
- The following areas/structures need to be addressed/improved:  
\_\_\_\_\_
- The following factors contributed to subproject functionality and sustainability:  
\_\_\_\_\_

**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable

- There is budget for O&M; budget is enough to cover planned O&M expenses
- There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

\_\_\_\_\_

O&M Organization Representative

\_\_\_\_\_

BLGU Representative

\_\_\_\_\_

MIAC Representative

\_\_\_\_\_

SB Representative

\_\_\_\_\_

ACT Representative

\_\_\_\_\_

Mayor's Office Representative

\_\_\_\_\_

RPMT Representative (if available)

\_\_\_\_\_

MSIT Team Leader (MPDC/ME)

\_\_\_\_\_

NPMO Representative (if available)

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\_\_\_\_\_

## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET)

### For Health Station Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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2) There is a regular midwife Yes ___ Regular Schedule of midwife (day and time): _____ No ___ If No, why? _____ _____																																																					
3) There is a Barangay Health Worker																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>Yes ____ Regular Schedule of BHW (day and time): _____            No ____            If No, why?            _____            _____</p> <p>4) The following amenities are available (please check):</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Consultation tables</li> <li><input type="checkbox"/> Weighing scales</li> <li><input type="checkbox"/> Medicine cabinets</li> <li><input type="checkbox"/> BP Apparatus</li> <li><input type="checkbox"/> Nebulizer</li> <li><input type="checkbox"/> Stethoscope</li> <li><input type="checkbox"/> Dressing kits</li> <li><input type="checkbox"/> Delivery kit</li> <li><input type="checkbox"/> Dextrose and Syringes</li> <li><input type="checkbox"/> Others (as included in the plan, please specify) _____</li> </ul> <p>If No, why?            _____            _____</p> <p>What amenities are needed?            _____</p> <p>Why were these (additional amenities) not included in the design?            _____            _____</p>	
<p>5) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ____ Yes ____ No</p> <p>What are these instances?            _____            _____</p> <p>What is the decision of the O&amp;M group to address these issue/s?            _____            _____</p>	
<p>6) List down the top three benefits derived from the completed project</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	
<p>7) Does the O&amp;M group have plans for expansion/improvement/construction of additional structures? ____ Yes ____ No</p>	

<sup>4</sup> Example: A patient was not provided medical attention due to graveness of the sickness

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>
What are the plans? <input type="checkbox"/> _____ <input type="checkbox"/> _____	
8) Has the project produced new problems for the community/barangay? __ Yes __ No If yes, write down (by order of importance) the top three problems that project has produced. <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks<sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For “Yes” answer, the following should be met: <input type="checkbox"/> Record/minutes of formation and BA approval <input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> <input type="checkbox"/> Proof/copy of registration or accreditation <input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly			
2) O&M Group is functional  The O&M Group should meet majority of the following indicators to warrant a “Yes” answer: <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b>			
<b>III. INSTITUTIONAL LINKAGE</b>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
<p>1) Funds allocated for O&amp;M</p>			
<p>2) Sufficiency of allocated funds</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> O&amp;M group maintains the subproject</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Building Structures		
a. Columns, Beams, Walls <ul style="list-style-type: none"> <li><input type="checkbox"/> Structural stability; cracks on structures</li> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Vandalism</li> <li><input type="checkbox"/> Deflections and deformations</li> </ul>		
b. Doors and Windows <ul style="list-style-type: none"> <li><input type="checkbox"/> Functionality/appearance of door knobs;</li> <li><input type="checkbox"/> Conditions of doors &amp; Jambs, fittings</li> <li><input type="checkbox"/> Condition of window frames, panels, hinges, locks</li> <li><input type="checkbox"/> Paintings</li> </ul>		
c. Roofing <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of roofing panels</li> <li><input type="checkbox"/> Gutters, ridge rolls</li> <li><input type="checkbox"/> Deformations</li> </ul>		
d. Ceiling <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of ceiling panels</li> <li><input type="checkbox"/> Deformations</li> <li><input type="checkbox"/> Stability of joist and hangers</li> </ul>		
e. Electrical System <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Power Supply</li> <li><input type="checkbox"/> Serviceability of Lights</li> <li><input type="checkbox"/> Condition of Switches and outlets</li> <li><input type="checkbox"/> Safe electrical wiring system</li> </ul>		

<p>f. Plumbing and Sanitation</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Potable water supply</li> <li><input type="checkbox"/> Condition of lavatory and pantry</li> <li><input type="checkbox"/> Condition of comfort room</li> <li><input type="checkbox"/> Condition of water pipes and drain pipes</li> </ul>		
<p>g. Amenities</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of Consultation tables</li> <li><input type="checkbox"/> Condition of Weighing scales</li> <li><input type="checkbox"/> Condition of Medicine cabinets</li> <li><input type="checkbox"/> Condition of BP Apparatus</li> <li><input type="checkbox"/> Condition of Nebulizer</li> <li><input type="checkbox"/> Condition of Stethoscope</li> <li><input type="checkbox"/> Condition of Dressing kits</li> <li><input type="checkbox"/> Condition of Delivery kit</li> <li><input type="checkbox"/> Condition of Dextrose and Syringes</li> <li><input type="checkbox"/> Condition of other amenities</li> </ul>		
<p>h. Sign Boards</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Visibility of signboard-Readable Policies</li> <li><input type="checkbox"/> Condition of Signboard</li> </ul>		
<p>i. Other structures per approved design</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>		
<p><b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b></p>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries

- Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

---

O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

---

SB Representative

---

ACT Representative

---

Mayor's Office Representative

---

RPMT Representative (if available)

---

MSIT Team Leader (MPDC/ME)

---

NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Irrigation Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
<p>1) Number of beneficiaries</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th rowspan="2" style="width: 20%;">Type of Beneficiaries</th> <th colspan="2" style="width: 20%;">Planned</th> <th colspan="2" style="width: 20%;">Actual</th> <th rowspan="2" style="width: 30%;">Explanation of Variance</th> </tr> <tr> <th style="width: 10%;">Male/ Male-headed</th> <th style="width: 10%;">Female/ Female-headed</th> <th style="width: 10%;">Male/ Male-headed</th> <th style="width: 10%;">Female/ Female-headed</th> </tr> </thead> <tbody> <tr><td>Population</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Households (total)</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Families (total)<sup>3</sup></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Pantawid HHs</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Pantawid Families</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>IP HHs</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>IP Families</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	Type of Beneficiaries	Planned		Actual		Explanation of Variance	Male/ Male-headed	Female/ Female-headed	Male/ Male-headed	Female/ Female-headed	Population						Households (total)						Families (total) <sup>3</sup>						Pantawid HHs						Pantawid Families						IP HHs						IP Families						
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<p>2) What is the planned service area of the irrigation? _____</p> <p>What is the actual service area? _____</p> <p>In case planned vs. actual number do not match, explain why.</p> <p>_____</p> <p>_____</p> <p>What is the planned cropping intensity with the completed irrigation system?</p> <p>_____</p>																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality (quality) of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
What is the actual cropping intensity with the completed irrigation system? _____ In case planned vs. actual number do not match, explain why. _____ _____	
3) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility <sup>4</sup> ? ___ Yes ___ No What are these instances? _____ _____ What is the decision of the O&M group to address these issue/s? _____ _____	
4) List down the top three benefits derived from the completed project <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
5) Does the O&M group have plans for expansion/extension/improvements? ___ Yes ___ No What are the plans? <input type="checkbox"/> _____ <input type="checkbox"/> _____	
6) Has the project produced new problems for the community/barangay? ___ Yes ___ No If yes, write down (by order of importance) the top three problems that project has produced. <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited			

<sup>4</sup> Example: A farmer was not able to access irrigation water due to non-payment of tariff.

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>For “Yes” answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2) O&amp;M Group is functional</p> <p>The O&amp;M Group should have the following to be considered functional:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Organizational Vision, Mission and Goals, and Long-term Strategic Plan formulated <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Annual Operational Plan (including O&amp;M plan with corresponding budget) prepared <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Operational Policies formulated and implemented</li> </ul>			
<p>3) Minutes of approval and adoption by the General Assembly (GA)</p>			
<p>4) Operation of O&amp;M Group is managed well</p> <p>The organization should meet majority of the following indicators to warrant a “Yes” answer.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Regular meetings (BOD and General Assembly) conducted, including discussion of financial status (Income and Expenses, Balance Sheet)</li> <li><input type="checkbox"/> Election of Officers conducted as indicated in Constitution and By-Laws</li> <li><input type="checkbox"/> 50% + 1 Attendance in BOD/Officers’ meetings (sex disaggregated)</li> <li><input type="checkbox"/> 50% + 1 Attendance in GA meetings (sex disaggregated)</li> <li><input type="checkbox"/> Conduct of periodic organizational assessments and planning</li> <li><input type="checkbox"/> Proper Records management observed and Report to Oversight Agencies submitted on-time</li> <li><input type="checkbox"/> Increase in Membership (sex disaggregated)</li> </ul>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<input type="checkbox"/> Ability to resolve Conflicts without external intervention <input type="checkbox"/> Ability to provide other services to members (e.g. livelihood programs, credit, hospitalization, mortuary, etc.) <input type="checkbox"/> Women engagement in paid labor <input type="checkbox"/> Staffing/Employment <ul style="list-style-type: none"> <li>○ Presence of complete staff and/or full-time employees</li> </ul> <input type="checkbox"/> Provision of incentives to officers/employees (e.g., honorarium, SSS, Philhealth, allowances, non-cash benefits, etc.)			
<p><b>Bonus:</b>  Awards and Recognitions received (Recipient of awards (local, regional, national))</p>			
<p><b>OVERALL NUMERICAL RATING</b>  <b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <input type="checkbox"/> Formal (with partnership agreements, MOA, etc.) <input type="checkbox"/> Informal <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <input type="checkbox"/> Financial <input type="checkbox"/> Technical Expertise <input type="checkbox"/> Equipment <input type="checkbox"/> Supplies <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b>  <b>(Institutional Linkage – 10%)</b></p>			



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>IV. FINANCIAL COMPONENT</b>			
1) FM Structure <ul style="list-style-type: none"> <li>• There is segregation of duties and responsibilities, different persons are involved in               <ul style="list-style-type: none"> <li><input type="checkbox"/> Collection</li> <li><input type="checkbox"/> Cashiering</li> <li><input type="checkbox"/> Recording</li> </ul> </li> </ul>			
2) Bank Account <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a bank account</li> <li><input type="checkbox"/> There are at least two (2) signatories</li> <li><input type="checkbox"/> Account signatories are not personally related</li> </ul>			
3) Tariff <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a tariff set and collection plan</li> <li><input type="checkbox"/> Minutes of tariff setting and adopting tariff set</li> </ul>			
4) Expenditures <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved Disbursement voucher for every disbursement or substitute</li> <li><input type="checkbox"/> OR issued</li> </ul>			
5) Books of Accounts <ul style="list-style-type: none"> <li><input type="checkbox"/> Record of collections</li> <li><input type="checkbox"/> Record of account receivables</li> <li><input type="checkbox"/> Record of expenses (cash book)</li> <li><input type="checkbox"/> Record of Accounts payable</li> </ul>			
6) Financial reports <ul style="list-style-type: none"> <li><input type="checkbox"/> Periodic Report of Income and Expenses</li> <li><input type="checkbox"/> Balance Sheet</li> </ul>			
7) Financial Control <ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct of regular internal audit</li> <li><input type="checkbox"/> Conduct of on-the-spot cash check</li> <li><input type="checkbox"/> Conduct of external audit</li> <li><input type="checkbox"/> No adverse audit findings</li> </ul>			
8) Financial Accomplishment <ul style="list-style-type: none"> <li><input type="checkbox"/> Collection efficiency (% of collection)</li> <li><input type="checkbox"/> Proof of Collection (OR/AR issued for collections or substitute)</li> <li><input type="checkbox"/> Tariff is sufficient to cover operation and maintenance (Monthly tariff vs. Estimated monthly expenses)</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> Irrigators' Association maintains the irrigation system</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Structures and Sub-Structures		
a. Intake / Diversion weir <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of intake Weir</li> <li><input type="checkbox"/> Condition of upstream</li> <li><input type="checkbox"/> Stability of Apron</li> </ul>		
b. Concrete lined canal <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of Concrete Lining</li> <li><input type="checkbox"/> Stability of Back slope</li> </ul>		
c. Piped Section <ul style="list-style-type: none"> <li><input type="checkbox"/> Piping condition</li> <li><input type="checkbox"/> Piping fittings and suspension</li> </ul>		
d. Turn Out Structure <ul style="list-style-type: none"> <li><input type="checkbox"/> Piping condition</li> <li><input type="checkbox"/> Piping fittings and suspension</li> </ul>		
e. Sign Boards <ul style="list-style-type: none"> <li><input type="checkbox"/> Visibility of signboard-Readable Policies</li> <li><input type="checkbox"/> Condition of Signboard</li> </ul>		
f. Other structures per approved design <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1) Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2) Sustainability

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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### 3) Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

### 4) Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

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BLGU Representative

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MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

---

RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Multi-Purpose Building/Facility Sub-Project

DATE OF EVALUATION:

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
1) Number of beneficiaries																																																					
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2) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility <sup>4</sup> ? ___ Yes ___ No What are these instances? _____ _____  What is the decision of the O&M group to address these issue/s? _____																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<sup>4</sup> Example: A potential user was refused access to the facility as it is against the uses identified by the O&M group

<p>3) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>4) Does the O&amp;M group have plans for expansion/improvement/construction of additional structures? ___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>5) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b></p>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1) O&amp;M organization formed and registered and/or accredited</p> <p>For “Yes” answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2) O&amp;M Group is functional</p>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

<p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<p style="text-align: center;"><b>Key Areas</b></p>	<p style="text-align: center;"><b>Yes or No</b></p>	<p style="text-align: center;"><b>Degree of Responsiveness / Impact</b></p>	<p style="text-align: center;"><b>Remarks</b></p>
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support was accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b></p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <input type="checkbox"/> Below O&M requirement <input type="checkbox"/> Equal to O&M requirement <input type="checkbox"/> More than O&M requirement			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

<b>Multi-Purpose Building</b>		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <input type="checkbox"/> Implementation of planned activities <input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> O&M group maintains the subproject		
2) Maintenance Tools/equipment <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Building Structures</b>		
a. Columns, Beams, walls <input type="checkbox"/> Structural stability; cracks on structures <input type="checkbox"/> Condition of painting <input type="checkbox"/> Vandalism <input type="checkbox"/> Deflections and deformations		
b. Doors and Windows <input type="checkbox"/> Functionality of door knobs; <input type="checkbox"/> Conditions of doors & Jambs, fittings <input type="checkbox"/> Condition of window frames, panels, hinges, locks <input type="checkbox"/> Accessibility		
c. Roofing <input type="checkbox"/> Condition of painting <input type="checkbox"/> Condition of roofing panels		



<input type="checkbox"/> Gutters, ridge rolls, <input type="checkbox"/> Deformations		
d. Ceiling <input type="checkbox"/> Condition of painting <input type="checkbox"/> Condition of ceiling panels <input type="checkbox"/> Deformations <input type="checkbox"/> Stability of joist and hangers		
e. Electrical System <input type="checkbox"/> Availability of Power Supply <input type="checkbox"/> Serviceability of Lights <input type="checkbox"/> Condition of Switches and outlets <input type="checkbox"/> Safe electrical wiring system		
f. Plumbing and sanitation <input type="checkbox"/> Availability of Potable water supply <input type="checkbox"/> Condition of lavatory and pantry <input type="checkbox"/> Condition of comfort room <input type="checkbox"/> Condition of water pipes and drain pipes		
g. Amenities <input type="checkbox"/> Condition of chairs <input type="checkbox"/> Condition of tables/desks <input type="checkbox"/> Condition of writing boards		
h. Environmental sanitation <input type="checkbox"/> Observed cleanliness <input type="checkbox"/> proper waste disposal		
i. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
j. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1. Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2. Sustainability

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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### 3. Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

### 4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Rice and Corn Mill Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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<p>2) What is the planned operation of the subproject (i.e., daily, etc.)? _____</p> <p>What is the actual operation of the subproject? _____</p> <p>In case planned vs. actual operation is not the same, explain the discrepancy: _____ _____</p>																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>_____</p> <p>How many sacks (or kilos) of palay or corn are milled per month?  Planned _____ Actual _____</p> <p>In case planned vs. actual operation is not the same, explain the discrepancy:  _____  _____  _____</p> <p>Is milled rice/corn in good quality or acceptable to the community?  _____ Yes _____ No</p> <p>If No, why?  _____  _____</p> <p>How much is the tariff for the use of subproject? Planned _____ Actual _____</p> <p>In case planned vs. actual operation is not the same, explain the discrepancy:  _____  _____</p>	
<p>3) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? _____ Yes _____ No</p> <p>What are these instances?  _____  _____</p> <p>What is the decision of the O&amp;M group to address these issue/s?  _____  _____</p>	
<p>4) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>5) Does the O&amp;M group have plans for improvements/construction of additional structures?  _____ Yes _____ No</p> <p>What are the plans?  <input type="checkbox"/> _____  <input type="checkbox"/> _____</p>	

<sup>4</sup> A potential user was not able to use the mill during peak season because he/she is last in line and could not be accommodated on the same day.

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>
<p>6) Has the project produced new problems for the community/barangay?__ Yes __ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b></p>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks<sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1) O&amp;M organization formed and registered and/or accredited</p> <p>For “Yes” answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2) O&amp;M Group is functional</p>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>The O&amp;M Group should have the following to be considered functional:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Organizational Vision, Mission and Goals, and Long-term Strategic Plan formulated <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Annual Operational Plan (including O&amp;M plan with corresponding budget) prepared <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Operational Policies formulated and implemented <ul style="list-style-type: none"> <li>○ Minutes of approval and adoption by the General Assembly (GA)</li> </ul> </li> </ul>			
<p>3) Operation of O&amp;M Group is managed well</p> <p>The organization should meet majority of the following indicators to warrant a “Yes” answer.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Regular meetings (BOD and General Assembly) conducted, including discussion of financial status (Income and Expenses, Balance Sheet)</li> <li><input type="checkbox"/> Election of Officers conducted as indicated in Constitution and By-Laws</li> <li><input type="checkbox"/> 50% + 1 Attendance in BOD/Officers’ meetings (sex disaggregated)</li> <li><input type="checkbox"/> 50% + 1 Attendance in GA meetings (sex disaggregated)</li> <li><input type="checkbox"/> Conduct of periodic organizational assessments and planning</li> <li><input type="checkbox"/> Proper Records management observed and Report to Oversight Agencies submitted on-time</li> <li><input type="checkbox"/> Increase in Membership (sex disaggregated)</li> <li><input type="checkbox"/> Ability to resolve Conflicts without external intervention</li> <li><input type="checkbox"/> Ability to provide other services to members (e.g. livelihood programs, credit, hospitalization, mortuary, etc.)</li> <li><input type="checkbox"/> Women engagement in paid labor</li> <li><input type="checkbox"/> Staffing/Employment <ul style="list-style-type: none"> <li>○ Presence of complete staff and/or full-time employees</li> </ul> </li> </ul>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<ul style="list-style-type: none"> <li>○ Provision of incentives to officers/employees (e.g., honorarium, SSS, Philhealth, allowances, non-cash benefits, etc.)</li> </ul>			
<p><b>Bonus:</b> <i>Awards and Recognitions received (Recipient of awards (local, regional, national))</i></p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b></p>			
<p><b>IV. FINANCIAL COMPONENT</b></p>			
<p>1) FM Structure</p>			



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<ul style="list-style-type: none"> <li>• There is segregation of duties and responsibilities, different persons are involved in               <ul style="list-style-type: none"> <li>ii. Collection</li> <li>iii. Cashiering</li> <li>iv. Recording</li> </ul> </li> </ul>			
2) Bank Account <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a bank account</li> <li><input type="checkbox"/> There are at least two (2) signatories</li> <li><input type="checkbox"/> Account signatories are not personally related</li> </ul>			
3) Tariff <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a tariff set and collection plan</li> <li><input type="checkbox"/> Minutes of tariff setting and adopting tariff set</li> </ul>			
4) Expenditures <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved Disbursement voucher for every disbursement or substitute</li> <li><input type="checkbox"/> OR issued</li> </ul>			
5) Books of Accounts <ul style="list-style-type: none"> <li><input type="checkbox"/> Record of collections</li> <li><input type="checkbox"/> Record of account receivables</li> <li><input type="checkbox"/> Record of expenses (cash book)</li> <li><input type="checkbox"/> Record of Accounts payable</li> </ul>			
6) Financial reports <ul style="list-style-type: none"> <li><input type="checkbox"/> Periodic Report of Income and Expenses</li> <li><input type="checkbox"/> Balance Sheet</li> </ul>			
7) Financial Control <ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct of regular internal audit</li> <li><input type="checkbox"/> Conduct of on-the-spot cash check</li> <li><input type="checkbox"/> Conduct of external audit</li> <li><input type="checkbox"/> No adverse audit findings</li> </ul>			
8) Financial Accomplishment <ul style="list-style-type: none"> <li><input type="checkbox"/> Collection efficiency (% of collection)</li> <li><input type="checkbox"/> Proof of Collection (OR/AR issued for collections or substitute)</li> <li><input type="checkbox"/> Tariff is sufficient to cover operation and maintenance (Monthly tariff vs. Estimated monthly expenses)</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> Irrigators' Association maintains the irrigation system</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Building Structures</b>		
a. Columns, Beams, walls <ul style="list-style-type: none"> <li><input type="checkbox"/> Structural stability; cracks on structures</li> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Vandalism</li> <li><input type="checkbox"/> Deflections and deformations</li> </ul>		
b. Doors and Windows <ul style="list-style-type: none"> <li><input type="checkbox"/> Functionality of door knobs;</li> <li><input type="checkbox"/> Conditions of doors &amp; Jambs, fittings</li> <li><input type="checkbox"/> Condition of window frames, panels, hinges, locks</li> <li><input type="checkbox"/> Accessibility</li> </ul>		
c. Roofing <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of roofing panels</li> <li><input type="checkbox"/> Gutters, ridge rolls,</li> <li><input type="checkbox"/> Deformations</li> </ul>		
d. Ceiling <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of ceiling panels</li> <li><input type="checkbox"/> Deformations</li> <li><input type="checkbox"/> Stability of joist and hangers</li> </ul>		
e. Electrical System <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Power Supply</li> <li><input type="checkbox"/> Serviceability of Lights</li> <li><input type="checkbox"/> Condition of Switches and outlets</li> <li><input type="checkbox"/> Safe electrical wiring system</li> </ul>		

f. Plumbing and sanitation <input type="checkbox"/> Availability of Potable water supply <input type="checkbox"/> Condition of lavatory and pantry <input type="checkbox"/> Condition of comfort room <input type="checkbox"/> Condition of water pipes and drain pipes		
g. Amenities <input type="checkbox"/> Condition of chairs <input type="checkbox"/> Condition of tables/desks <input type="checkbox"/> Condition of writing boards		
h. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>2) Rice Mill/Corn Mill</b>		
a. Concrete Pavement <input type="checkbox"/> Cracks on pavement <input type="checkbox"/> water ponding on pavement <input type="checkbox"/> scaling of pavement <input type="checkbox"/> tilt/settlement of pavement <input type="checkbox"/> cleanliness		
b. Environmental sanitation <input type="checkbox"/> Observed cleanliness <input type="checkbox"/> proper waste disposal		
c. Other Structures per approved design <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
d. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
e. Other Structures per approved design <input type="checkbox"/> <input type="checkbox"/>		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1. Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2. Sustainability

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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---

- The following factors contributed to subproject functionality and sustainability:

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### 3. Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
  - 7) Subproject is managed by community organization
  - 8) Users are paying O&M fee; fee is affordable
  - 9) There is budget for O&M; budget is enough to cover planned O&M expenses
  - 10) There is an O&M plan; planned activities are implemented on schedule

### 4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

---

O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

---

SB Representative

---

ACT Representative

---

Mayor's Office Representative

---

RPMT Representative (if available)

---

MSIT Team Leader (MPDC/ME)

---

NPMO Representative (if available)

---

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET)

### For Road/Pathway/Footpath/Access Trail Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<sup>4</sup> Example: A vehicle exceeding load limit /capacity was prohibited to traverse the road

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>_____</p> <p>3) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>4) What are the planned uses of the subproject?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p>Are these being met? ___ Yes ___ No</p> <p>If No, why? _____</p> <p>_____</p>	
<p>5) What types of vehicles are supposed to use the road?</p> <p>_____</p> <p>What types of vehicles are actually using the road?</p> <p>_____</p> <p>Is the road passable during dry and rainy seasons? ___ Yes ___ No</p> <p>If no, explain why.</p> <p>_____</p> <p>_____</p>	
<p>6) Does the O&amp;M group have plans for extension or improvements? ___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>7) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b></p>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1) O&amp;M organization formed and registered and/or accredited</p> <p>For “Yes” answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2) O&amp;M Group is functional</p> <p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<b>III. INSTITUTIONAL LINKAGE</b>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p>			

<sup>5</sup> Comment on the responsiveness and overall quality of support provided by the MLGU and BLGU. Include other observations as maybe appropriate.



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
3) Accessed support are sufficient			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
1) Funds allocated for O&M			
2) Sufficiency of allocated funds <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

Road/Access Trail/Footpath		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li>C. Activities conducted as scheduled</li> <li>D. O&amp;M group maintains the subproject</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li>E. Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li>F. Tools are functional and on-site</li> </ul>		

<b>B. SUB-PROJECT STRUCTURES</b>		
1) GRAVELED OR EARTH ROAD SURFACE		
<input type="checkbox"/> Presence of potholes <input type="checkbox"/> Canals on road carriage way <input type="checkbox"/> Road blocks		
2) SIDE DITCHES/CANAL		
<input type="checkbox"/> Silted <input type="checkbox"/> Too much scouring		
3) ROAD SHOULDER		
<input type="checkbox"/> Overgrown vegetation <input type="checkbox"/> Stockpiles & other obstruction <input type="checkbox"/> Washed-out <input type="checkbox"/> No enough protection		
4) CROSS DRAINS		
<input type="checkbox"/> Inlet/outlet silted <input type="checkbox"/> Crack on Headwalls <input type="checkbox"/> Crack on Wingwalls		
5) CONCRETE PAVEMENT		
<input type="checkbox"/> Cracks <input type="checkbox"/> Scaling <input type="checkbox"/> Scouring or settlement of base		
6) SLOPE PROTECTION		
<input type="checkbox"/> Cracks <input type="checkbox"/> Settlement		
7) SAFETY SIGNS		
<input type="checkbox"/> Road Signs available <input type="checkbox"/> Condition of Signage		
8) SIGN BOARDS		
<input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
9) OTHER STRUCTURES PER APPROVED DESIGN		
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1) Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2) Sustainability

- The following components/areas are properly attended to:  
\_\_\_\_\_  
\_\_\_\_\_
- The following areas/structures need to be addressed/improved:  
\_\_\_\_\_  
\_\_\_\_\_
- The following factors contributed to subproject functionality and sustainability:  
\_\_\_\_\_  
\_\_\_\_\_

### 3) Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

### 4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

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BLGU Representative

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MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For School Building Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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IP HHs																																																					
IP Families																																																					
2) Number of students served per classroom <input type="checkbox"/> Actual _____ <input type="checkbox"/> Planned _____  In case planned vs. actual number do not match, explain why. _____ _____																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>3) There is a regular teacher Yes ____ No ____</p> <p>If No, why?</p> <p>_____</p> <p>_____</p>	
<p>4) The following amenities are available (please check):</p> <p><input type="checkbox"/> Teacher's Table</p> <p><input type="checkbox"/> Writing Board</p> <p><input type="checkbox"/> Students' Desk/Chair</p> <p><input type="checkbox"/> Others (please specify) _____</p> <p>If No, why?</p> <p>_____</p> <p>_____</p> <p>What amenities are needed?</p> <p>_____</p> <p>Why were these not included in the design?</p> <p>_____</p> <p>_____</p>	
<p>5) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ____ Yes ____ No</p> <p>What are these instances?</p> <p>_____</p> <p>_____</p> <p>What is the decision of the O&amp;M group to address these issue/s?</p> <p>_____</p> <p>_____</p>	
<p>6) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>7) Does the O&amp;M group have plans for expansion/improvement/constructing additional structures? ____ Yes ____ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	

<sup>4</sup> Example: An enrollee was accepted as student due to not meeting requirements

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>
8) Has the project produced new problems for the community/barangay? __ Yes __ No If yes, write down (by order of importance) the top three problems that project has produced. <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks <sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For “Yes” answer, the following should be met: <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members               <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
2) O&M Group is functional  The O&M Group should meet majority of the following indicators to warrant a “Yes” answer: <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>III. INSTITUTIONAL LINKAGE</b>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
<p>1) Funds allocated for O&amp;M</p>			
<p>2) Sufficiency of allocated funds</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Below O&amp;M requirement</li> <li><input type="checkbox"/> Equal to O&amp;M requirement</li> <li><input type="checkbox"/> More than O&amp;M requirement</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			



V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> O&amp;M group maintains the subproject</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Building Structures</b>		
a. Columns, Beams, walls <ul style="list-style-type: none"> <li><input type="checkbox"/> Structural stability; cracks on structures</li> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Vandalism</li> <li><input type="checkbox"/> Deflections and deformations</li> </ul>		
b. Doors and Windows <ul style="list-style-type: none"> <li><input type="checkbox"/> Functionality/appearance of door knobs;</li> <li><input type="checkbox"/> Conditions of doors &amp; Jambs, fittings</li> <li><input type="checkbox"/> Condition of window frames, panels, hinges, locks</li> <li><input type="checkbox"/> Paintings</li> </ul>		
c. Roofing <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of roofing panels</li> <li><input type="checkbox"/> Gutters, ridge rolls</li> <li><input type="checkbox"/> Deformations</li> </ul>		
d. Ceiling <ul style="list-style-type: none"> <li><input type="checkbox"/> Condition of painting</li> <li><input type="checkbox"/> Condition of ceiling panels</li> <li><input type="checkbox"/> Deformations</li> <li><input type="checkbox"/> Stability of joist and hangers</li> </ul>		
e. Electrical System <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Power Supply</li> <li><input type="checkbox"/> Serviceability of Lights</li> <li><input type="checkbox"/> Condition of Switches and outlets</li> <li><input type="checkbox"/> Safe electrical wiring system</li> </ul>		
f. Plumbing and sanitation <ul style="list-style-type: none"> <li><input type="checkbox"/> Availability of Potable water supply</li> </ul>		

<input type="checkbox"/> Condition of lavatory and pantry <input type="checkbox"/> Condition of comfort room <input type="checkbox"/> Condition of water pipes and drain pipes		
g. Amenities <input type="checkbox"/> Condition of chairs <input type="checkbox"/> Condition of tables/desks <input type="checkbox"/> Condition of writing boards <input type="checkbox"/> Condition of other amenities		
h. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
i. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:  
\_\_\_\_\_
- The following areas/structures need to be addressed/improved:  
\_\_\_\_\_

- The following factors contributed to subproject functionality and sustainability:

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

---

SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET)

### For Slope Protection/Riprap/Seawall/Flood Control Sub-Projects

DATE OF EVALUATION:

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
<p>1) Number of beneficiaries</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Type of Beneficiaries</th> <th colspan="2">Planned</th> <th colspan="2">Actual</th> <th rowspan="2">Explanation of Variance</th> </tr> <tr> <th>Male/ Male-headed</th> <th>Female/ Female-headed</th> <th>Male/ Male-headed</th> <th>Female/ Female-headed</th> </tr> </thead> <tbody> <tr> <td>Population</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Households (total)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Families (total)<sup>3</sup></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pantawid HHs</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pantawid Families</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>IP HHs</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>IP Families</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of Beneficiaries	Planned		Actual		Explanation of Variance	Male/ Male-headed	Female/ Female-headed	Male/ Male-headed	Female/ Female-headed	Population						Households (total)						Families (total) <sup>3</sup>						Pantawid HHs						Pantawid Families						IP HHs						IP Families						
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<p>2) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>																																																					
<p>3) What are the planned uses of the subproject?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
Are these being met? ____ Yes ____ No If No, why? _____ _____	
4) Does the O&M group have plans for extension or improvements? ____ Yes ____ No What are the plans? <input type="checkbox"/> _____ <input type="checkbox"/> _____	
5) Has the project produced new problems for the community/barangay? __ Yes __ No If yes, write down (by order of importance) the top three problems that project has produced. <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>4</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For “Yes” answer, the following should be met: <input type="checkbox"/> Record/minutes of formation and BA approval <input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> <input type="checkbox"/> Proof/copy of registration or accreditation <input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly			
2) O&M Group is functional			

<sup>4</sup> Comment on the responsiveness and overall quality of support provided by the MLGU and BLGU. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>4</sup>
<p>The O&amp;M Group should meet majority of the following indicators to warrant a “Yes” answer:</p> <ul style="list-style-type: none"> <li>○ O&amp;M group holds regular meeting</li> <li>○ O&amp;M group regularly undertakes monitoring of structures to determine structures which need maintenance</li> <li>○ O&amp;M group provides feedback to the Infrastructure Committee on result of monitoring</li> <li>○ O&amp;M group lobbies for O&amp;M funds from the M/BLGU thru the Infrastructure Committee</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b>			
<b>III. INSTITUTIONAL LINKAGE</b>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
<p>1) Funds allocated for O&amp;M</p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>4</sup>
2) Sufficiency of allocated funds <input type="checkbox"/> Below O&M requirement <input type="checkbox"/> Equal to O&M requirement <input type="checkbox"/> More than O&M requirement			
<b>OVERALL NUMERICAL RATING</b>			
<b>(Finance Component – 15%)</b>			

Slope Protection/Riprap/Seawall/Flood Control		
V. PHYSICAL/TECHNICAL	RATING	REMARKS
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <input type="checkbox"/> Implementation of planned activities <input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> O&M Group maintains the subproject		
2) Maintenance Tools/equipment <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
1) Foundation <input type="checkbox"/> Settlement <input type="checkbox"/> Scouring		
2) Stone Masonry/Concrete Structures <input type="checkbox"/> Cracks <input type="checkbox"/> Separation of Grout <input type="checkbox"/> Settlement		
3) Top Bank <input type="checkbox"/> Cracks <input type="checkbox"/> Scaling		
4) Sign Boards <input type="checkbox"/> Visibility of Sign boards <input type="checkbox"/> Readable policies <input type="checkbox"/> Condition of signboard		
5) Other Structures Per Approved Design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		

<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		
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<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:
 

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- The following areas/structures need to be addressed/improved:
 

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- The following factors contributed to subproject functionality and sustainability:
 

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
- Subproject is managed by community organization
- There is budget for O&M; budget is enough to cover planned O&M expenses
- There is an O&M plan; planned activities are implemented on schedule



**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

\_\_\_\_\_  
O&M Organization Representative

\_\_\_\_\_  
BLGU Representative

\_\_\_\_\_  
MIAC Representative

\_\_\_\_\_  
SB Representative

\_\_\_\_\_  
ACT Representative

\_\_\_\_\_  
Mayor's Office Representative

\_\_\_\_\_  
RPMT Representative (if available)

\_\_\_\_\_  
MSIT Team Leader (MPDC/ME)

\_\_\_\_\_  
NPMO Representative (if available)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Solar and Mechanical Drier Sub-Project

**DATE OF EVALUATION:**

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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2) What is the planned operation of the subproject (i.e., daily, etc.)? _____ What is the actual operation of the subproject? _____ In case planned vs. actual operation is not the same, explain the discrepancy: _____																																																					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>How many sacks (or kilos) of <u>specify products</u> are dried per month?  Planned _____ Actual _____</p> <p>In case planned vs. actual operation is not the same, explain the discrepancy:  _____  _____</p> <p>Is the quality of dried products good or acceptable to the community?  ____ Yes ____ No.  If No, why?  _____  _____</p> <p>How much is the tariff for the use of subproject?  Planned _____ Actual _____</p> <p>In case planned vs. actual operation is not the same, explain the discrepancy:  _____</p>	
<p>3) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ____ Yes ____ No</p> <p>What are these instances?  _____  _____</p> <p>What is the decision of the O&amp;M group to address these issue/s?  _____  _____</p>	
<p>4) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>5) Does the O&amp;M group have plans for expansion/extension/improvements?  ____ Yes ____ No</p> <p>What are the plans?  <input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>6) Has the project produced new problems for the community/barangay?  ____ Yes ____ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p>	

<sup>4</sup> A potential user was not able to use the facility during peak season because he/she is last in line and could not be accommodated on the same day.

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks<sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For “Yes” answer, the following should be met: <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members               <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
2) O&M Group is functional  The O&M Group should have the following to be considered functional: <ul style="list-style-type: none"> <li><input type="checkbox"/> Organizational Vision, Mission and Goals, and Long-term Strategic Plan formulated               <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Annual Operational Plan (including O&amp;M plan with corresponding budget) prepared               <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Operational Policies formulated and implemented               <ul style="list-style-type: none"> <li>○ Minutes of approval and adoption by the General Assembly (GA)</li> </ul> </li> </ul>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>3) Operation of O&amp;M Group is managed well</p> <p>The organization should meet majority of the following indicators to warrant a “Yes” answer.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Regular meetings (BOD and General Assembly) conducted, including discussion of financial status (Income and Expenses, Balance Sheet)</li> <li><input type="checkbox"/> Election of Officers conducted as indicated in Constitution and By-Laws</li> <li><input type="checkbox"/> 50% + 1 Attendance in BOD/Officers’ meetings (sex disaggregated)</li> <li><input type="checkbox"/> 50% + 1 Attendance in GA meetings (sex disaggregated)</li> <li><input type="checkbox"/> Conduct of periodic organizational assessments and planning</li> <li><input type="checkbox"/> Proper Records management observed and Report to Oversight Agencies submitted on-time</li> <li><input type="checkbox"/> Increase in Membership (sex disaggregated)</li> <li><input type="checkbox"/> Ability to resolve Conflicts without external intervention</li> <li><input type="checkbox"/> Ability to provide other services to members (e.g. livelihood programs, credit, hospitalization, mortuary, etc.)</li> <li><input type="checkbox"/> Women engagement in paid labor</li> <li><input type="checkbox"/> Staffing/Employment <ul style="list-style-type: none"> <li>○ Presence of complete staff and/or full-time employees</li> <li>○ Provision of incentives to officers/employees (e.g., honorarium, SSS, Philhealth, allowances, non-cash benefits, etc.)</li> </ul> </li> </ul>			
<p><b>Bonus:</b></p> <p><i>Awards and Recognitions received (Recipient of awards (local, regional, national))</i></p>			
<p><b>OVERALL NUMERICAL RATING</b></p> <p><b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i></p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b></p>			
<p><b>IV. FINANCIAL COMPONENT</b></p>			
<p>1) FM Structure</p> <ul style="list-style-type: none"> <li>• There is segregation of duties and responsibilities, different persons are involved in <ul style="list-style-type: none"> <li>2. Collection</li> <li>3. Cashiering</li> <li>4. Recording</li> </ul> </li> </ul>			
<p>2) Bank Account</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a bank account</li> <li><input type="checkbox"/> There are at least two (2) signatories</li> <li><input type="checkbox"/> Account signatories are not personally related</li> </ul>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
3) Tariff <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a tariff set and collection plan</li> <li><input type="checkbox"/> Minutes of tariff setting and adopting tariff set</li> </ul>			
4) Expenditures <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved Disbursement voucher for every disbursement or substitute</li> <li><input type="checkbox"/> OR issued</li> </ul>			
5) Books of Accounts <ul style="list-style-type: none"> <li><input type="checkbox"/> Record of collections</li> <li><input type="checkbox"/> Record of account receivables</li> <li><input type="checkbox"/> Record of expenses (cash book)</li> <li><input type="checkbox"/> Record of Accounts payable</li> </ul>			
6) Financial reports <ul style="list-style-type: none"> <li><input type="checkbox"/> Periodic Report of Income and Expenses</li> <li><input type="checkbox"/> Balance Sheet</li> </ul>			
7) Financial Control <ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct of regular internal audit</li> <li><input type="checkbox"/> Conduct of on-the-spot cash check</li> <li><input type="checkbox"/> Conduct of external audit</li> <li><input type="checkbox"/> No adverse audit findings</li> </ul>			
8) Financial Accomplishment <ul style="list-style-type: none"> <li><input type="checkbox"/> Collection efficiency (% of collection)</li> <li><input type="checkbox"/> Proof of Collection (OR/AR issued for collections or substitute)</li> <li><input type="checkbox"/> Tariff is sufficient to cover operation and maintenance (Monthly tariff vs. Estimated monthly expenses)</li> </ul>			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

<b>Solar/Mechanical Drier</b>		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> </ul>		

<input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> Irrigators' Association maintains the irrigation system		
2) Maintenance Tools/equipment <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		
<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Building Structures</b>		
a. Columns, Beams, walls <input type="checkbox"/> Structural stability; cracks on structures <input type="checkbox"/> Condition of painting <input type="checkbox"/> Vandalism <input type="checkbox"/> Deflections and deformations		
b. Doors and Windows <input type="checkbox"/> Functionality of door knobs; <input type="checkbox"/> Conditions of doors & Jambs, fittings <input type="checkbox"/> Condition of window frames, panels, hinges, locks <input type="checkbox"/> Accessibility		
c. Roofing <input type="checkbox"/> Condition of painting <input type="checkbox"/> Condition of roofing panels <input type="checkbox"/> Gutters, ridge rolls, <input type="checkbox"/> Deformations		
d. Ceiling <input type="checkbox"/> Condition of painting <input type="checkbox"/> Condition of ceiling panels <input type="checkbox"/> Deformations <input type="checkbox"/> Stability of joist and hangers		
e. Electrical System <input type="checkbox"/> Availability of Power Supply <input type="checkbox"/> Serviceability of Lights <input type="checkbox"/> Condition of Switches and outlets <input type="checkbox"/> Safe electrical wiring system		
f. Plumbing and sanitation <input type="checkbox"/> Availability of Potable water supply <input type="checkbox"/> Condition of lavatory and pantry <input type="checkbox"/> Condition of comfort room		



<input type="checkbox"/> Condition of water pipes and drain pipes		
g. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
h. Solar Drier		
i. Concrete Pavement <input type="checkbox"/> Cracks on pavement <input type="checkbox"/> water ponding on pavement <input type="checkbox"/> scaling of pavement <input type="checkbox"/> tilt/settlement of pavement <input type="checkbox"/> cleanliness		
j. Environmental sanitation <input type="checkbox"/> Observed cleanliness <input type="checkbox"/> proper waste disposal		
k. Other Structures per approved design <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
l. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
m. Other Structures per approved design <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1. Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2. Sustainability

- The following components/areas are properly attended to:  
\_\_\_\_\_  
\_\_\_\_\_
- The following areas/structures need to be addressed/improved:  
\_\_\_\_\_  
\_\_\_\_\_
- The following factors contributed to subproject functionality and sustainability:  
\_\_\_\_\_  
\_\_\_\_\_

### 3. Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
- Subproject is managed by community organization
- Users are paying O&M fee; fee is affordable
- There is budget for O&M; budget is enough to cover planned O&M expenses
- There is an O&M plan; planned activities are implemented on schedule

### 4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

---

SB Representative

---

ACT Representative

---

Mayor's Office Representative

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RPMT Representative (if available)

---

MSIT Team Leader (MPDC/ME)

---

NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Gravity-type Water System Sub-Project

DATE OF EVALUATION:

<b>Name of Completed Sub-Project:</b>	
<b>Physical Description:</b>	
<b>Location:</b>	<b>Date of Completion:</b>
<b>Mode of Implementation:</b>	
<b>Approved cost:</b>	<b>Actual Construction cost:</b>
GRANT:	GRANT:
LCC:	LCC:
<b>Last Sustainability Evaluation Rating:</b>	<b>Date Conducted:</b>
<b>O&amp;M Group Managing the Subproject:</b>	
<b>O&amp;M Allocation per year <sup>1</sup>:</b>	

<b>I. SP UTILIZATION</b>	<b>Degree of Responsiveness<sup>2</sup></b>																																																				
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<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality (quality) of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

I. SP UTILIZATION	Degree of Responsiveness <sup>2</sup>
<p>Number of tapstands regularly used</p> <p><input type="checkbox"/> Actual No. of tapstands</p> <p><input type="checkbox"/> Number of tapstands regularly used _____</p> <p>Explain variance, if any.</p> <p>_____</p> <p>_____</p>	
<p>3) Subproject provides 24-hour per day service ___ Yes ___ No</p> <p>If No, why?</p> <p>_____</p> <p>_____</p>	
<p>4) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ___ Yes ___ No</p> <p>What are these instances?</p> <p>_____</p> <p>_____</p> <p>What is the decision of the O&amp;M group to address these issue/s?</p> <p>_____</p> <p>_____</p>	
<p>5) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>6) Does the O&amp;M group have plans for expansion/extension/improvements/construction of additional structures? ___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>7) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p><b>OVERALL NUMERICAL RATING</b></p> <p><b>(SP Utilization – 15%)</b></p>	

<sup>4</sup> A HH was not able to access potable water due to non-payment of tariff.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
<p>1. O&amp;M organization formed and registered and/or accredited</p> <p>For "Yes" answer, the following should be met:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accreditation</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
<p>2. O&amp;M Group is functional</p> <p>The O&amp;M Group should have the following to be considered functional:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Organizational Vision, Mission and Goals, and Long-term Strategic Plan formulated <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Annual Operational Plan (including O&amp;M plan with corresponding budget) prepared <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Operational Policies formulated and implemented <ul style="list-style-type: none"> <li>○ Minutes of approval and adoption by the General Assembly (GA)</li> </ul> </li> </ul>			
<p>3) Operation of O&amp;M Group is managed well</p> <p>The organization should meet majority of the following indicators to warrant a "Yes" answer.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Regular meetings (BOD and General Assembly) conducted, including discussion of financial status (Income and Expenses, Balance Sheet)</li> <li><input type="checkbox"/> Election of Officers conducted as indicated in Constitution and By-Laws</li> <li><input type="checkbox"/> 50% + 1 Attendance in BOD/Officers' meetings (sex disaggregated)</li> </ul>			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<ul style="list-style-type: none"> <li><input type="checkbox"/> 50% + 1 Attendance in GA meetings (sex disaggregated)</li> <li><input type="checkbox"/> Conduct of periodic organizational assessments and planning</li> <li><input type="checkbox"/> Proper Records management observed and Report to Oversight Agencies submitted on-time</li> <li><input type="checkbox"/> Increase in Membership (sex disaggregated)</li> <li><input type="checkbox"/> Ability to resolve Conflicts without external intervention</li> <li><input type="checkbox"/> Ability to provide other services to members (e.g. livelihood programs, credit, hospitalization, mortuary, etc.)</li> <li><input type="checkbox"/> Women engagement in paid labor</li> <li><input type="checkbox"/> Staffing/Employment <ul style="list-style-type: none"> <li><input type="checkbox"/> Presence of complete staff and/or full-time employees</li> <li><input type="checkbox"/> Provision of incentives to officers/employees (e.g., honorarium, SSS, Philhealth, allowances, non-cash benefits, etc.)</li> </ul> </li> </ul>			
<p><b>Bonus:</b> <i>Awards and Recognitions received (Recipient of awards (local, regional, national))</i></p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul> <p><i>Note: Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</i></p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><i>Note: Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and</i></p>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<i>Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</i>			
3) Accessed support are sufficient			
<b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b>			
<b>IV. FINANCIAL COMPONENT</b>			
1) FM Structure <ul style="list-style-type: none"> <li><input type="checkbox"/> There is segregation of duties and responsibilities, different persons are involved in <ul style="list-style-type: none"> <li>i. Collection</li> <li>ii. Cashiering</li> <li>iii. Recording</li> </ul> </li> </ul>			
2) Bank Account <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a bank account</li> <li><input type="checkbox"/> There are at least two (2) signatories</li> <li><input type="checkbox"/> Account signatories are not personally related</li> </ul>			
3) Tariff <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a tariff set and collection plan</li> <li><input type="checkbox"/> Minutes of tariff setting and adopting tariff set</li> </ul>			
4) Expenditures <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved Disbursement voucher for every disbursement or substitute</li> <li><input type="checkbox"/> OR issued</li> </ul>			
5) Books of Accounts <ul style="list-style-type: none"> <li><input type="checkbox"/> Record of collections</li> <li><input type="checkbox"/> Record of account receivables</li> <li><input type="checkbox"/> Record of expenses (cash book)</li> <li><input type="checkbox"/> Record of Accounts payable</li> </ul>			
6) Financial reports <ul style="list-style-type: none"> <li><input type="checkbox"/> Periodic Report of Income and Expenses</li> <li><input type="checkbox"/> Balance Sheet</li> </ul>			
7) Financial Control <ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct of regular internal audit</li> <li><input type="checkbox"/> Conduct of on-the-spot cash check</li> <li><input type="checkbox"/> Conduct of external audit</li> <li><input type="checkbox"/> No adverse audit findings</li> </ul>			
8) Financial Accomplishment			



Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<input type="checkbox"/> Collection efficiency (% of collection) <input type="checkbox"/> Proof of Collection (OR/AR issued for collections or substitute) <input type="checkbox"/> Tariff is sufficient to cover operation and maintenance (Monthly tariff vs. Estimated monthly expenses)			
<b>OVERALL NUMERICAL RATING</b> <b>(Finance Component – 15%)</b>			

Gravity-type Water System		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
1) O&M Plan Implementation <ul style="list-style-type: none"> <li><input type="checkbox"/> Implementation of planned activities</li> <li><input type="checkbox"/> Activities conducted as scheduled</li> <li><input type="checkbox"/> Irrigators' Association maintains the irrigation system</li> </ul>		
2) Maintenance Tools/equipment <ul style="list-style-type: none"> <li><input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available)</li> <li><input type="checkbox"/> Tools are functional and on-site</li> </ul>		
<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Structures and Sub-Structures</b>		
a. Intake Box/Source <ul style="list-style-type: none"> <li><input type="checkbox"/> Walls, Top Slab &amp; Foundation</li> <li><input type="checkbox"/> Pipe Fittings; Over Flow, Valves</li> <li><input type="checkbox"/> Perimeter Diversion canal</li> <li><input type="checkbox"/> Perimeter fence</li> <li><input type="checkbox"/> Tree planting within the Surcharge Area</li> </ul>		
b. Reservoir <ul style="list-style-type: none"> <li><input type="checkbox"/> Walls, Top Slab &amp; Foundation</li> <li><input type="checkbox"/> Pipe Fittings; Over Flow, Valves, Vents</li> <li><input type="checkbox"/> Perimeter Diversion canal</li> <li><input type="checkbox"/> Perimeter fence</li> </ul>		
c. Pipelines (Transmission & Distribution) <ul style="list-style-type: none"> <li><input type="checkbox"/> Exposure/Soil covering for HDPE &amp; uPVC pipeline, Supports and fittings for GI Pipes,</li> <li><input type="checkbox"/> Presence of Leaks and other defects.</li> </ul>		

d. Tap Stand <ul style="list-style-type: none"> <li><input type="checkbox"/> Stability of pedestal</li> <li><input type="checkbox"/> Condition of Faucets</li> <li><input type="checkbox"/> Stability of Concrete flat form</li> <li><input type="checkbox"/> Diversion canal</li> <li><input type="checkbox"/> Flow of Water supply</li> </ul>		
e. Sanitation <ul style="list-style-type: none"> <li><input type="checkbox"/> Cleanliness of structures</li> <li><input type="checkbox"/> Potability of water</li> <li><input type="checkbox"/> Sanitary facilities (bath/comfort rooms)</li> </ul>		
f. Sign Boards <ul style="list-style-type: none"> <li><input type="checkbox"/> Visibility of signboard-Readable Policies</li> <li><input type="checkbox"/> Condition of Signboard</li> </ul>		
g. Other structures per approved design <ul style="list-style-type: none"> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> <li><input type="checkbox"/> _____</li> </ul>		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

**OVER-ALL FINDINGS:**

**1. Functionality**

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

**2. Sustainability**

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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**3. Compliance to O&M Requirements**

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

**4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level**

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	
4.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

---

BLGU Representative

---

MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

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RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## SUB-PROJECT SUSTAINABILITY EVALUATION TOOL (SET) For Pump-driven Water System Sub-Project

DATE OF EVALUATION:

<b>Name of Completed Sub-Project:</b>					
<b>Physical Description:</b>					
<b>Location:</b>			<b>Date of Completion:</b>		
<b>Mode of Implementation:</b>					
<b>Approved cost:</b>			<b>Actual Construction cost:</b>		
GRANT:			GRANT:		
LCC:			LCC:		
<b>Last Sustainability Evaluation Rating:</b>			<b>Date Conducted:</b>		
<b>O&amp;M Group Managing the Subproject:</b>					
<b>O&amp;M Allocation per year <sup>1</sup>:</b>					
<b>I. SP UTILIZATION</b>					<b>Degree of Responsiveness<sup>2</sup></b>
1) Number of beneficiaries					
Type of Beneficiaries	Planned		Actual		Explanation of Variance
	Male/ Male-headed	Female/ Female-headed	Male/ Male-headed	Female/ Female-headed	
Population					
Households (total)					
Families (total) <sup>3</sup>					
Pantawid HHs					
Pantawid Families					
IP HHs					
IP Families					

<sup>1</sup> From AIP or O&M Group Work and Financial Plan approved by General Assembly

<sup>2</sup> This is the perceived/observed/experienced functionality or quality of indicators, with 5 being the highest and 1 lowest.

<sup>3</sup> Data required by OSEC. For succeeding subprojects, total number of families that will benefit from the proposed subproject should also be part of the project proposal/feasibility study.

<p>2) Number of tapstands</p> <p><input type="checkbox"/> Actual _____</p> <p><input type="checkbox"/> Planned _____</p> <p>In case planned vs. actual number do not match, explain why.</p> <p>_____</p> <p>_____</p> <p>Number of tapstands regularly used</p> <p><input type="checkbox"/> Actual No. of tapstands</p> <p><input type="checkbox"/> Number of tapstands regularly used _____</p> <p>Explain variance, if any.</p> <p>_____</p> <p>_____</p>	
<p>3) Subproject provides 24-hour per day service ___ Yes ___ No</p> <p>If No, why?</p> <p>_____</p> <p>_____</p>	
<p>4) Is there an instance where any particular person/HH/group is constrained or prevented from using the facility<sup>4</sup>? ___ Yes ___ No</p> <p>What are these instances?</p> <p>_____</p> <p>_____</p> <p>What is the decision of the O&amp;M group to address these issue/s?</p> <p>_____</p> <p>_____</p>	
<p>5) List down the top three benefits derived from the completed project</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>6) Does the O&amp;M group have plans for expansion/extension/improvements/construction of additional structures?</p> <p>___ Yes ___ No</p> <p>What are the plans?</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	
<p>7) Has the project produced new problems for the community/barangay? ___ Yes ___ No</p> <p>If yes, write down (by order of importance) the top three problems that project has produced.</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	

<sup>4</sup> A HH was not able to access potable water due to non-payment of tariff.

<input type="checkbox"/> _____	
<b>OVERALL NUMERICAL RATING</b> <b>(SP Utilization – 15%)</b>	

<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks <sup>5</sup></b>
<b>II. ORGANIZATION AND MANAGEMENT</b>			
1) O&M organization formed and registered and/or accredited  For "Yes" answer, the following should be met: <ul style="list-style-type: none"> <li><input type="checkbox"/> Record/minutes of formation and BA approval</li> <li><input type="checkbox"/> List of Officers and members               <ul style="list-style-type: none"> <li>○ Record of election/installation</li> <li>○ Posted in the office</li> </ul> </li> <li><input type="checkbox"/> Proof/copy of registration or accredited</li> <li><input type="checkbox"/> Constitution and By-Laws duly approved by General Assembly</li> </ul>			
2) O&M Group is functional  The O&M Group should have the following to be considered functional: <ul style="list-style-type: none"> <li><input type="checkbox"/> Organizational Vision, Mission and Goals, and Long-term Strategic Plan formulated               <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Annual Operational Plan (including O&amp;M plan with corresponding budget) prepared               <ul style="list-style-type: none"> <li>○ Record of formulation, approval and adoption</li> <li>○ Written and posted</li> </ul> </li> <li><input type="checkbox"/> Operational Policies formulated and implemented               <ul style="list-style-type: none"> <li>○ Minutes of approval and adoption by the General Assembly (GA)</li> </ul> </li> </ul>			
3) Operation of O&M Group is managed well			

<sup>5</sup> Comment on the responsiveness and overall quality of indicators/key areas. Include other observations as maybe appropriate.

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p>The organization should meet majority of the following indicators to warrant a “Yes” answer.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Regular meetings (BOD and General Assembly) conducted, including discussion of financial status (Income and Expenses, Balance Sheet)</li> <li><input type="checkbox"/> Election of Officers conducted as indicated in Constitution and By-Laws</li> <li><input type="checkbox"/> 50% + 1 Attendance in BOD/Officers’ meetings (sex disaggregated)</li> <li><input type="checkbox"/> 50% + 1 Attendance in GA meetings (sex disaggregated)</li> <li><input type="checkbox"/> Conduct of periodic organizational assessments and planning</li> <li><input type="checkbox"/> Proper Records management observed and Report to Oversight Agencies submitted on-time</li> <li><input type="checkbox"/> Increase in Membership (sex disaggregated)</li> <li><input type="checkbox"/> Ability to resolve Conflicts without external intervention</li> <li><input type="checkbox"/> Ability to provide other services to members (e.g. livelihood programs, credit, hospitalization, mortuary, etc.)</li> <li><input type="checkbox"/> Women engagement in paid labor</li> <li><input type="checkbox"/> Staffing/Employment <ul style="list-style-type: none"> <li>○ Presence of complete staff and/or full-time employees</li> <li>○ Provision of incentives to officers/employees (e.g., honorarium, SSS, Philhealth, allowances, non-cash benefits, etc)</li> </ul> </li> </ul>			
<p><b>Bonus:</b></p> <p><i>Awards and Recognitions received (Recipient of awards (local, regional, national))</i></p>			
<p><b>OVERALL NUMERICAL RATING</b></p> <p><b>(Organization and Management – 20%)</b></p>			
<p><b>III. INSTITUTIONAL LINKAGE</b></p>			
<p>1) O&amp;M group is able to establish linkages with other organizations or institutions for support</p> <p>Established linkages are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal (with partnership agreements, MOA, etc.)</li> <li><input type="checkbox"/> Informal</li> </ul>			

Key Areas	Yes or No	Degree of Responsiveness / Impact	Remarks <sup>5</sup>
<p><b>Note:</b> Networking and Linkaging may come in the form of (i) membership in federations, M/BDC; (ii) tie-up with other POs, NGOs, NGAs; or (iii) tie-up with P/M/BLGUs.</p>			
<p>2) O&amp;M Group is able to access support from partners referred to in No. 1</p> <p>If yes, what support were accessed? Please check all applicable answers.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Financial</li> <li><input type="checkbox"/> Technical Expertise</li> <li><input type="checkbox"/> Equipment</li> <li><input type="checkbox"/> Supplies</li> </ul> <p><b>Note:</b> Accessed Technical Support may be in the form of: Preparation of Plans; Development of Policies, Systems and Procedures; Conflict Resolution; Resource Persons during Capability Building; Preparation of Proposals.</p>			
<p>3) Accessed support are sufficient</p>			
<p><b>OVERALL NUMERICAL RATING</b> <b>(Institutional Linkage – 10%)</b></p>			
<p><b>IV. FINANCIAL COMPONENT</b></p>			
<p>1) FM Structure</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> There is segregation of duties and responsibilities, different persons are involved in <ul style="list-style-type: none"> <li>i. Collection</li> <li>ii. Cashiering</li> <li>iii. Recording</li> </ul> </li> </ul>			
<p>2) Bank Account</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a bank account</li> <li><input type="checkbox"/> There are at least two (2) signatories</li> <li><input type="checkbox"/> Account signatories are not personally related</li> </ul>			
<p>3) Tariff</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> There is a tariff set and collection plan</li> <li><input type="checkbox"/> Minutes of tariff setting and adopting tariff set</li> </ul>			



<b>Key Areas</b>	<b>Yes or No</b>	<b>Degree of Responsiveness / Impact</b>	<b>Remarks <sup>5</sup></b>
4) Expenditures <input type="checkbox"/> Approved Disbursement voucher for every disbursement or substitute <input type="checkbox"/> OR issued			
5) Books of Accounts <input type="checkbox"/> Record of collections <input type="checkbox"/> Record of account receivables <input type="checkbox"/> Record of expenses (cash book) <input type="checkbox"/> Record of Accounts payable			
6) Financial reports <input type="checkbox"/> Periodic Report of Income and Expenses <input type="checkbox"/> Balance Sheet			
7) Financial Control <input type="checkbox"/> Conduct of regular internal audit <input type="checkbox"/> Conduct of on-the-spot cash check <input type="checkbox"/> Conduct of external audit <input type="checkbox"/> No adverse audit findings			
8) Financial Accomplishment <input type="checkbox"/> Collection efficiency (% of collection) <input type="checkbox"/> Proof of Collection (OR/AR issued for collections or substitute) <input type="checkbox"/> Tariff is sufficient to cover operation and maintenance (Monthly tariff vs. Estimated monthly expenses)			
<b>OVERALL NUMERICAL RATING (Finance Component – 15%)</b>			

<b>Pump-driven Water System</b>		
<b>V. PHYSICAL/TECHNICAL</b>	<b>RATING</b>	<b>REMARKS</b>
<b>A. O&amp;M PLAN, TOOLS &amp; EQUIPMENT</b>		
<b>1) O&amp;M Plan Implementation</b> <input type="checkbox"/> Implementation of planned activities <input type="checkbox"/> Activities conducted as scheduled <input type="checkbox"/> Irrigators' Association maintains the irrigation system		
<b>2) Maintenance Tools/equipment</b> <input type="checkbox"/> Proof of purchase/ownership/rental/ access from other sources (tools available) <input type="checkbox"/> Tools are functional and on-site		

<b>B. SUB-PROJECT STRUCTURES</b>		
<b>1) Structures and Sub-Structures</b>		
a. Intake Box/Source <input type="checkbox"/> Walls, Top Slab & Foundation <input type="checkbox"/> Pipe Fittings; Over Flow, Valves <input type="checkbox"/> Perimeter Diversion canal <input type="checkbox"/> Perimeter fence <input type="checkbox"/> Tree planting within the Surcharge Area		
b. Reservoir <input type="checkbox"/> Walls, Top Slab & Foundation <input type="checkbox"/> Pipe Fittings; Over Flow, Valves, Vents <input type="checkbox"/> Perimeter Diversion canal <input type="checkbox"/> Perimeter fence		
c. Pipelines (Transmission & Distribution) <input type="checkbox"/> Exposure/Soil covering for HDPE & uPVC pipeline, Supports and fittings for GI Pipes, <input type="checkbox"/> Presence of Leaks and other defects.		
d. Tap Stand <input type="checkbox"/> Stability of pedestal <input type="checkbox"/> Condition of Faucets <input type="checkbox"/> Stability of Concrete flat form <input type="checkbox"/> Diversion canal <input type="checkbox"/> Flow of Water supply		
e. Sanitation <input type="checkbox"/> Cleanliness of structures <input type="checkbox"/> Potability of water <input type="checkbox"/> Sanitary facilities (bath/comfort rooms)		
f. Sign Boards <input type="checkbox"/> Visibility of signboard-Readable Policies <input type="checkbox"/> Condition of Signboard		
g. Other structures per approved design <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<b>OVERALL NUMERICAL RATING</b> <b>(Physical-Technical Component – 40%)</b>		

<b>FINAL RATING</b>	<b>Numerical Rating</b>	<b>Adjectival Rating</b>

## OVER-ALL FINDINGS:

### 1. Functionality

- In summary, the subproject physical status is (please check):
  - Well-maintained/in good condition
  - Needs minor repairs
  - Needs major repairs
  - Structure not functional
- In terms of services provided, the subproject:
  - Provides services beyond target beneficiaries
  - Serves target beneficiaries
  - Serves less than the target beneficiaries
  - Provides no benefits

### 2. Sustainability

- The following components/areas are properly attended to:

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- The following areas/structures need to be addressed/improved:

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- The following factors contributed to subproject functionality and sustainability:

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### 3. Compliance to O&M Requirements

- The following O&M requirements are met (check if yes, x if no):
  - Subproject is managed by community organization
  - Users are paying O&M fee; fee is affordable
  - There is budget for O&M; budget is enough to cover planned O&M expenses
  - There is an O&M plan; planned activities are implemented on schedule

### 4. Problems/difficulties in O&M of subproject were addressed/resolved at the community level

Problems/Difficulties	Actions Taken/Recommendations
1.	
2.	
3.	

**Multi-Stakeholders Inspectorate Team Members (MSIT)**

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O&M Organization Representative

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BLGU Representative

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MIAC Representative

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SB Representative

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ACT Representative

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Mayor's Office Representative

---

RPMT Representative (if available)

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MSIT Team Leader (MPDC/ME)

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NPMO Representative (if available)

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## FUNCTIONALITY AUDIT TOOL

### (For Sub-Projects with Tariff)

Name of Sub-project: \_\_\_\_\_

Location: \_\_\_\_\_

Date of Functionality Audit: \_\_\_\_\_

#### I. Organizational Preparedness

Key Area	Yes	No	Remarks (Explanation for "No" Answers)
a. O&M Group formed			
b. O&M Group recognized, registered or accredited			
c. O&M Group trained on Operation and Maintenance (includes technical, organizational and financial management)			
d. O&M Group with clear Organizational Direction (Vision, Mission, Goal, Objectives and Annual Plan)			
e. Policies, Systems and Procedures in place (Organizational/By-laws and sub-project O&M policies)			
<b>SUB-TOTAL</b>			

#### INTEPRETATION:

- Sub-project will not be turned over if any item above has "No" answers. CEF shall facilitate activities leading to the accomplishment of the desired outputs.

#### II. Functionality of Sub-project

Key Area	Yes	No	Remarks (Explanation for "No" Answers)
1. Sub-project completed as planned/designed: All work items were completed based on Program of Works, Plans and Specifications			
2. Workmanship: 2.1 Work quality acceptable to community 2.2 Sub-project passed Engineering quality			
3. Serviceability: All structures and sub-structures are functioning			

#### INTEPRETATION:

- If **Item 1** has "No" answer (that is, completed "as-built" or with variation order):  
Sub-project will be turned over to the community. However, the BLGU/community is required to complete the sub-project as stipulated in the Sub-project Agreement. This will be contained in the revised Mutual Partnership Agreement (MPA).

- If **Item 2** has “No” answer:  
Sub-project will be turned over to the community, provided, the O&M group commits to undertake improvement once they are generating income from sub-project.
- If **Item 3** has “No” answer:  
Sub-project will **NOT** be turned over to the community. Require implementer (i.e., contractor or BSPMC, whichever is applicable) to do rectification works to ensure functionality of sub-project prior to turnover.

**Means of Verification**

Key Area	Means of Verification
a. O&M Group formed	<ul style="list-style-type: none"> <li>• Minutes of the meeting citing the formation of the O&amp;M group</li> <li>• Attendance Sheet</li> </ul>
b. O&M Group recognized, registered or accredited	<ul style="list-style-type: none"> <li>• Certificate of Registration</li> <li>• SB Resolution on Recognition or Accreditation</li> </ul>
c. O&M Group trained on Operation and Maintenance (includes technical, organizational and financial management)	<ul style="list-style-type: none"> <li>• Activity Proposal</li> <li>• Training Report</li> <li>• Attendance Sheet</li> </ul>
d. O&M Group with clear Organizational Direction (Vision, Mission, Goal, Objectives and Annual Plan)	<ul style="list-style-type: none"> <li>• Minutes of, or General Assembly Resolution ratifying the VMGO and Annual Plan</li> </ul>
e. Policies, Systems and Procedures in place	<ul style="list-style-type: none"> <li>• Minutes of, or General Assembly Resolution ratifying the Constitution and By-laws, O&amp;M policies and tariff</li> </ul>
f. Functionality of Sub-project	<ul style="list-style-type: none"> <li>• Duly signed Final Inspection Report</li> <li>• <u>For Workmanship on Engineering Standards</u> – Certification of Technical Facilitator or Municipal Engineer attesting that sub-project passed Engineering quality</li> </ul>

Department of Social Welfare and Development  
National Community Driven Development Program  
Interim Financial Reports for the Quarter ended mmm-dd-yyyy

## STATEMENT OF SOURCES AND USES OF FUNDS

Sources of Funds	For the Quarter (PhP)				Year to Date (PhP)				Inception to Date (PhP)			
	Work Bank	ADB	GOP	Total	Work Bank	ADB	GOP	Total	Work Bank	ADB	GOP	Total
Receipts	XX	XX	XX	XXX	XXX	XXX	XXX	XXXX	XXXX	XXXX	XXXX	XXXX
<b>Total Receipts</b>	XX	XX	XX	XXX	XXX	XXX	XXX	XXXX	XXXX	XXXX	XXXX	XXXX
<b>Uses of Funds</b>												
<b>Component 1 (a): Barangay (Community) Sub-Grants</b>	XX	XX		XXX	XX	XX		XXX	XXXX	XXXX		XXXX
<b>Component 1 (b): Planning Grants</b>												
Social Preparation/CEAC												
Technical Assistance Fund												
Community Trainings outside CEAC												
<b>Component 2: Local Capacity Building and Implementation Support</b>	X		X	X	XX		XX	XX	XXXX		XXXX	XXXX
Area Coordinating Team Staff												
Salaries												
Other Incidental Cost												
Trainings												
LGU Staff trainings												
<b>Component 3: Program Administration, Monitoring and Evaluation, Local Capacity Building and Implementation Support</b>	X	X	X	X	XX	XX	XX	XX	XXXX	XXX	XXXX	XXXX
National PMO	X	X	X	X	XX	XX	XX	XX	XXXX	XXX	XXXX	XXXX
Regional PMO	X		X	X	XX		XX	XX	XXXX		XXXX	XXXX
Monitoring and Evaluation	X		X	X	XX		XX	XX	XXXX		XXXX	XXXX
Training and Workshops	X	X	X	X	XX	XX	XX	XX	XXXX	XXX	XXXX	XXXX
Advocacy	X	X	X	X	XX	XX	XX	XX	XXXX	XXX	XXXX	XXXX
Goods	X	X	X	X	XX	XX	XX	XX	XXXX	XXX	XXXX	XXXX
<b>Total Expenditure</b>	XX	XX	XX	XX	XXX	XXX	XXX	XXX	XXXX	XXXX	XXXX	XXXX
<b>SURPLUS/(DEFICIT)</b>	X	X	X	X	XX	XX	XX	XX	XXX	XXX	XXX	XXX
<b>OPENING BALANCE</b>	X	X	X	X	X	X	X	X				
<b>CLOSING BALANCE</b>	XX	XX	XX	XX	XX	XX	XX	X	XXX	XXX	XXX	XXX

Department of Social Welfare and Development  
National Community Driven Development Program  
Interim Financial Reports for the Quarter ended mmm-dd-yyyy

**VARIANCE ANALYSIS OF USE OF FUNDS – CONSOLIDATED FROM ALL SOURCES**  
(In million Php)

	Quarter			Cumulative for the Year			Cumulative – Inception to Date		
	Planned	Actual	Variance	Planned	Actual	Variance	Planned	Actual	Variance
<b>Component 1 (a): Barangay (Community) Sub-</b>	x	x	x	x	x	x	x	x	x
<b>Component 1 (b): Planning Grants</b>									
Social Preparation/CEAC	x	x	x	x	x	x	x	x	x
Technical Assistance Fund	x	x	x	x	x	x	x	x	x
Community Trainings outside CEAC	x	x	x	x	x	x	x	x	x
<b>Component 2: Local Capacity Building and Implementation Support</b>	xx	xx	x	xx	xx	x	xx	xx	x
Area Coordinating Team Staff	x	x	x	x	x	x	x	x	x
Salaries	x	x	x	x	x	x	x	x	x
Other Incidental Cost	x	x	x	x	x	x	x	x	x
Trainings	x	x	x	x	x	x	x	x	x
LGU Staff Trainings	x	x	x	x	x	x	x	x	x
<b>Component 3: Program Administration, Monitoring and Evaluation, Local Capacity Building and Implementation Support</b>	x	x	x	x	x	x	x	x	x
National PMO	x	x	x	x	x	x	x	x	x
Regional PMO	x	x	x	x	x	x	x	x	x
Monitoring and Evaluation	x	x	x	x	x	x	x	x	x
Training and Workshops	x	x	x	x	x	x	x	x	x
Advocacy	x	x	x	x	x	x	x	x	x
Goods	x	x	x	x	x	x	x	x	x



Department of Social Welfare and Development  
National Community Driven Development Program  
Interim Financial Reports for the Quarter ended mmm-dd-yyyy

## CASH FORECAST FOR THE 6 MONTHS ENDING MMM-DD-YYYY

	Cash Requirements		Cash Requirement for Next Six Months	
	Quarter ended mmm-dd-yyyy	Quarter ended mmm-dd-yyyy		
	PhP	PhP	PhP	USD
<b>Component 1 (a): Barangay (Community) Sub-Grants</b>	XX	XX	XX	XX
<b>Component 1 (b): Planning Grants</b>	XX	XX	XX	XX
Social Preparation/CEAC	XX	Xx	XX	XX
Technical Assistance Fund	XX	XX	XX	XX
Community Trainings outside CEAC	XX	XX	XX	XX
<b>Component 2: Local Capacity Building and</b>	XX	XX	XX	XX
Area Coordinating Team Staff	XX	XX	XX	XX
Salaries	XX	XX	XX	XX
Other Incidental Cost	XX	XX	XX	XX
Trainings	XX	XX	XX	XX
LGU Staff Trainings	XX	XX	XX	XX
<b>Component 3: Program Administration, Monitoring and Evaluation, Local Capacity Building and Implementation Support</b>	XX	XX	XX	XX
National PMO	XX	XX	XX	XX
Regional PMO	XX	XX	XX	XX
Monitoring and Evaluation	XX	XX	XX	XX
Training and Workshops	XX	XX	XX	XX
Advocacy	XX	XX	XX	XX
Goods	XX	XX	XX	XX
	<b>XX</b>	<b>XX</b>	<b>XX</b>	<b>XX</b>

Necessary workings to support the forecast should be attached.

Department of Social Welfare and Development  
National Community Driven Development Program  
Interim Financial Reports for the Quarter ended mmm-dd-yyyy  
**DESIGNATED ACCOUNT ACTIVITY STATEMENT**

	Note	US\$	US\$
<b>PART I</b>			
1. Cumulative Advances to the end of current quarter			x
2. Cumulative Expenditure to the end of last quarter			x
3. Outstanding Advances to be accounted for (Line 1 minus Line 2)			x
<b>PART II</b>			
4. DA balance at beginning of quarter			x
5. Add/Subtract: Cumulative Adjustments (if any)		x	
6. Advances from Loan proceeds during the quarter		x	
7. Sub-total of Advances and Adjustments			x
8. Outstanding Advances to be accounted for (Line 4 plus Line 7)			x
9. DA balance at end of quarter			x
10. Add/Subtract: Cumulative Adjustment (if any)		x	
11. Expenditure for current reporting period		x	
12. Subtotal of Adjustments and Expenditure			x
13. Advances accounted for (Add Line 9 and Line 12)			x
14. Difference if any (Line 8 minus Line 13)			x
<b>PART III</b>			
15. Total forecasted amount to be paid by WB			x
16. Less: Closing DA balance		x	
17. Forecasted Direct Payments		x	
1. Subtotal of closing DA balance and forecasted payments (Line 16 plus Line 17)			x
2. Cash to be disbursed for the next reporting period (Line 15 minus Line 18)			x

Note: Bank reconciliation statement and copy of the bank statement for the period should be attached

Department of Social Welfare and Development  
 National Community Driven Development Program  
 Interim Financial Reports for the Quarter ended mmm-dd-yyyy

**DESIGNATED ACCOUNT EXPENDITURES FOR CONTRACTS SUBJECT TO PRIOR REVIEW**

Expenditure	Name & Address of Supplier / Consultant	Contract No. and Date	Contract Currency and Value	Invoiced Amounts to the close of quarter (by currency)	% Financed	Amount Eligible for Financing (In contract currency)	Amount Paid till close of the quarter (US Dollar)	Contract Balance Carried Forward
Goods								
Non-Consulting Services								
Consultant's Services								
Training and Workshops								
Incremental Operating Cost								
Sub-Grants Under Component 1 (a)*								
Sub-Grants Under Component 1 (b)*								

\* Only as applicable

Department of Social Welfare and Development  
 National Community Driven Development Program  
 Interim Financial Reports for the Quarter ended mmm-dd-yyyy

**DESIGNATED ACCOUNT EXPENDITURES FOR CONTRACTS NOT SUBJECT TO PRIOR REVIEW**

Expenditure Type	Contract Currency and Value	Invoiced Amounts to the close quarter (by currency)	Eligible for Financing (%age)	Paid from Designated Account (US Dollar)
Goods				
Non Consulting Services				
Consultant's Services				
Training and Workshops				
Incremental Operating Cost				
Sub-Grants under Part 1 (a)				
Sub-Grants under Part 1 (b)				

**Department of Social Welfare and Development**  
 (Name of CDD Project/Program)

**REGIONAL CONSOLIDATED STATUS OF SUB-PROJECT FUND UTILIZATION REPORT**

For the Quarter \_\_\_\_\_

Region: \_\_\_\_\_

Total Planned: \_\_\_\_\_

Total Actual: \_\_\_\_\_

Cash: \_\_\_\_\_

Cash: \_\_\_\_\_

In-kind: \_\_\_\_\_

In-kind: \_\_\_\_\_

Municipality	No. of Approved Sub-Project	Total Project Cost			Utilization							Balance	
					Grants			LCC			Cumulative Total		
		Grant	LCC	Total	Previous Month	This Month	Total	Previous Month	This Month	Total			
A	B	C	D	E (C+D)	F	G	H (F+G)	I	J	K (I+J)	L (H+J)	M (E-L)	

Prepared by: \_\_\_\_\_

Certified Correct: \_\_\_\_\_

Noted by: \_\_\_\_\_

Financial Analyst

Regional Financial Analyst

DSWD-Regional Director/ARD

**Department of Social Welfare and Development**  
**(Name of CDD Project/Program)**

Regional Office \_\_\_\_\_

**REGIONAL CONSOLIDATED STATUS OF LOCAL COUNTERPART CONTRIBUTION**

For the Quarter \_\_\_\_\_

Activities	PLGU			MLGU			BLGU			Community/Others			Total		
	Planned	Actual	Balance	Planned	Actual	Balance	Planned	Actual	Balance	Planned	Actual	Balance	Planned	Actual	Balance
<b>CEAC:</b>															
Social Preparation															
Project Identification/Selection															
Project Approval															
Technical Trainings for Volunteers															
Implementation Support															
Monitoring and Evaluation															
MIAC Meetings															
<b>CBIS:</b>															
Trainings															
Personnel Services															
Admin Cost															
<b>M&amp;E</b>															
<b>Sub-Total</b>															
<b>SPI</b>															
<b>Sub-Total</b>															
<b>Total</b>															

Prepared by:

Certified Correct:

Noted by:

\_\_\_\_\_  
 Financial Analyst

\_\_\_\_\_  
 Regional Financial Analyst

\_\_\_\_\_  
 DSWD-Regional Director/ARD

**Department of Social Welfare and Development**  
 (Name of CDD Project/Program)

**MUNICIPAL CONSOLIDATED STATUS OF SUB-PROJECT FUND UTILIZATION REPORT**

As of \_\_\_\_\_

Region: \_\_\_\_\_ Total Planned: \_\_\_\_\_ Total Actual: \_\_\_\_\_  
 Province: \_\_\_\_\_ Cash: \_\_\_\_\_ Cash: \_\_\_\_\_  
 Municipality: \_\_\_\_\_ In-kind: \_\_\_\_\_ In-kind: \_\_\_\_\_

Barangay	Sub-Project Title	Total Project Cost			Utilization							Balance
		Grant	LCC	Total	Grants			LCC			Cumulative Total	
					Previous Month	This Month	Total	Previous Month	This Month	Total		
A	B	C	D	E (C+D)	F	G	H (F+G)	I	J	K (I+J)	L (H+J)	M (E-L)

Prepared by: \_\_\_\_\_ Reviewed by: \_\_\_\_\_ Certified Correct: \_\_\_\_\_ Noted by: \_\_\_\_\_  
*Financial Analyst*                      *Municipal Accountant*                      *Regional Financial Analyst*                      *DSWD-Regional Director/ARD*

Department of Social Welfare and Development  
(Name of CDD Project/Program)

**MUNICIPAL CONSOLIDATED STATUS OF LOCAL COUNTERPART CONTRIBUTION**

As of \_\_\_\_\_

Province:  
Municipality:  
No. of Barangays:

Grant:  
LCC:

Total Planned:  
Cash:  
In-kind:

Total Actual:  
Cash:  
In-kind:

CATE-GORY	ACTIVITIES	MLGU			BLGU			OTHERS (see attached sheet)			TOTAL		
		Planned	Actual	Balance	Planned	Actual	Balance	Planned	Actual	Balance	Planned	Actual	Balance
<b>CBIS</b>	<b>CEAC:</b>												
	Social Preparation												
	Project Identification/Selection												
	Project Approval												
	Technical Trainings for Volunteers												
	Implementation Support												
	Monitoring and Evaluation												
	MIAC Meetings												
	<b>Trainings</b>												
	<b>Personnel Services</b>												
	<b>Admin Cost</b>												
	<b>Sub-Total</b>												
<b>M&amp;E</b>	<b>Monitoring and Evaluation</b>												
	<b>Sub-Total</b>												
<b>SPI</b>	<b>Sub-Project Implementation</b>												
	<b>Sub-Total</b>												
	<b>Total</b>												

Prepared by:

Approved by:

Reviewed by:

Noted by:

*Municipal Accountant*

*Municipal Mayor*

*Regional Financial Analyst*

*DSWD RD/RPM*







## LBP Certification of Bank Account Opened

Date:

This is to certify that Barangay \_\_\_\_\_ has opened the (Name of CDD Program) -

\_\_\_\_\_ (name of barangay) current account with the Land Bank of the Philippines with

the following details:

LBP Branch: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Current Account Number: \_\_\_\_\_

Authorized Signatories:

**NAME****DESIGNATION****SPECIMEN SIGNATURE**

1.

2.

3.

By:

**LBP Branch Manager**

**Note: This form shall be submitted as part of the requirement for the approval of detailed sub-project proposal by the MIBF. This will be used by the Area Coordinating Team as source document in the preparation of Summary List of Approved Sub-Projects (MIBF Form No. 1)**

**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
 (Name of CDD Project/Program)

**Technical Assistance Fund Journal**

Barangay: \_\_\_\_\_  
 Municipality: \_\_\_\_\_

Bank Account No. \_\_\_\_\_

Date	DV No.	Payee	Particulars	Cash Receipts			Cash Disbursements						Balance	
				Grants	LCC (write source of cash contribution)	Sub-Total	Office Supplies	Communication	Travel	Materials	Other (Write other expense items)	Sub-Total		
			<b>Total</b>											

## Request for Fund Release

1<sup>st</sup> Tranche    2<sup>nd</sup> Tranche    3<sup>rd</sup> Tranche    Others (specify)

Region		Date (mm/dd/yy)	
Province		Sub-Project ID No.	
Municipality		Total Sub-Project Cost	
		LCC	
Barangay		Grant Funds	
Sub-Project Title			

**To:    The Regional Project Director  
          DSWD Regional Office \_\_\_\_\_**

May we request for the transfer of funds to the following LBP Community Bank Account for the implementation of the KC-NCDDP approved Sub-Project stated above.

LBP Branch: \_\_\_\_\_

Address: \_\_\_\_\_

Account Name:	Bank Account No.	Amount of this Request	No. of this Tranche	Previous Amounts Released	Cumulative Total including this Request

**Requested by:**

\_\_\_\_\_  
Barangay Sub-Project Management Committee  
Chairperson

\_\_\_\_\_  
Punong Barangay

**Reviewed as to completeness of requirements:**

\_\_\_\_\_  
Area Coordinator

Date: \_\_\_\_\_

\_\_\_\_\_  
Municipal LGU Local Poverty Reduction Action Officer

Date: \_\_\_\_\_

**Regional Project Management Office:**

**Reviewed by:**

\_\_\_\_\_  
Regional Financial Analyst

**Recommended by:**

\_\_\_\_\_  
Regional Program Manager

Date: \_\_\_\_\_

**Approved by:**

\_\_\_\_\_  
Regional Program Director

Date: \_\_\_\_\_

**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
**(Name of CDD Project/Program)**

Barangay: \_\_\_\_\_  
 Municipality: \_\_\_\_\_

DV No. \_\_\_\_\_  
 (must be pre-numbered)

**Disbursement Voucher**

Payee: \_\_\_\_\_ Date: \_\_\_\_\_  
 Complete Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PARTICULARS	AMOUNT
<i>Write full description of the transaction to be paid. Put reference such Purchase Order Number of Billing Statement.</i>	
<b>ACCOUNT TITLE</b>	
The Treasurer should fill this up using the cost items indicated in the POW.	

Received the amount of \_\_\_\_\_ (P \_\_\_\_\_)  
 in full payment of the account described above.

**Date** \_\_\_\_\_

**O.R. No.** *(Write Official Receipt No.)*

**Check No.** *(Write the no. of the Check issued by the Treasurer)*

**Received by:**

PRINT THE FULL NAME OF THE PERSON RECEIVING THE PAYMENT. WRITE CLEARLY.

\_\_\_\_\_  
 Signature over Printed Name

**Prepared by:**

**Approved by:**

\_\_\_\_\_  
 Barangay Treasurer

\_\_\_\_\_  
 BSPMC Chairperson

**Reviewed by:**

\_\_\_\_\_  
 Municipal Financial Analyst

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

(Name of CDD Project/Program)

Barangay:

Municipality:

**Petty Cash Voucher**

Payee: \_\_\_\_\_

PCV No. \_\_\_\_\_

(must be pre-numbered)

Date: \_\_\_\_\_

Particulars	Amount	
<b>TOTAL</b>		

Requested by:

Approved by:

Received by:

\_\_\_\_\_  
(Name of Person making the Request)\_\_\_\_\_  
Sub-Project Implementation Head\_\_\_\_\_  
(Print name of person receiving cash)

**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
(Name of CDD Project/Program)

**Petty Cash Fund Liquidation Summary (PCF - \_\_\_\_\_)**

Write the No. of this Liquidation Summary Report

For the period \_\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_

Barangay: \_\_\_\_\_

Municipality: \_\_\_\_\_

Date	PCV No.	Payee	Particulars	Expense Items				Total
				Office Supplies (inc photo- copying)	Transportatio n Expense	Meals	Other (specify)	
							Write	
							Other	
							Expense	
							items	
<b>TOTAL</b>								

Prepared by:

Approved by:

*Barangay Treasurer*

*BSPMC Chairperson*



## Employment Record Sheet

For Community Force Account Labor

For the period \_\_\_\_\_ to \_\_\_\_\_ (mm/dd/yy)

Name of Sub-Project: \_\_\_\_\_

Barangay: \_\_\_\_\_ Municipality: \_\_\_\_\_

Last Name	First Name	Sex (M/F)	Date of Birth (mm/dd/yyyy)	Type		Rate Per		No. of Working		Total Labor	Actual Payment		Signature
				Skilled	Unskilled	Day	Hour	Days	Hours		Cash	In-Kind	
1													
2													
3													
4													
5													
6													
<b>Total</b>													

Skill and Gender Summary				
Category	Number	Cash	In-Kind	Total
Skilled - Female				
Skilled - Male				
Unskilled - Female				
Unskilled - Male				
<b>TOTAL</b>				

Note:

**Rate** – is the rate per day or per hour of the community worker (cash plus in-kind/“bayanihan” monetized)

**Cash** – is the cash amount to be paid to community members for labor

**In-kind** – is the cost of labor not to be paid (Community Equity)

Note: This summary shall only be indicated in the first page.

Prepared by:

Noted by:

Approved by:

\_\_\_\_\_  
Head, Procurement Team

\_\_\_\_\_  
Head, Project Implementation Team

\_\_\_\_\_  
Barangay Treasurer

\_\_\_\_\_  
BSPMC Chairperson

## Employment Record Sheet

For Hauling

For the period \_\_\_\_\_ to \_\_\_\_\_ (mm/dd/yy)

Name of Sub-Project: \_\_\_\_\_

Barangay: \_\_\_\_\_ Municipality: \_\_\_\_\_

Last Name	First Name	Sex (M/F)	Date of Birth (mm/dd/yyyy)	Rate per Quantity		Actual Output		Total	Actual Payment		Signature
				Amount	Unit/Item	Quantity	Unit/Item		Cash	In-Kind	
1											
2											
3											
4											
5											
6											
<b>Total</b>											

Skill and Gender Summary				
Category	Number	Cash	In-Kind	Total
Unskilled - Female				
Unskilled - Male				
<b>TOTAL</b>				

Note: This summary shall only be indicated in the first page.

Note:

**Rate** – is the hauling rate per item or unit specified in the Contract of Agreement (cash plus in-kind/“bayanihan” monetized)

**Actual Output** – is the total number of items hauled as reflected in the Statement of Work Accomplished (SWA)

**Cash** – is the cash amount to be paid to community worker for labor

**In-kind** – is the cost of labor not to be paid (Community Equity)

Prepared by:

Noted by:

Approved by:

\_\_\_\_\_  
Head, Procurement Team

\_\_\_\_\_  
Head, Project Implementation Team

\_\_\_\_\_  
Barangay Treasurer

\_\_\_\_\_  
BSPMC Chairperson

## Employment Record Sheet

For Pakyaw

For the period \_\_\_\_\_ to \_\_\_\_\_ (mm/dd/yy)

Name of Sub-Project: \_\_\_\_\_

Barangay: \_\_\_\_\_ Municipality: \_\_\_\_\_

Last Name	First Name	Sex (M/F)	Date of Birth (mm/dd/yyyy)	Rate per Contract Price		Actual Output (Percentage Work of Accomplishment)	Total	Actual Payment		Signature
				Amount	Unit/Item			Cash	In-Kind	
1										
2										
3										
4										
5										
6										
<b>Total</b>										

Skill and Gender Summary				
Category	Number	Cash	In-Kind	Total
Skilled - Female				
Skilled - Male				
Unskilled - Female				
Unskilled - Male				
<b>TOTAL</b>				

Note:

**Rate** – is the rate specified in the pakyaw contract allotted to the community worker (cash plus in-kind/“bayanihan” monetized)

**Actual Output** – is the percentage of work completed as reflected in the Statement of Work Accomplished (SWA)

**Cash** – is the cash amount to be paid to community worker for labor

**In-kind** – is the cost of labor not to be paid (Community Equity)

Note: This summary shall only be indicated in the first page.

Prepared by:

Noted by:

Approved by:

\_\_\_\_\_  
Head, Procurement Team

\_\_\_\_\_  
Head, Project Implementation Team

\_\_\_\_\_  
Barangay Treasurer

\_\_\_\_\_  
BSPMC Chairperson

## Time Sheet

Name : Sex :  
 Payroll Period : Age :  
 Nature of Work :

Day	Total Hrs.	Work Accomplishment / Activity	Work Location	
1				
2				
3				
4				Rate/Day or
5				Rate/Month P _____
6				x
7				Total No. of Days
8				Worked _____
9				=
10				Total Amount of
11				compensation
12				_____
13				
14				
15				
16				
17				
18				
19				
20				_____
21				(Signature over name)
22				
23				I HEREBY CERTIFY
24				that the time report
25				above is a true and
26				complete statement of
27				my working time for
28				this period.
29				
30				
31				
Total Hours				

This is a suggested format of Time Sheet.

**Approved by:**

BSPMC Chairperson

Date:

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

(Name of CDD Project/Program)

Barangay \_\_\_\_\_

Municipality \_\_\_\_\_

**Acknowledgment Receipt**

AR# \_\_\_\_\_

Date \_\_\_\_\_

Please acknowledge receipt in the amount of \_\_\_\_\_  
\_\_\_\_\_  
(P \_\_\_\_\_)

Received from \_\_\_\_\_

For the Purpose of \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cash/Check No. : \_\_\_\_\_

Date : \_\_\_\_\_

Amount : \_\_\_\_\_

Prepared by : \_\_\_\_\_

(Signature over printed name)

Received by : \_\_\_\_\_

(Signature over printed name)

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



**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
(Name of CDD Project/Program)

**Status of Sub-Project Fund Utilization**

For the period \_\_\_\_\_

Barangay:

Municipality:

Name of Sub-Project:

Particulars	Grant Funds	Local Counterpart Contribution			Total e (a+b)
	LP	Cash	In-kind	Total	
	a	b	C	d (b+c)	
<b>Cash Balance Beginning</b>					
Add: Funds Received during this Period					
CDD Grant – Tranche					
LGU					
Community/Others					
<b>Total Funds Available</b>					
Less: Expenses incurred during this Period					
Materials					
Labor					
Equipment					
Lot					
Contract of Works					
Freight and Handling					
Material Testing					
Supervision					
Pre-Engineering					
Bond Premium					
Administrative Expenses					
Others (please specify)					
<b>Total Expenses for the Period</b>					
<b>Cash Balance, End</b>					

Prepared by:

Approved by:

Reviewed by:

\_\_\_\_\_  
Community Bookkeeper

\_\_\_\_\_  
BSPMC Chairperson

\_\_\_\_\_  
Audit & Inventory Committee Head

**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
 (Name of CDD Project/Program)

**Cash Book**

Barangay:

Municipality:

Date	Ref	Particulars	Cash In (Received)			Cash Out (Payment)								Cum Balance	
			Amount	Grants (LP)	LCC (Cash)	Amount	Fund Source	Direct Cost			Indirect Cost				
								Materials	Labor	Eqpt	Supplies	Travel	Others		

Sources: Cash Receipts - Notice of Fund Transfer  
 Deposit Slip of Local Cash Contributions/Acknowledgement Receipts  
 Payments- Disbursement Vouchers

Recapitulation:	Funds Utilized		
Particulars	Grant	LCC	Total
Materials			
Labor			
Equipt			
Supplies			
Indirect Cost			
<b>Total</b>			





**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT****(Name of CDD Project/Program)**

Barangay : \_\_\_\_\_

Municipality : \_\_\_\_\_

VLCC No. \_\_\_\_\_

Date: \_\_\_\_\_

**Voucher for Local Counterpart Contributions**

Contributor/Donor: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

<b>Particulars</b>	<b>Amount</b>
<b>Account Title</b>	

Note: attach to this voucher, photocopy or duplicate copy of the source document.

**Prepared by:****Concurred:****Approved:**



It is hereby certified that (i) the above amounts have been incurred and paid for proper execution of project activities under the terms and conditions of the Loan Agreement, (ii) all documentation authenticating these expenditures has been retained in [SPECIFY LOCATION] and will be made available for examination by auditors and ADB representatives upon request, and (iii) payments have not been split to enable them to pass through the approved SOE ceiling.

---

Representative's Signature, Name and Position

Notes:

- a Prepare separate SOE for each category or subcategory
- b For all individual payments exceeding the approved SOE ceiling, prepare a separate Summary Sheet (Appendix 7B) and attach the required supporting documents.
- c Ensure that the total amount or the aggregate of all SOE agrees with the sum indicated in the withdrawal application.
- d Applicable for liquidation/replenishment of advance under the imprest fund procedure. Indicate the actual foreign exchange rates used for each transaction (see additional notes and illustration on the next page)
- e Indicate down payment advance payment, an installment payment number, interim Payment Certificate number or other relevant information.
- f Representative of executing/implementing agency which prepared the SOE.

## STATEMENT OF EXPENDITURES

(No Records Required for Submission)

PAYMENTS MADE DURING THE REPORTING PERIOD FROM \_\_\_\_\_ (Day/Month) TO \_\_\_\_\_ (Day/Month/Year)

1	2	3	4	5	6	7	8	9	10	11	12
Item No.	Name of Contractor / Supplier / Consultants	Contract Number and Contract Date	Contract Prior Reviewed (Y/N)	WB Control Number ** (if applicable)	Contract Amount (PhP)	Total Invoice Amount (PhP)	% Eligibility	Amount Eligible for Financing (PhP)	Amount Charged to Designated Account (if applicable) USD	Exchange Rate	Remarks
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
<b>Total</b>											

Note: \*\*WB control number applicable only when contract was prior reviewed by the Bank

Supporting Documents for this SOE retained at Department of Social Welfare and Development, Quezon City

**Prepared by:**

(Name and Signature)  
Project Accountant

**Verified by:**

(Name and Signature)  
Financial Management Specialist

# **USER GUIDE**

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**Guide CDD A-01: Municipal Activity Attendance Sheet**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Venue	Shows the actual location of the conducted activity	Text
Date/Duration	Shows the actual date of the conducted activity	Date format
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Title	Shows the title of the activity	Text
Last Name	Shows the Family Name of the attendee	Text
First Name	Shows the First/Given Name of the attendee	Text
M.I.	Shows the initials of the Middle Name of the attendee	Text
Pantawid	Shows a check symbol if the attendee is a beneficiary of Pantawid Pamilya	Check symbol
SLP	Shows a check symbol if the attendee is a beneficiary of SLP	Check symbol
IP	Shows a check symbol if the attendee is an IP	Check symbol
Sex (M)	Shows a check symbol if the attendee is Male	Check symbol
Sex (F)	Shows a check symbol if the attendee is Female	Check symbol
Age	Shows the current age of the attendee during the activity	Numeric
Barangay/Community	Shows the name of the barangay where the attendee currently residing	Text
<b>CDD Committee Membership</b>		
Committee Name (BRT, PPT, etc.)	Shows the name of CDD Committee which the attendee is currently enlisted	<ul style="list-style-type: none"> <li>• Brgy Grievance Committee</li> <li>• PSA</li> <li>• CMT</li> <li>• PPT</li> <li>• BRT</li> <li>• PIT</li> <li>• BAC</li> <li>• PT</li> <li>• AIT</li> <li>• MIT</li> <li>• O&amp;M</li> </ul>



FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Chair	Shows a check symbol if the attendee is a Chair of the specified CDD committee	Check symbol
Member	Shows a check symbol if the attendee is a member but not a Chair of the specified CDD committee	Check symbol
M/BLGU Official? (Y/N)	Shows Y or Yes if the attendee is currently a member of LGU and N or No if not	Y or Yes N or No
Sector (Farmer, Women, etc.)	Shows the sector/s	Text
Signature	Shows personal/official signature of the attendee	Signature
Sub-total	Shows the count of Pantawid Pamilya, SLP, IP, Male, Female, Chair, Member, M/BLGU attendees per sheet	Numeric
<b>Who will fill-out/facilitate</b>	The attendees must fill-out the form and the Area Coordinating Team will facilitate with the help of Sitio/Purok volunteers	
<b>When to be accomplished</b>	During or at the end of the activity	
<b>To whom will be submitted</b>	After ensuring that the information are complete and accurate the Members of the ACT assigned to facilitate this form will submit it to Area Coordinator (AC). Area Coordinator will do the final inspection of the content of the form before forwarding it to the Municipal Database Encoder for encoding in the NCDDP Database.	
<b>When to be submitted</b>	Right after of a day after the activity	
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet the soonest time possible or not later than the regular monthly reporting period</li> </ul>	

#### Note for the Area Coordinating Team:

1. The following fields must be available **prior** to the activity:

- Province
- Municipality
- Venue
- Title
- Date/Duration
- Program/Project
- Cycle

2. The following fields must be filled out only **during or immediately after** the conduct of activity:

- Last Name
- First Name
- M.I.
- Pantawid
- SLP
- IP
- Sex (M/F)
- Age
- Barangay/Community
- Committee Name

- Chair/Member
- M/BLGU Official
- Sector
- Signature

The above fields/information must be filled out by the attendees with the guidance and assistance of the ACT and Community Volunteers.

**Guide CDD A-02: Municipal Activity Minutes Form**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Total Number of Barangays	Show the total number of covered Barangays by the Municipality	Numeric
Venue	Shows the actual location of the conducted activity	Text
Date/Duration	Shows the actual date of the conducted activity	Date format
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Activity Name	Shows the title of the activity	Text
Facilitators	Shows the names of Individual Facilitators during the Activity	Text
Documenter/Secretary	Shows the name/s of person/s who documented the proceedings of the activity	Text
Male attendees	Shows the total number of male attendees of the activity	Numeric
Female attendees	Shows the total number of female attendees of the activity	Numeric

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Male IP attendees	Shows the total number of Male Indigenous People attendees of the activity	Numeric
Female IP attendees	Shows the total number of Female Indigenous People attendees of the activity	Numeric
Male Attendees 60 years old and above	Shows the total number of Male attendees 60 years old and above during the activity	Numeric
Female Attendees 60 years old and above	Shows the total number of Female attendees 60 years old and above during the activity	Numeric
Barangays Represented	Shows the name of all barangays with representatives during the activity	Text
Agenda/Objectives	Shows the Agenda/objective or Purpose of the activity	Text
Highlights of the activity including details of facilitation process and quality of participation of men and women during the activity	Shows the proceeding of the activity including the details of facilitation processes and the quality of participation of men and women. LGU prescribed minutes can be attached instead of rewriting it again.	Text
<b>PINCOs and Grievances</b>		
Who raised the Concern and Profile of the Person	Shows the Identity of the person who raised the PINCOs or Grievances	Text
PINCOs and Grievances	Shows the details of the Problems, Issues, Needs, Concerns, Observations (PINCOs) or Grievances raised during the Activity	Text
Resolution/Next Steps/Agreements	Shows the details of resolutions and agreements in response to the raised PINCOs or Grievances	Text
<b>Prepared by</b>		
Signature over printed name	Shows the name and the personal/official signature of the person who prepared the minutes	Text and Signature
Position	Shows the work designation of the person who prepared the minutes	Text
<b>Approved by</b>		
Signature over printed name	Shows the name and the personal/official signature of the person who presided the meeting	Text and Signature
Position	Shows the work designation of the person who presided the meeting	Text

<b>Who will fill-up/facilitate</b>	Ideally it is the SB Secretary, but in case of the absence of the SB Secretary, it is suggested that at least a member of the community or a Community Volunteer will do the task with the assistance of the ACT members.
<b>When to be accomplished</b>	Within 3 days after the activity
<b>To whom will be submitted</b>	Area Coordinator
<b>When to be submitted</b>	Within 3 days after the activity
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the minutes to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Guide CDD A-03: Barangay/Community Assembly Attendance Sheet**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Barangay/Community	Shows the name of Barangay or Community	Text
Purok/Sitio	Shows the name of puroks/sitios where the attendee currently residing	Text
Purpose of BA	Shows the title or main purpose of the Barangay Assembly	Text (e.g. Barangay Orientation, Validation of PSA Result, Feedbacking of the recently conducted Municipal Activity, etc.)
Date/Duration	Shows the actual date of the conducted activity	Date Format
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Venue	Shows the actual location of the conducted activity	Text
Last Name	Shows the Family Name of the attendee	Text
First Name	Shows the First/Given Name of the attendee	Text
M.I.	Shows the initials of the Middle Name of the attendee	Text
IP Leader	Shows a check symbol if the attendee is an Indigenous People Leader	Check symbol
IP Group	Shows the name of IP Group where the Attendee belong	
B/LGU Position (Captain, Kagawad, etc.)	Shows the designation of the Attendee in B/LGU	Text
Age	Shows the current age of the attendee during the activity	Numeric
Sex (Male)	Shows a check symbol if the attendee is Male	Check symbol
Sex (Female)	Shows a check symbol if the attendee is Female	Check symbol

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Signature	Shows the personal/official signature of the attendee	Signature
Sub-Total	Shows the count of Pantawid, SLP, IP, Male, Female, Chair, Member, M/BLGU attendees per sheet	Numeric

<b>Who will fill-out/facilitate</b>	The attendees must fill-out the form and the Community Empowerment Facilitator (CEF) will facilitate with the help of Sitio/Purok volunteers
<b>When to be accomplished</b>	During or at the end of the activity
<b>To whom will be submitted</b>	After ensuring that the information are complete and accurate the CEF will submit the forms to Area Coordinator (AC). Area Coordinator will do the final inspection of the content of the form before forwarding it to the Municipal Database Encoder for encoding in the NCDDP Database.
<b>When to be submitted</b>	After the activity or not later than 2 days after.
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

#### Note for the Area Coordinating Team:

1. The following fields must be available **prior** to the activity:
  - Province
  - Municipality
  - Barangay/Community
  - Program/Project
  - Purpose of BA
  - Date/Duration
  - Cycle
  - Venue
  
2. The following fields must be filled out only **during or immediately after** the conduct of activity:
  - Last Name
  - First Name
  - M.I.
  - Purok/Sitio
  - IP
  - Age
  - Sex (Male)
  - Sex (Female)
  - Signature

The above fields/information must be filled out by the attendees with the guidance and assistance of the ACT and Community Volunteers.

**Guide CDD A-04: Barangay/Community Assembly Household Participation**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Municipality	Shows the name of Municipality	Text
Barangay/Community	Shows the name of Barangay or Community	Text
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Purpose of BA	Shows the title or main purpose of the Barangay Assembly	Text (e.g. Barangay Orientation, Validation of PSA Result, Feedbacking of the recently conducted Municipal Activity, etc.)
Date	Shows the actual date of the Barangay Assembly	Date Format (mm/dd/yyyy)
Sitio/Purok	Shows the name of Sitio/Purok where the specific Household currently residing	Text
Last Name	Shows the Family Name of the Household Head	Text
First Name	Shows the First/Given Name of the Household Head	Text
M.I.	Shows the initials of the Middle Name of the attendee	Text
IP?	Shows a check symbol if the Household Head is an IP	Check Symbol
Pantawid Pamilya Beneficiary?	Shows a check symbol if the Household is a Pantawid Pamilya Beneficiary	Check Symbol
No. of Non-IP/Pantawid Pamilya/SLP	Shows the total number of families within the same Household which are not an IP or Pantawid Pamilya or SLP Beneficiaries <b>present/represented during the BA</b>	Numeric
No. of IP	Shows the total number of Indigenous People families within the same Household <b>present/represented during the BA</b>	Numeric
No. of Pantawid Pamilya	Shows the total number of Pantawid Pamilya beneficiary families within the same Household <b>present/represented during the BA</b>	Numeric
No. of SLP	Shows the total number of SLP beneficiary families within the same Household <b>present/represented during the BA</b>	Numeric
Sector/s Represented	Shows the names of sectors represented by the Household during the BA	Text
Remarks	Shows additional information about the household. This field can also be use to provide information	Text

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
	whether the listed household already moved out of the barangay.	
<b>Who will fill-out/facilitate</b>	Attendees of the activity will fill-out the form with required information and the Community Empowerment Facilitator will facilitate with the help of Community Volunteers per Sitio/Purok.	
<b>When to be accomplished</b>	During or at the end of the activity	
<b>To whom will be submitted</b>	After ensuring that the information are complete and accurate the CEF will submit the forms to Area Coordinator (AC). Area Coordinator will do the final inspection of the content of the form before forwarding it to the Municipal Database Encoder for encoding in the NCDDP Database.	
<b>When to be submitted</b>	After the activity or not later than 2 days after.	
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>	

**Note for the Community Empowerment Facilitators:**

1. Some information in this form must be prepared prior to the conduct of Barangay Assembly.
  - 1.2 The following fields must be available **prior** to the activity:
    - Municipality
    - Barangay/Community
    - Program/Project
    - Cycle
    - Purpose of BA
    - Date
    - Sitio/Purok
    - Last Name (Household Head)
    - First Name (Household Head)
    - M.I. (Middle Initial of Household Head)
    - IP?
    - Pantawid Pamilya Beneficiary?
  
2. Community Empowerment Facilitators are tasked to get the above information from the existing data of the DSWD (KC-NCDDP, Pantawid Pamilya and NHTO).
  - 2.1 The following fields must be filled up only **during or immediately after** the conduct of BA:
    - 2.1.1 Total Families Present
      - No. of Non-IP/Pantawid Pamilya/SLP
      - No. of IP
      - No. of Pantawid Pamilya
      - No. of SLP
      - Sectors Represented
      - Remarks (if needed)



The above fields/information must be filled up by the representative of each HH present during the activity with the guidance of the Community Empowerment Facilitators and Community Volunteers.

3. It is not necessary that the whole family within a specific household is present during the BA to be considered as present/represented. As long as any member/s of his/her family is/are present during the activity, by then their family can be considered as present/represented.
4. In case there are HH Attendees residing in the Barangay that are not listed in the initial data from DSWD (KC-NCDDP and NHTO) please feel free to add at the bottom of the list their HH names.
5. After the conduct of BA, upon validating the initial list, HH representatives can correct errors in the Form (HH Name, Pantawid Pamilya status, etc.)
6. Use the updated information for the preparation of new "Barangay/Community Assembly Household Participation" for the succeeding BAs.

#### **How to compute the HH Participation Rate:**

Total number of HH present during the BA (Count the Total number of HH with at least one (1) Family Present during the BA, see column "No. of Non-IP/Pantawid/SLP", "No. of IP", "No. of Pantawid", "No. of SLP") divided by Total Number of HH currently residing in the Barangay then multiply it by 100.

**Guide CDD A-05: Barangay/Community Activity Minutes Form**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Barangay/Community	Shows the name of the Barangay/Community	Text
Venue	Shows the actual location of the conducted activity	Text
Date/Duration	Shows the actual date of the conducted activity	Date format
Total HH in the Barangay	Shows the total number of household currently residing in the barangay	Numeric
Total IP HH in the Barangay	Shows the total number of IP household currently residing in the barangay	Numeric
Total Pantawid Pamilya HH in the Barangay	Shows the total number of Pantawid Pamilya household currently residing the barangay	Numeric
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Activity Name	Shows the title of the activity	Text

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Facilitators	Shows the names of Individual Facilitators during the Activity	Text
Documenter/Secretary	Shows the name/s of person/s who documented the proceedings of the activity	Text
Male attendees	Shows the total number of male attendees of the activity (use the Barangay/Community Assembly Attendance. Sheet)	Numeric
Female attendees	Shows the total number of female attendees of the activity. (use the Barangay/Community Assembly Attendance Sheet)	Numeric
Male IP attendees	Shows the total number of Male Indigenous People attendees of the activity. (use the Barangay/Community Assembly Attendance Sheet)	Numeric
Female IP attendees	Shows the total number of Female Indigenous People attendees of the activity. (use the Barangay/Community Assembly Attendance Sheet)	Numeric
Male Attendees 60 years old and above	Shows the total number of Male attendees 60 years old and above during the activity. (use the Barangay/Community Assembly Attendance Sheet)	Numeric
Female Attendees 60 years old and above	Shows the total number of Female attendees 60 years old and above during the activity. (use the Barangay/Community Assembly Attendance Sheet)	Numeric
Total HH Represented	Shows the total number of household with atleast one representative who attended the activity. (use the Barangay/Community Assembly Household Participation Form)	Numeric
No. of IP HH Represented	Shows the total number of Indigenous People household within the barangay with at least one representative during the activity. (use the Barangay/Community Assembly Household Participation Form)	Numeric
No. of IP Families Represented	Shows the total number of IP Families with at least one representative during the activity. use the Barangay/Community Assembly Household Participation Form)	Numeric
No. of SLP HH Represented	Shows the total number of household within the barangay who are SLP beneficiaries with at least one representative during the activity. (use	Numeric

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
	the Barangay/Community Assembly Household Participation Form)	
No. of SLP Families	Shows the total number of SLP Families with at least one representative during the activity. (use the Barangay/Community Assembly Household Participation Form)	Numeric
No. of Pantawid HH Represented	Shows the total number of household within the barangay who are Pantawid Pamilya beneficiaries with at least one representative during the activity. (use the Barangay/Community Assembly Household Participation Form)	Numeric
No. of Pantawid Families	Shows the total number of Pantawid Pamilya Families with at least one representative during the activity. (use the Barangay/Community Assembly Household Participation Form)	Numeric
Purok/Sitios Represented	Shows the name of Purok/Sitios with attendees during the activity	Text
Sectors Represented	Shows the names of sectors represented by the Household during the activity	Text
Agenda/Objectives	Shows the Agenda/objective or Purpose of the activity	Text
Highlights of the activity including details of facilitation process and quality of participation of men and women during the activity	Shows the proceeding of the activity including the details of facilitation processes and the quality of participation of men and women. LGU prescribed minutes can be attached instead of rewriting it again.	Text
<b>PINCOs and Grievances</b>		
Who raised the Concern and Profile of the Person	Shows the Identity of the person who raised the PINCOs or Grievances during the activity	Text
PINCOs and Grievances	Shows the details of the Problems, Issues, Needs, Concerns, Observations (PINCOs) or Grievances raised during the Activity	Text
Resolution/Next Steps/ Agreements	Shows the details of resolutions and agreements in response to the raised PINCOs or Grievances	Text
<b>Prepared by</b>		
Signature over printed name	Shows the name and the personal/official signature of the person who prepared the minutes	Text and Signature
Position	Shows the work designation of the person who prepared the minutes	Text
<b>Approved by</b>		
Signature over printed name	Shows the name and the personal/official signature of the person who presided the meeting	Text and Signature

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Position	Shows the work designation of the person who presided the meeting	Text

<b>Who will fill-up/facilitate</b>	Ideally it is the Barangay Secretary, but in case of his/her absence, it is suggested that at least a member of the community or a Community Volunteer will do the task with the assistance of the ACT members.
<b>When to be accomplished</b>	Within 3 days after the activity
<b>To whom will be submitted</b>	From the Barangay Secretary/Community Volunteer to Community Empowerment Facilitator (CEF). CEF must ensure that the data in the form are correct before forwarding it to the Area Coordinator.
<b>When to be submitted</b>	Within 3 days after the activity
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the minutes to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Guide CDD A-06: Community Volunteers Profile**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Barangay	Shows the name of the Barangay	Text
Program	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDP KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Last Name	Shows the Family Name of the Community Volunteer	Text
First Name	Shows the First/Given Name of the Community Volunteer	Text
M.I.	Shows the initials of the Middle Name of the Community Volunteer	Text
Birth Date	Shows the birth date of the community volunteer	Date format
Sex (Male or Female)	Shows the biological feature of the attendee	Male Female
Civil Status	Shows the marital status of the Community Volunteer	Single Married Widowed Legally Separated Annulled
No. of Children	Shows the number of descendants the volunteer have	Numeric
Highest Educational Attainment	Shows the highest degree of education the volunteer attained	College level Doctorate degree graduate Elementary graduate Elementary level High School graduate High School level Masteral degree graduate With units in masteral degree No formal education Others
Occupation	Shows the specific source of living/work of the volunteer	Text
Sector Represented	Shows the sectors' volunteer is representing	Text
Current Position in BLGU	Shows the role or position of the volunteer in the barangay organization	Barangay Chairperson Barangay Tanod

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
		Kagawad Secretary SK Chair SK Kagawad Treasurer Other
Contact Number	Shows the mobile or landline number of the volunteer	Number
Address	Shows the complete residential location of the volunteer	Text
I.P.?	Shows Yes or "Y" if the volunteer is an IP	Yes or Y
I.P. Leader?	Shows Yes of "Y" if the volunteer is an IP Leader	Yes or Y
Pantawid Pamilyang Pilipino Program Beneficiary?	Shows a check symbol if the community volunteer is also a Pantawid Pamilya beneficiary	Check symbol
Parent Leader?	Shows a check symbol if the community volunteer is also a Parent Leader of Pantawid Pamilya	Check symbol
Sustainable Livelihood Program Beneficiary?	Shows a check symbol if the community volunteer is also a SLP beneficiary.	Check symbol
SLP Officer?	Shows a check symbol if the community volunteer is also a SLP Officer	Check symbol
Date of Volunteer's Identification/Appointment	Shows the actual date when the volunteer is identified	Date Format
BSPMC Chair	Shows a check symbol if the community volunteer is a chair of BSPMC	Check symbol
Date Started	Shows the actual start date when the volunteer assumed the post as BSPMC chair	Date Format
Date Ended	Shows the actual date when the volunteer ended his post as BSPMC chair	Date Format
Name of Committee	Shows the NCDDP Team/Organization where the volunteer is enlisted	BRT PSA PIT PPT BAC PT AIT MIT O&M GRS CMT
Position	Shows the role of volunteer in the committee	Chair Member
Start Date	Shows the actual start date when the volunteer assumed the post	Date Format
End Date	Shows the actual date when the volunteer ended his post	Date Format
Title of Training	Shows the title of non-NCDDP training the volunteer previously attended	Text
Training Provider	Shows the name of organization/group who facilitated/sponsored the training	Text
Year Attended	Shows the Year of the training	Year
Organization	Shows the name of non-NCDDP organization where the volunteer is enlisted	Text

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Position (Membership in other organization)	Shows the role of the volunteer in the non-NCDDP organization	Text
Signature of Volunteer	Shows the official/personal signature of the Community Volunteer	Signature
Signature of Community Empowerment Facilitator	Shows the official/personal signature of the CEF	Signature

<b>Who will fill-up/facilitate</b>	Community Volunteer
<b>When to be accomplished</b>	After being identified as a member of a committee
<b>To whom will be submitted</b>	From the CV to CEF. CEF will ensure that the information are correct and complete before forwarding the copy to AC.
<b>When to be submitted</b>	After being identified as a member of a committee
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the form to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Note for the Community Empowerment Facilitators:**

1. Each Volunteer must only have one (1) CV Profile Form per Cycle. In case a volunteer will be identified again as a member of an another committee within the same cycle, the volunteer just have to update his/her existing CV Profile Form.



**Guide CDD A-07: Barangay/Community Meeting/Training Attendance Sheet**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Barangay/Community	Shows the name of Barangay or Community	Text
Venue	Shows the actual location of the conducted activity	Text
Date/Duration	Shows the actual date of the conducted activity	Date Format
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Title	Shows the title or purpose of the training or meeting	Text
Last Name	Shows the Family Name of the attendee	Text
First Name	Shows the First/Given Name of the attendee	Text
M.I.	Shows the initials of the Middle Name of the attendee	Text
Pantawid Pamilya	Shows a check symbol if the attendee is a Pantawid Pamilya beneficiary	Check symbol
SLP	Shows a check symbol if the attendee is a SLP beneficiary	Check symbol
IP	Shows a check symbol if the attendee is an IP	Check symbol
Sex (M)	Shows a check symbol if the attendee is Male	Check symbol
Sex (F)	Shows a check symbol if the attendee is Female	Check symbol
Age	Shows the current age of the attendee during the activity	Numeric
Sitio/Purok	Shows the name of puroks/sitios where the attendee currently residing	Text
Committee Name	Shows the NCDDP Team/Organization where the volunteer is enlisted	BRT PSA PIT CMT PPT BAC PT AIT MIT O&M GRS CMT

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Chair	Shows a check symbol if the attendee is a chair of the specified committee	Check symbol
Member	Shows a check symbol if the attendee is a members but not a chair of the specified committee	Check symbol
M/BLGU Official?	Shows a check symbol if the attendee is a LGU official or member	Check symbol
Sector	Shows the names of sectors represented by the attendee during the activity	Text
Signature	Shows the personal/official signature of the attendee	Signature
Sub-Total	Shows the count of Pantawid Pamilya, SLP, IP, Male, Female, Chair, Member, M/BLGU attendees per sheet	Numeric

<b>Who will fill-out/facilitate</b>	The attendees must fill-out the form and the Community Empowerment Facilitator (CEF) will facilitate with the help of Sitio/Purok volunteers
<b>When to be accomplished</b>	During or at the end of the activity
<b>To whom will be submitted</b>	After ensuring that the information are complete and accurate the CEF will submit the forms to Area Coordinator (AC). Area Coordinator will do the final inspection of the content of the form before forwarding it to the Municipal Database Encoder for encoding in the NCDDP Database.
<b>When to be submitted</b>	After the activity or not later than 2 days after.
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

#### Note for the Area Coordinating Team:

1. The following fields must be available **prior** to the activity:
  - Province
  - Municipality
  - Barangay/Community
  - Venue
  - Date/Duration
  - Cycle
  - Program/Project
  - Title
  
2. The following fields must be filled out only **during or immediately after** the conduct of activity:
  - Last Name
  - First Name
  - M.I.
  - Pantawid Pamilya
  - SLP
  - IP
  - Sex (M)
  - Sex (F)

- Sitio/Purok
- Committee Name
- Chair
- Member
- M/BLGU Official
- Sector
- Signature

The above fields/information must be filled out by the attendees with the guidance and assistance of the ACT and Community Volunteers.

**Guide CDD A-08: Sub-Project's Household Beneficiaries**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Target?	Shows a check symbol if this form is used to count the Target SP Beneficiaries during Sub-Project Development	Check symbol
Actual?	Shows a check symbol if this form is used to count the Actual SP Beneficiaries after completion of Sub-Project	
Municipality	Shows the name of the Municipality	Text
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Barangay/Community	Shows the name of Barangay or Community	Text
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Date	Shows the actual date of the conducted activity	Date Format
Sub-Project Name	Shows the Name of Sub-Project proposed/prioritized by the community under the Project/Program	Text
Sub-Project Type	Shows the type of sub-project being proposed/prioritized by the community under the Project/Program	e.g. Road, Water System, Day Care Center, Health Station, Drainage, Small Scale Irrigation, Bridge, Footpath, Pathwalk, etc.
Sitio/Purok	Show the name of Sitio/Purok where the Household currently residing	Text
Household Head Name	Shows the name of Household Beneficiaries of Sub-Project under the Project/Program	Text
No. of SP Beneficiaries within the HH (Male)	Shows the number of Male individuals within the specified Household who are beneficiaries of the SP under the Project/Program	Numeric
No. of SP Beneficiaries within the HH (Female)	Shows the number of Female individuals within the specified Household who are beneficiaries of the SP under the Project/Program	Numeric
No. of SP Beneficiaries within the HH (Total Individuals)	Shows the total number of individuals within the specified Household who are beneficiaries of the SP under the Project/Program	
No. of Families within the HH (IP)	Shows the total number of IP Families within the specified household who are beneficiaries of the SP under the Project/Program	Numeric

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
No. of Families within the HH (Pantawid)	Shows the total number of Pantawid Beneficiary Families within the specified household who are also beneficiaries of the SP under the Project/Program	Numeric
No. of Families within the HH (SLP)	Shows the total number of SLP Beneficiary Families within the specified household who are also beneficiaries of the SP under the Project/Program	Numeric
No. of Families within the HH (Total Families)	Shows the total number of Families within the specified household who are beneficiaries of the SP under the Project/Program	Numeric
Sub-Total	Shows the total of Pantawid, SLP, IP, Male, Female, beneficiaries per sheet	Numeric

<b>Who will fill-out/facilitate</b>	Community Volunteers with the guidance of the CEF
<b>When to be accomplished</b>	During SP Development (Tool for SP Concept Form) and Completion of Sub-Project (Tool for Sub-Project Completion Report)
<b>To whom will be submitted</b>	ACT
<b>When to be submitted</b>	Attachment (optional) to SP Concept Form and Sub-Project Completion Report
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Since it was just a tool for SPCF and SPCR to generate numbers of Beneficiaries, it is not necessary to encode this form. After ensuring that this form is completed, scanning of this document is the task of the Municipal Database Encoder. Scanned MOVs are to be used during Data Quality Assessment (DQA) and other Audits.</li> <li>• ACT must provide a scanned copy of this form to SRPMT/RPMO.</li> </ul>

**Guide CDD A-09: Oversight and Coordinating Committees Checklist**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Date Accomplished	Shows the date when this form is accomplished	Date Format
Oversight/Coordinating Committee Name	Shows the Name of Oversight/Stakeholders overseeing the Program/Project	Text
No. of Male members	Shows the number of Male members of the specified oversight/coordinating committee	Numeric
No. of Female members	Shows the number of Female members of the specified oversight/coordinating committee	Numeric
Date organized	Shows the date when the specified oversight/coordinating committee was organized	Date Format
Regular Meetings Conducted	Shows the frequency of meetings by the specified oversight/coordinating committee	Text (e.g. weekly, monthly, quarterly, yearly, semi-annual)
Regional	Shows a check symbol if the oversight/coordinating committee is on a regional level	Check symbol
Provincial	Shows a check symbol if the oversight/coordinating committee is on a provincial level	Check symbol
Municipal	Shows a check symbol if the oversight/coordinating committee is on a municipal level	Check symbol
Name of Province / Municipality	Shows the name of the Province if the committee is on a Provincial level and the name of the Municipality if the committee on a Municipal level	Text
Prepared by	Shows the Name and Signature of the Area Coordinator/Regional M&E	Text and Signature

<b>Who will fill-out/facilitate</b>	Area Coordinator for Municipal Level and Regional M&E for the Provincial and Regional Level
<b>When to be accomplished</b>	Within the cycle implementation of Program/Project
<b>To whom will be submitted</b>	Municipal: AC to Municipal Database Encoder for encoding; Provincial and Regional: Regional/Sub-Regional M&E Officers
<b>When to be submitted</b>	As soon as completed (per cycle)
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>Area Coordinator will forward the form to Municipal Database Encoder for encoding to the Database.</li> </ul>

	<ul style="list-style-type: none"><li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li><li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li><li>• For the Provincial and Regional Level, it is the task of the Regional M&amp;E III for database operations.</li></ul>
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**Guide CDD A-10: CDD Sub-Project Workers Basic Profile**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
For the Period of (From and To)	Shows the duration/coverage of the form	Date Format
Municipality	Shows the name of the Municipality	Text
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-LED
Sub-Project Name	Shows the Name of Sub-Project proposed/prioritized by the community under the Project/Program	Text
Covered Barangays by SP	Shows the barangay/s implementing the specified Sub-Project	Text
Hauling	Shows a check symbol if the mode of implementation is Hauling	Check symbol
Pakyaw	Shows a check symbol if the mode of implementation is Pakyaw	Check symbol
CFA	Shows a check symbol if the mode of implementation is CFA	Check symbol
Sub-Project ID	Shows the Sub-Project ID generated by the e-RFR system	Code
Last Name	Shows the Family Name of the worker	Text
First Name	Shows the Given/First Name of the worker	Text
Middle Name	Shows the Middle Name of the worker	Text
Nature of Work	Shows the job description of the worker	Text (e.g. laborer, carpenter, mason, etc.)
Birthday	Shows the date of birth of the worker	Date Format
Sex	Shows the biological feature of the worker	Male Female
Barangay Name	Shows the name of the barangay the worker is currently residing	Text
IP	Shows a check symbol if the worker is an Indigenous People	Check symbol
Pantawid	Shows a check symbol if the worker is a Pantawid beneficiary	Check symbol
SLP	Shows a check symbol if the worker is a SLP beneficiary	Check symbol
Prepared by	Shows the name and signature of the Community Empowerment Facilitator	Text and Signature
Noted by	Shows the name and signature of the PIT head	Text and Signature

<b>Who will fill-out/facilitate</b>	Community Empowerment Facilitator
<b>When to be accomplished</b>	During or right after the preparation of Employment Record Sheet during Sub-Project Construction
<b>To whom will be submitted</b>	Area Coordinator



<b>When to be submitted</b>	Together with the Employment Record Sheet during the preparation of payment for the workers in Sub-Project Construction
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are complete and correct.</li> <li>• Area Coordinator will forward the form to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Note for the Community Empowerment Facilitator:**

1. This form must be prepared for every ERS prepared. It is used to capture the needed information by the department (DSWD) that is not available in the current ERS form.
2. The “For Pakyaw” fields/columns in this form only apply to “Pakyaw” mode of payment for the workers. If the workers are paid in a normal basis (per day or per hour) please ignore these fields.

**Guide CDD A-11: PTA Integration Plans Checklist**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Date MOA was signed	Shows the actual date when the MOA was completely signed	Date Format
Date SIA was signed	Shows the actual date when the SIA was completely signed	Date Format
<b>ACCOUNTABILITY</b>		
<b><i>Legislation/Resolution/Ordinances passed in support of CDD and Participatory Governance</i></b>		
Institutionalization of People's PTA in LGU development, planning and poverty reduction programs, plans, and activities	Shows the actual date when the resolution became available including resolution number.	Text Date Format
Convergence of NGA poverty reduction PPAs in the Municipality	Shows the actual date when the resolution became available including resolution number.	Text Date Format

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Formation of MIAC	Shows the actual date when the resolution became available including resolution number.	Text Date Format
Formation of MCT	Shows the actual date when the resolution became available including resolution number.	Text Date Format
NGO and PO Accreditation Guidelines	Shows the actual date when the resolution became available including resolution number.	Text Date Format
Support to BDP Formulation and BDP-MDP implementation including GAD plans	Shows the actual date when the resolution became available including resolution number.	Text Date Format
<b><i>Support to KC-NCDDP Implementation</i></b>		
Allocation of LCC	Shows the actual date when the resolution became available including SB resolution number.	Text Date Format
Opening of Municipal Trust Fund	Shows the actual date when the account opened including account number.	Text Date Format
Provision of KC-NCDDP Municipal Office and Equipment	Shows if the KC-NCDDP municipal office and equipment is provided by Municipal LGU.	Yes or No Text
Provision of personnel	Shows the list and number of LGU paid staff provided for KC-NCDDP.	Text
Assist community volunteers in KC-NCDDP procurement and Fiduciary processes	Shows the list of activities with actual dates and total number of TAs provided to KC-NCDDP community volunteers.	Text Date Format
<b>TRANSPARENCY</b>		
<b><i>Available Information on the State of Municipality</i></b>		
Income and Expenditure	Shows the location and actual date of posting of the income and expenditure information.	Text Date Format
Budget and data used for formulating the budget	Shows the location and actual date of posting of the budget and data used for formulating the budget information.	Text Date Format
LGU Plans and Activities	Shows the location and actual date of posting of the LGU Plans and Activities information.	Text Date Format
<b>PARTICIPATION</b>		
NGO-PO engaged and represented in MDC and LSB	Shows the total number of NGO-PO accredited and represented in MDC and LSB.	Text Number Percentage
Representation of highly marginalized/vulnerable groups in MDC and BDC (Pantawid, IPs, Women, Youth, Elderly, PWD)	Shows the gender disaggregated total of marginalized/vulnerable groups in MDC and BDC	Number
Regular LGU-CSO consultation and dialogue	Shows the actual date and total number of consultations conducted	Text Date Format
Conduct of participatory review and assessment of the gender responsiveness of GAD Plans and GAD-funded projects	Shows the actual date and total number of reviews/assessment conducted	
NGO participation in project implementation and monitoring	Shows the actual date and total number of NGOs involved in activities	Text Date Format

**CDD A-12: Grievance Redress System (GRS) Intake Form**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Date Received	Pertains to the date when the PINCOs/Grievance was recorded	Text
GRS Form	Pertains to the classification of filed PINCOs/Grievance	Shaded box
Intake Level	Pertains to where PINCOs/Grievance was filed	Shaded box
Grievance Location	Pertains to the specific location where PINCOs/Grievance was filed	Region: Text Province: Text Municipality: Text Barangay: Text
Mode of filing	Pertains to the method of how the PINCOs/Grievance was filed	Shaded box
Date Resolved	Pertains to the date when the PINCOs/Grievance was resolved	Shaded box
Name (optional)	Pertains to the given first name of the complainant/sender	Text
IP Group	Pertains to the classification of indigenous group	Text
Sex	Pertains to the biological feature of the complainant	Shaded box
Designation/Position	Pertains to the detailed position or designation where the complainant is affiliated	Shaded box
Contact Information	Pertains to the contact details of the complainant	Text
Nature of Issue/Concern	Pertains to the typology of the PINCOs/Grievance which was raised	Shaded box
Subject of Complaint	Pertains to the concerned person/group/agency having particular connection on the PINCOs/Grievance which was filed	Shaded box
Category of Concerns	Pertains to the categorization of the PINCOs/Grievance which was filed	Shaded box
Details/Narrative Summary	Pertains to the brief statement or account of the main points of the PINCOs/Grievance which was filed	Text
Actions Taken/Resolution of the Issue	Pertains to the action/s which was/were done in order to resolve/address the filed PINCOs/Grievance	Text
For PINCOs Only Recommendations (Action needed from RPMO/NPMO/Other agencies)	Pertains to the suggestions or actions to be undertaken by the concerned agency/ies	Text
Complainant's Feedback on Resolution of Grievance	Pertains to the complainant's assessment on how filed PINCOs/Grievance was dealt	Shaded box
Name of Intake Officer	Pertains to the given complete name of the person who recorded the filed PINCOs/Grievance on the intake form	Text
Designation	Pertains to the detailed position of the person who recorded the filed PINCOs/Grievance on the intake form	Text
List of Categories	Pertains to the categorization and nature of concerns usually raised by the complainant/s	Shaded box

<b>Who will fill-up/facilitate</b>	<ul style="list-style-type: none"> <li>• The form shall be filled out by the Community Empowerment Facilitator if the PINCOs/Grievance was lodged at the barangay level.</li> <li>• The form shall be filled out by the Area Coordinator if the PINCOs/Grievance was lodged at the municipal level.</li> <li>• The form shall be filled out by the Regional Grievance Monitor (Monitoring and Evaluation Officer III for Grievance) if the PINCOs/Grievance was lodged at the Regional Field Office.</li> <li>• The form shall be filled out by the National Grievance Monitor (Monitoring and Evaluation Officer IV for Grievance) if the PINCOs/Grievance was lodged at the Central Office.</li> </ul>
<b>When to be accomplished</b>	The form shall be accomplished by the Community Empowerment Facilitator/ Area Coordinator/Regional Grievance Monitor/National Grievance Monitor once the PINCOs/Grievance has been received.
<b>To whom will be submitted</b>	<p style="text-align: center;">Community Empowerment Facilitator (barangay level)  ↓  Area Coordinator (municipal level)  ↓  Regional Grievance Monitor (Regional Field Office)  ↓  National Grievance Monitor (Central Office)</p>
<b>When to be submitted</b>	<ul style="list-style-type: none"> <li>• Forms that were captured in the barangay level and municipal level shall be consolidated, encoded and submitted every 10<sup>th</sup> day of every month to the Regional Field Office.</li> <li>• Consolidated and encoded forms that were captured in the Regional Field Office along with the consolidated report from the barangay level and municipal level shall be submitted to the Central Office every 15<sup>th</sup> day of every month.</li> </ul>
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• The Community Empowerment Facilitator shall ensure that the forms are properly filled out according to its field.</li> <li>• The Area Coordinator shall be responsible for monitoring the status and actions taken in all municipal-level concerns.</li> <li>• Consolidated grievance report must be posted in conspicuous places at the Central and Field Offices and at the municipal and barangay bulletin board.</li> </ul>

**Guide CDD A-13: Grievance Redress System Barangay Installation Checklist**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Barangay/Community	Shows the name of Barangay or Community	Text
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Date Complied: Information dissemination on GRS	Shows the actual date when the GRS was introduced to the Barangay/Community Households	Date Format
Date Complied: GRS volunteers identified, Grievance/Fact-Finding Committee organized	Shows the actual date of the formation of GRS Volunteer and Committee	Date Format
Date Complied: Training of community members on handling grievances conducted	Shows the actual date of training provided for the community members on handling grievances	Date Format
Date Complied: Information materials available with grievance hotline	Shows the actual date when the information materials and details on the grievance hotlines became available to the community	Date Format

Date Complied: Means of reporting grievances available	Shows the actual date when the means of reporting grievances became available for the community (grievance box, phone numbers, office address, etc.)	Date Format
Signature over printed name	Shows the name and signature of the Community Empowerment Facilitator	Text and Signature

<b>Who will fill-out/facilitate</b>	Community Empowerment Facilitator
<b>When to be accomplished</b>	On or before 2 <sup>nd</sup> BA
<b>To whom will be submitted</b>	Area Coordinator
<b>When to be submitted</b>	It can be submitted after complying at least one requirement specified in the form. Regular updating of the form is allowed.
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Guide CDD A-14: Grievance Redress System Municipal Installation Checklist**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Region	Shows the name of the Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of the Province	Text
Municipality	Shows the name of the Municipality	Text
Program/Project	Shows the name of donor/funder/source of fund of the activity	KC-NCDDP KC-MCC JSDF KC-BUB PAMANA Australian DFAT JFPR GIG Others (specify)
Cycle	Shows the cycle/year of implementation	1 2 3 MT NCDDP-1 NCDDP-2 NCDDP-3 NCDDP-MT/LGU-led
Date Complied: Information dissemination on GRS	Shows the actual date when the GRS was introduced to the Municipality	Date Format
Date Complied: Municipal GRS Committee Members, Grievance/Fact-Finding Committee organized	Shows the actual date of the formation of Municipal GRS Committee	Date Format
Date Complied: Training of ACT /MCT on handling grievances conducted	Shows the actual date of training provided for the ACT /MCT on handling grievances	Date Format
Date Complied: Information materials available with grievance hotline	Shows the actual date when the information materials and details on the grievance hotlines became available at the Municipality	Date Format



Date Complied: Means of reporting grievances available	Shows the actual date when the means of reporting grievances became available for the Municipality (grievance box, phone numbers, office address, etc.)	Date Format
Grievance /Suggestion Box	Shows check symbol if Grievance /Suggestion Box is available at the Municipality	Check symbol
Phone Number/s /Hotline	Shows the Phone Number/s /Hotline indicated in the information materials	Number Format
Office Address	Shows the Office Address indicated in the information materials	Text
Signature over printed name	Shows the name and signature of the Area Coordinator	Text and Signature

<b>Who will fill-out/facilitate</b>	Area Coordinator
<b>When to be accomplished</b>	On or before 2 <sup>nd</sup> BA
<b>To whom will be submitted</b>	n/a
<b>When to be submitted</b>	It can be submitted after complying at least one requirement specified in the form. Regular updating of the form is allowed.
<b>Post-Processing</b>	<ul style="list-style-type: none"> <li>• Area Coordinator will ensure that the information are correct.</li> <li>• Area Coordinator will forward the attendance sheet to Municipal Database Encoder for encoding to the Database.</li> <li>• After encoding, Municipal Database Encoder will scan the document and save it as PDF file.</li> <li>• Area Coordinator will check the encoded data for quality checking before uploading to the Central Database via Internet</li> </ul>

**Guide CDD B-01: Barangay Profile Form**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
<b>Basic Information</b>		
Region	Shows the name of Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of Province	Text
Municipality	Shows the name of Municipality	Text
Barangay	Shows the name of Barangay	Text
No. of Sitios/Puroks	Shows the total number of sitios and purok within the barangay	Numeric
Inclusive Years under KC	Shows the inclusive years of KC implementation in the barangay	2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015
<b>Population Profile</b>		
Total no. of households	Shows the current total number of household in the barangay	Numeric
Total no. of families	Shows the current total number of families in the barangay	Numeric
No. of male	Shows the current total number of men in the Barangay	Numeric
No. of female	Shows the current total number of women in the Barangay	Numeric
No. of male children ages 0-5 years old	Shows the current total number of male children ages 0-5 in the barangay	Numeric
No. of female children ages 0-5 years old	Shows the current total number of female children ages 0-5 in the barangay	Numeric
No. of male children ages 6-12 years old	Shows the total number of male children ages 6-12 in the barangay	Numeric

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
No. of female children ages 6-12 years old	Shows the total number of female children ages 6-12 in the barangay	Numeric
No. of male children ages 13-17 years old	Shows the total number of male children ages 13-17 in the barangay	Numeric
No. of female children ages 13-17 years old	Shows the total number of female children ages 13-17 in the barangay	Numeric
Total male voting population	Shows the total number of male voters in the Barangay	Numeric
Total female voting population	Shows the total number of female voters in the Barangay	Numeric
Total male labor force	Shows the total number of work-capable men in the Barangay	Numeric
Total female labor force	Shows the total number of work-capable women in the Barangay	Numeric
<b>Indigenous People</b>		
Are there indigenous people (IP) in your barangay?	Shows "YES" if there are IPs in the barangay and "No" if none	Yes No
IP Group	Shows the IP groups' name present in the barangay	Text
Location/Sitio	Shows the actual location of the IP groups in the Barangay	Text
Total households	Shows the total number of IP households in the barangay	Numeric
Total families	Shows the total number of IP families in the barangay	Numeric
Total Male	Shows the total number of male IP in the barangay	Numeric
Total Female	Shows the total number of female IP in the barangay	Numeric
<b>Conflict-affected//Pantawid/SLP</b>		
Is the barangay affected by armed conflict?	Shows "YES" if the barangay is a conflict affected area and "NO" if not	Yes No
If yes, please give additional details of the armed conflict in the area	Shows additional details if the barangay is a conflict affected area	Text
No. of Pantawid Pamilya household beneficiaries in the barangay	Shows the current total number of Pantawid Pamilya household beneficiaries in the barangay	Numeric
No. of Pantawid Pamilya family beneficiaries in the barangay	Shows the current total number of Pantawid Pamilya family beneficiaries in the barangay	Numeric
No. of SLP household beneficiaries in the barangay	Shows the current total number of SLP household beneficiaries in the barangay	Numeric
No. of SLP family beneficiaries in the barangay	Shows the current total number of SLP family beneficiaries in the barangay	Numeric
<b>Area Profile</b>		
Is this a Poblacion Barangay?	Shows "YES" if the barangay is a Poblacion and "NO" if not	Yes No
If not, how many hours does it take to travel to Poblacion?	Shows the total number of hours and minutes of travel time from the barangay to the nearest Poblacion (if the Barangay is not a Poblacion)	Numeric
No. of kilometers from the Poblacion	Shows the total number of kilometers from the barangay to the nearest Poblacion (if the Barangay is not a Poblacion)	Numeric
What is the geographic characteristic of the	Shows the geographic characteristic of the Barangay	Upland Lowland Island

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Barangay? (i.e. upland, lowland, island, coastal)		Coastal
Is the barangay isolated from the rest of municipality?	Shows "YES" if the barangay is isolated from the rest of the barangays in the municipality and "NO" if not	YES NO
<b>Environmentally critical area/s</b>		
Name of Location	Shows the actual location of the identified environmentally critical area/s within the barangay	Text
Description	Shows the description of environmentally critical area/s (e.g. prone to landslide)	Text
<b>Empowerment</b>		
Name	Shows the name of the organization operating within the barangay	Text
Type of Organization	Shows the type of organization operating within the barangay	Text (e.g. NGO, PO, Private, etc.)
Formal? (Registered)	Shows "YES" if the organization operating within the barangay is a Formal or Registered organization and "NO" if not	Yes No
LGU-accredited?	Shows "Yes" if the organization operating within the barangay is LGU-accredited and "No" if not	Yes No
Advocacy	Shows the sector which is the primary beneficiary of the organization	Text (e.g. women, youth, IP, etc.)
Area of operation	Shows the area coverage of the operation of the organization	Text (e.g. Nationwide, Regional-wide, etc.)
Years operating in barangay	Shows the organizations number of years of operation in the barangay	Numeric
Active or inactive organization?	Shows "YES" if the organization in the barangay is active and "NO" if not	Yes No
Activities	Shows the primary/major activities the organization is implementing	
Total male members from barangay	Shows the total number of male members of the organization in the barangay	Numeric
Total female members from barangay	Shows the total number of female members of the organization in the barangay	Numeric
Male IP members from barangay	Shows the total male IP members of the organization in the barangay	Numeric
Female IP members from barangay	Shows the total female IP members of the organization in the barangay	Numeric
Marginalized sectors represented	Shows the marginalized sectors represented in the organization	Text (e.g. Women, IP, PWD, etc.)
<b>Local Governance – BLGU Officials' Profile</b>		
Name	Shows the name of the BLGU Official	Text
Sex	Shows the Natural or Biological Feature of the BLGU Official	Male Female
Age	Shows the number of years between the date of birth up to the last birthday of the BLGU official	Numeric
Civil Status	Shows the Marital Status of the BLGU Official	Annulled Legally Separated Married Single Widowed
IP group	Shows the name of IP Group where the BLGU Official belongs	Text

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Educational Attainment	Shows the highest degree of education the BLGU Official attained	College Graduate College Level Doctorate Degree Graduate Elementary Graduate Elementary Level High School Graduate High School Level Masteral Degree Graduate With units in Masteral Degree No formal education
Position in Brgy. Council	Shows the role or position of the BLGU Official in the Barangay organization	Barangay Captain Barangay Tanod Kagawad Secretary SK Chair SK Kagawad Treasurer
Inclusive Date (start and end date)	Shows the BLGU Officials actual start and end date of service	Date Format
Name of Non-KC –NCDDP Organization	Shows the name of the non-KC-NCDDP organization where the BLGU Official is a member	Text
Name of KC-NCDDP Committee	Shows the KC-NCDDP committee where the BLGU Official is a member	BRT PSA PIT PPT BAC PT AIT MIT O&M GRS
<b>Local Governance – Barangay Development Council Profile (Identify only those not listed in BLGU Officials' Profile)</b>		
Name	Shows the name of the BDC member	Text
Sex	Shows the Natural or Biological Feature of the BDC member	Male Female
Age	Shows the number of years between the date of birth up to the last birthday of BDC Member	Numeric
Civil Status	Shows the marital status of the BDC member	Annulled Legally Separated Married Single Widowed
IP Group	Shows the IP group name where the BDC member belongs	Text
Educational Attainment	Shows the highest degree of education the BDC member attained	College Graduate College Level Doctorate Degree Graduate Elementary Graduate Elementary Level High School Graduate High School Level

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
		Masteral Degree Graduate With units in Masteral Degree No formal education
Position in Brgy. Council	Shows the role or position of the BDC member in the Barangay organization	Barangay Captain Barangay Tanod Kagawad Secretary SK Chair SK Kagawad Treasurer
Inclusive Date (Start and End Date)	Shows the BDC member actual start and end date of service	Date Format
Name of Non-KC-NCDDP Organization	Shows the name of the non-KC-NCDDP organization where the BDC member is a member	Text
Sector Represented	Shows the sector being represented by the BDC member	Text (e.g. women, IP, Fisherfolk, etc.)
Name of KC-NCDDP Committee	Shows the KC-NCDDP committee where the BDC member is a member	BRT PSA PIT PPT BAC PT AIT MIT O&M GRS
<b>Local Governance</b>		
During the past year, how many times were the BAs conducted?	Shows the number of times the barangay assembly was conducted during the previous year	Numeric
On the average, how many barangay households are present during the meetings?	Shows the average total of households attending barangay assemblies in the previous year	Numeric
How many male residents were present?	Shows the average number of male attendees during BAs in the previous year	Numeric
How many female residents	Shows the average number of female attendees during BAs in the previous year	Numeric
How many IP households were present?	Shows the average number of IP household present during BAs in the previous year	Numeric
What other sectors were present?	Shows the sectors present during the BAs in the previous year	Text
During the past year, how many times did the BDC meet?	Shows the average number of BDC meetings per year	Numeric
How many, on the average, attend the BDC meetings?	Shows the average total of attendees during the BDC meetings in the previous year	Numeric
Male BLGU Officials	Shows the average number of male BLGU Officials attending BDC meetings	Numeric
Female BLGU Officials	Shows the average number of female BLGU Officials attending BDC meetings	Numeric
Male PO/CBO Representatives	Shows the average number of male PO/CBO representatives attending BDC meetings	Numeric

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Female PO/CBO Representatives	Shows the average number of female PO/CBO representatives attending BDC meetings	Numeric
What is the total annual budget of the barangay? How much was the IRA the past year? What are other sources of funds of the barangay?		
Source of Funds	Shows the sources of funds of the barangay	Numeric
Amount	Shows the total amount of funds by source of the barangay	
How were the barangay funds allocated in the previous year? (Refer to Barangay Annual Investment Plan)		
Environment	Shows the previous year total amount allocated for these Category	Numeric
Economic Sector	Shows the previous year total amount allocated for these Category	Numeric
Infrastructure	Shows the previous year total amount allocated for these Category	Numeric
Social Development	Shows the previous year total amount allocated for these Category	Numeric
Institutional Sector	Shows the previous year total amount allocated for these Category	Numeric
Other allocation	Shows the previous year total amount allocated for these Category	Numeric
Amount	Shows the previous year total budget breakdown per category based on AIP	Numeric
How was the 5% GAD fund utilized by the barangay?		
Activity	Shows the activities conducted using the GAD fund	Text
Cost	Shows the total amount of each activities conducted using the GAD fund	Numeric
Over the past year, what development project/s has/have been implemented in your barangay?		
Project	Shows the name of developmental projects available in the barangay	Roads Water Supply Toilet Livelihood Education Electrification Health and Nutrition
Location	Shows the actual location of the developmental projects available in the barangay	Text
Scope (Coverage/Units/Physical Targets)	Shows the actual area coverage or physical targets of the developmental project (e.g. km., sq.m., HH beneficiaries)	Text
Cost of Project	Shows the total cost of the developmental project	Numeric
Source of Funds	Shows the source of fund of the developmental projects available in the barangay	Barangay Funds Municipal Funds Provincial Funds NGA ODA Others
Cost Sharing (%)	Shows the percentage of cost sharing of the amount provided for the developmental project per source of fund	Numeric
Beneficiaries: Male	Shows the total male beneficiaries of the developmental project	Numeric
Beneficiaries: Female	Shows the total female beneficiaries of the developmental project	Numeric

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
Beneficiaries: IPs	Shows the total IP beneficiaries of the developmental project	Numeric
<b>Poverty</b>		
Identify top three economic activities in the barangay	Shows the top 3 economic activities in the barangay (farming, fishing, etc.)	Text
Identify major crops in the barangay	Shows the major crops available at the barangay	Text
What is the average annual household income in the barangay?	Shows the average annual household income in the barangay	Numeric
What is the average annual income of males?	Shows the average annual income of men in the barangay	Numeric
What is the average annual income of females?	Shows the average annual income of women in the barangay	Numeric
What is the average annual income of IPs?	Shows the average annual income of IPs in the barangay	Numeric
What types of road traverse through the barangay?		
Dirt	Shows the percentages of "Dirt" type of road in the barangay	Numeric
Gravel	Shows the percentages of "Gravel" type of road in the barangay	Numeric
Asphalted	Shows the percentages of "Asphalted" type of road in the barangay	Numeric
Cemented/All Weather Road	Shows the percentages of "Cemented/All Weather" type of road in the barangay	Numeric
What are the modes of transportation available?	Shows the top 3 mode of transportation available at the barangay	Text
<b>Facilities/Establishment/Services</b>		
Which of the following establishments and services are available in the barangay? If not available, how far is your barangay to the nearest establishment/service provider? (if the listed services and establishments are not applicable or "no use" to your barangay, write n/a)	Shows the possible list of facilities and establishments available at the barangay	Barangay Hall Multi-purpose building Tribal hall Evacuation Center Market place/bagsakan center Stores Mini port Daycare center Elementary School Secondary School College or university Health Station Hospital Irrigation Pre/Post harvest facilities Water supply system Drainage system Waste Facility Cemetery Environmental protection Electricity Telecommunication access Postal Service Bank



FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
		Credit facility Housing projects Tanod/police Emergency services Capability/skills training <ul style="list-style-type: none"> <li>- Health</li> <li>- Education</li> <li>- Organizational development</li> <li>- Agricultural and enterprise</li> </ul>
Please check if available	Shows the check symbol if the facility is available in the barangay	Check symbol
If none, distance to nearest facility (hours)	If the facility is not available in the barangay, it shows the number of hours from the barangay to the nearest location which the facility is available	Numeric
Mode of Transport and Cost	If the facility is not available in the barangay, it shows the available mode of transportation and cost from the barangay to the nearest location which the facility is available	Text/Numeric
What are the main problems in the barangay? Identify		
Problem	Shows the problem categories	Access/Mobility Water and Sanitation Health and Nutrition Literacy/Education Employment/Income generation Land Ownership/Asset Distribution Agricultural Service Facilities (i.e. Post Harvest) Peace and Order Environment Power Supply Communications Others, specify
Details	Shows the details of the problem category	Text
Are these Problems being addressed properly?	Shows check symbol if the problem is already addressed properly	Check symbol
Remarks	Shows additional details	Text
<b>Poverty Profile</b>		
Indicators	Shows the major categories of the indicators	Health Nutrition Access to Basic Amenities Shelter Peace and Order
Value	Shows the Value of the indicators	Numeric
Reference	Shows the references of the indicators	Text
Health		
1. Proportion of children aged 0-5 years old who died		

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
a. Number of children aged 0-5 years old who died	Shows the total number of children in the barangay aged 0-5 yrs. old who died from the previous year record	Numeric
b. Total children 0-5 years old	Shows the total number of children aged 0-5 yrs. old in the barangay from the previous year record	Numeric
<b>2. Proportion of women who died due to pregnancy-related causes</b>		
a. Number of pregnant women who died due to pregnancy-related causes	Shows the total number of pregnant women in the barangay who died due to pregnancy in from the previous year record	Numeric
b. Total pregnant women	Shows the total number of pregnant women in the barangay from the previous year record	Numeric
<b>Nutrition</b>		
<b>3. Proportion of children 0-5 years old who are malnourished .</b>		
a. Number of children aged 0-5 years old who are malnourished	Shows the total number of children aged 0-5 years old in the barangay who are malnourished from the previous year record	Numeric
b. Total children aged 0-5	Shows the total number of children aged 0-5 yrs. old in the barangay from the previous year record	Numeric
<b>Access to Basic Amenities</b>		
<b>4. Proportion of households with access to safe water</b>		
a. Number of households with access to potable water (within 250m)	Shows the total number of households in the barangay with access to potable water (within 250m) from the previous year record	Numeric
b. Total number of households	Shows the total number of households in the barangay from the previous year record	Numeric
<b>5. Proportion of households with access to sanitary toilet facilities</b>		
a. Number of households with access to sanitary toilet facilities	Shows the total number of households in the barangay with access to sanitary toilet from the previous year record	Numeric
b. Total number of households	Shows the total number of households in the barangay from the previous year record	Numeric
<b>Shelter</b>		
<b>6. Proportion of households who are squatting</b>		
a. Number of households who are squatting	Shows the total number of households in the barangay who are squatting from the previous year record	Numeric
b. Total number of household	Shows the total number of households in the barangay from the previous year record	Numeric
<b>7. Proportion of households living in makeshift housing</b>		
a. Number of households living in makeshift housing	Shows the total number of households in the barangay living in makeshift housing from the previous year record	Numeric
b. Total number of household	Shows the total number of households in the barangay from the previous year record	Numeric
<b>Peace and Order</b>		
<b>8. Proportion of households with members victimized by crimes</b>		
a. Number of household with members victimized by crimes	Shows the total number of households with members victimized by crimes in the barangay from the previous year record	Numeric
b. Total number of household	Shows the total number of households in the barangay from the previous year record	Numeric
<b>9. Proportion of households with incomes less than the poverty threshold</b>		

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
a. Number of households with income less than the poverty threshold	Shows the total number of households in the barangay with income less than the poverty threshold	Numeric
b. Total number of households	Shows the total number of households in the barangay from the previous year record	Numeric
<b>10. Proportion of households with income less than the food threshold</b>		
a. Number of households with income less than the food threshold	Shows the total number of households in the barangay with income less than the food threshold from the previous year record	Numeric
b. Total number of households	Shows the total number of households in the barangay from the previous year record	Numeric
<b>11. Proportion of household who eat less than three (3) meals a day</b>		
a. Number of households who eat less than three (3) meals a day	Shows the total number of households in the barangay who eat less than three (3) meals a day	Numeric
b. Total number of households	Shows the total number of households in the barangay from the previous year record	Numeric
<b>Basic Education</b>		
<b>12. Proportion of 6-12 years old children who are not in elementary school</b>		
a. Number of children aged 6-12 years old who are not in elementary school	Shows the total number of children aged 6-12 years old in the barangay who are not in elementary school from the previous year record	Numeric
b. Total number of children 6-12 years old	Shows the total number of children aged 6-12 years old in the barangay from the previous year record	Numeric
<b>13. Proportion of 13-16 years old children who are not in secondary school</b>		
a. Number of children 13-16 years old who are not in secondary level	Shows the total number of children 13-16 years old in the barangay who are not in secondary level from the previous year record	Numeric
b. Total number of children 13-16 years old	Shows the total number of children 13-16 years old in the barangay from the previous year record	Numeric
<b>Employment</b>		
<b>14. Proportion of the members of the labor force who are not working</b>		
a. Number of labor force who are not working	Shows the total number of labor force in the barangay who are not working from the previous year record	Numeric
b. Total number of labor force	Shows the total number of labor force in the barangay from the previous year record	Numeric

**Guide CDD B-02: Municipal Profile Form**

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
<b>Basic Information</b>		
Region	Shows the name of Region	CAR I II III IV-A IV-B V VI NIR VII VIII IX X XI XII Caraga ARMM
Province	Shows the name of Province	Text
Municipality	Shows the name of Municipality	Text
No. of Barangays	Shows the total number of barangays	Numeric
Inclusive Years under KC	Shows the inclusive years of KC implementation in the barangay	2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015
<b>Empowerment</b>		
Name	Shows the name of the organization operating within the municipality	Text
Type of Organization	Shows the type of organization operating within the municipality	Text (e.g. NGO, PO, Private, etc.)
Formal? (Registered)	Shows "YES" if the organization operating within the barangay is a Formal or Registered organization and "NO" if not	Yes No
LGU-accredited?	Shows "Yes" if the organization operating within the barangay is LGU-accredited and "No" if not	Yes No
Advocacy/Thrust	Shows the sector which is the primary beneficiary of the organization	Text (e.g. women, youth, IP, etc.)
Area of operation	Shows the area coverage of the operation of the organization	Text (e.g. Nationwide, Regional-wide, etc.)
Years operating in municipality	Shows the organizations number of years of operation in the municipality	Numeric

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
Active or inactive organization?	Shows "YES" if the organization in the municipality is active and "NO" if not	Yes No
Activities or Services	Shows the primary/major activities the organization is implementing	Text
Total male members from barangay	Shows the total number of male members of the organization in the municipality	Numeric
Total female members from barangay	Shows the total number of female members of the organization in the municipality	Numeric
Male IP members from barangay	Shows the total male IP members of the organization in the municipality	Numeric
Female IP members from barangay	Shows the total female IP members of the organization in the municipality	Numeric
Marginalized sectors represented	Shows the marginalized sectors represented in the municipality	Text (e.g. Women, IP, PWD, etc.)
<b>Local Governance – BLGU Officials' Profile</b>		
Name	Shows the name of the MLGU Official	Text
Sex	Shows the Natural or Biological Feature of the MLGU Official	Male Female
Age	Shows the number of years between the date of birth up to the last birthday of the MLGU official	Numeric
Civil Status	Shows the Marital Status of the BLGU Official	Annulled Legally Separated Married Single Widowed
IP Group	Shows the name of IP Group where the MLGU Official belongs	Text
Educational Attainment	Shows the highest degree of education the MLGU Official attained	College Graduate College Level Doctorate Degree Graduate Elementary Graduate Elementary Level High School Graduate High School Level Masteral Degree Graduate With units in Masteral Degree No formal education
Current Position in LGU	Shows the role or position of the MLGU Official in the municipal organization	Mayor Vice Mayor Councilor
Inclusive Date (start and end date)	Shows the MLGU Officials actual start and end date of service	Date Format
<b>Municipal Development Council Profile (Identify only those not listed in MLGU Officials' Profile)</b>		
Name	Shows the name of the MDC member	Text
Sex	Shows the Natural or Biological Feature of the MDC member	Male Female
Age	Shows the number of years between the date of birth up to the last birthday of MDC Member	Numeric
Civil Status	Shows the marital status of the MDC member	Annulled Legally Separated Married Single

FIELD NAME	DETAIL/DEFINITION	ALLOWED VALUES
		Widowed
IP Group	Shows the IP group name where the MDC member belongs	Text
Educational Attainment	Shows the highest degree of education the MDC member attained	College Graduate College Level Doctorate Degree Graduate Elementary Graduate Elementary Level High School Graduate High School Level Masteral Degree Graduate With units in Masteral Degree No formal education
Position in MDC	Shows the role or position of the MDC member in the organization	Text
Inclusive Date (Start and End Date)	Shows the MDC member actual start and end date of service	Date Format
Sector Represented	Shows the sector being represented by the MDC member	Text (e.g. women, IP, fisherfolk, etc.)
What is the total annual budget of the municipality? How much was the IRA the previous year? What are other sources of funds of the municipality?		
Source of Fund	Shows the sources of funds of the municipality	Text
Amount	Shows the total amount of funds by source of the municipality	Numeric
How were the municipal funds allocated in the previous year?		
Amount	Shows the previous year's total amount allocated for the particular category	Numeric
How was the GAD fund utilized by the municipality?		
Activity	Shows the activities conducted using the GAD fund	Text
Cost	Shows the total amount of each activity conducted using the GAD fund	Numeric
How was the DRRM fund utilized by the municipality?		
Activity	Shows the activities conducted using the DRRM fund	Text
Cost	Shows the total amount of each activity conducted using the DRMM fund	Numeric
<b>Poverty</b>		
<i>Economic Activities</i>		
Identify top three income-generating activities in the municipality		
Income-Generating Activity	Shows the top 3 economic activities in the municipality (farming, fishing, etc.)	Text
Average Income	Shows the average income of the economic activity	Numeric
No. of HHs involved	Shows the total number of households involved in the economic activity	Numeric
Seasonality	Shows the season of the year when an economic activity happens	"Month" to "Month" Year-Round
<i>Land Tenure Status</i>		
No. of HHs	No. of households living with the particular type of tenure	Numeric
No. of HH Head: Male	No. of male-headed households living with the particular type of tenure	Numeric

<b>FIELD NAME</b>	<b>DETAIL/DEFINITION</b>	<b>ALLOWED VALUES</b>
No. of HH Head: Female	No. of female-headed households living with the particular type of tenure	Numeric
What is the average annual household income?	Shows the average annual household income in the municipality	Numeric
What is the average annual income for male-headed HHs?	Shows the average annual income of male-headed households in the municipality	Numeric
What is the average annual income for female-headed HHs?	Shows the average annual income of female-headed households in the municipality	Numeric
What is the average annual income for IP-headed HHs?	Shows the average annual income of IP-headed households in the municipality	Numeric
<i>Mode of Transportation and Cost</i>		
Mode of Transport	Shows the available transportation means in the municipality	Text
Cost	Shows the minimum to maximum cost of the fare	Numeric

## **Guide CDD E-11: Bill of Quantities and Estimated Contract Cost**

1. Columns (1) to (5) are self-explanatory.
2. Column (6) is the Estimated Direct Cost (EDC) of the work item calculated as the product of Columns (3) and (5) as prepared by the Cost Estimator.
3. Column (7) is the sum of all indirect costs that include (overhead expenses, contingencies, miscellaneous expenses, contractor's profit margin, taxes)
4. Column (8) is the sum of Column (6) and Column (7) or the total contract cost for the work item.
5. After all work items have been identified and their total costs calculated, the sum of all entries under Column (6) and Column (7) shall be obtained horizontally and the final total of Columns (6) and (7) computed to obtain the estimated contract cost.
6. The cost estimator is advised to use established rates for work items obtained by the RPMO, if available or prevailing market rates using an Excel spreadsheet. They may revise the submitted estimates if, in their evaluation, the estimates need to be adjusted but must report the results during the community consultation to determine its effect on the grant allocation approved for the community.



## **Guide CDD E-27: Joint Inspection Report**

### **Sub-Project Identification:**

1. Name of sub-project: Indicate the approved sub-project title
2. Location: Indicate the sitio, barangay, municipality & province where the sub-project is constructed
3. Approved Cost: Breakdown of approved project cost
4. Revised/Actual Cost: Based on inspection and evaluation, indicate the breakdown of revised cost to complete the sub-project.

### **I. Sub-project Scope of Work:**

- a. Work Items: Indicate all approved work items and additional work items incorporated to complete the sub-project
- b. Original Quantity: Quantity based on the approved plans & POW
- c. Unit Cost: Unit cost based on the approved POW
- d. Approved Cost: The approved item cost based on the POW
- e. Accomplished quantity: Work item quantity accomplished based on the last reporting period or an updated report before the joint inspection.
- f. Actual Cost: Actual cost of the work item accomplished(in placed)
- g. Remaining Quantity: Remaining quantity of work item to complete the sub-project
- h. Estimated Cost: Estimated cost of the remaining works based on the approved unit cost.

### **II. Physical Description**

At the time of joint inspection, describe any acceptable or unacceptable works based from the approved plans and specifications. This could be in the form of materials used, workmanship or the actual dimension of the structure that did not conform to the approved plans.

### **III. Physical Appearance**

Describe the visual appearance of the sub-project.

### **IV. Project Quality**

Indicate the minimum quality testing required for the sub-project and the actual tests conducted

### **V. Financial**

- a. Releases: Indicate the date and amount of release received by the community per tranche
- b. Disbursed: Indicate the actual amount disbursed by the community on the tranches received
- c. Fund Balance: Amount of cash remaining with the community at the time of inspection

### **VI. Environmental Impact**

Any identified environmental impact of the sub-project (Refer to the Environmental Safeguard Management Plan)

### **VII. Mitigating Measures**

Mitigating measures provided by the community to minimized the environmental impact (refer to the EMP Reports)

### **VIII. Findings/Comments**

Specific findings and observations of the Inspectorate Team should be listed. Since the purpose of the evaluation is to facilitate the release of the Final Tranche, it is noteworthy for the Joint Inspectorate Team to provide a cost analysis of the remaining works to complete the sub-projects. They should take note of the remaining materials at the site/bodega, cost of labor, cash on hand and the availability of remaining local counterpart, in preparing cost matrix as against the remaining works to be undertaken.

The Team may attach a separate computation for the cost analysis.

### **IX. Recommendations**

Based on the findings, from physical description to environmental aspects, the team should provide necessary recommendations to address the observations and comments for the BSPMC, LGU and other stakeholders to rectify the work or come up with a punch list of items to be completed.

Based on the cost analysis prepared, the Joint Inspectorate Team in consultation with the community should submit their recommendations to facilitate the release of the last tranche.

Official communication to BSPMC and LGU informing the results of the inspection should be prepared by the Team.

## **Guide CDD E-31: Sub-project Completion Report (SPCR)**

The ACT is expected to assist the community volunteers in preparing the PCR. The PCR together with the required attachments must be made available before the inauguration day. The PCR will be the highlight of the program together with the signing of the Mutual Partnership Agreement and handling over of the O&M plan to the O&M group.

### **A. General Information:**

- |  |   |
|--|---|
| 1. Name of Sub-project                         | Indicate the complete approved name of the sub-project (ex. Improvement & expansion of Brgy. Wangwang Water Supply System)                    |
| 2. Sub-project category                        | Indicate whether water system, health station, rural roads, bridge, etc.  |
| 3. Physical Target                             | Indicate the actual physical dimension of the completed sub-project (e.g. kms for roads, sq.m for buildings, ln.m for drainage/riprap, etc.)  |
| 4. Barangay/s                                  | Name of barangays covered by the sub-project  |
| 5. Municipality                                | Name of municipality and the municipal class (ex. Tinoc – 5th class)  |
| 6. Province                                    | Name of province  |
| 7. Total SP Cost                               | Actual total construction cost of the sub-project   |
| 8. KALAHI Grant                                | Total amount of grant released to the community   |
| 9. Total LCC                                   | Total amount of commitment delivered by the community, LGU's (in cash & in-kind)  |
| 10. Date of 1st MIBF                           | Indicate the 1st MIBF for standard CEAC or MIAC Review for accelerated CEAC   |
| 11. Date of 2nd MIBF                           | Indicate the 2nd MIBF for standard CEAC or MIAC Review for accelerated CEAC   |
| 12. Date Started                               | Indicate the actual date the sub-project started  |
| 13. Date Completed                             | Indicate the actual completion date of the sub-project  |
| 14. Date of Inauguration                       | Indicate the actual date the completed sub-project was inaugurated  |
| 15. No. of HH served                           | Indicate the total number of households served by the sub-project (for common projects with other barangay/s include the number of HH served) |
| 16. Total population in the barangay           | Indicate the total population of the barangay categorized by gender   |
| 17. Total population served by the sub-project | Indicate total population categorized by gender that benefit from the sub-project   |

### **B. Sub-project Description:**

1. Provide a brief description of the sub-project such as name of the spring source and its location. Location and elevation of the concrete/steel reservoir from the target area. Type of water pipes installed in the system.
2. List all work items done during the construction stage and the actual cost involved per line item. Indicate also the actual cost of indirect cost incurred. (e.g. admin and overhead, pre-engineering, etc.)

### **C. Description of Sub-project Implementation:**

1. Describe the procurement process adopted by the community. From the selection of procurement method to its actual implementation. Describe also the process of construction methods used, re: scheduling and distribution of available resources.
2. Describe the problems encountered during the actual sub-project implementation (e.g delayed delivery of construction materials, etc.) and the action taken by the ACT, RPMT and the community to address the problems.

### **D. Labor paid out of the NCDDP Grant:**

Describe briefly the initial gains and benefits experienced by the community after the completion of the sub-project. (ex. Cost of transportation before and after the sub-project; time consumed for fetching water, travel distance for accessing education and health services; etc.)

### **E. Project Benefits**

Highlight the initial impact provided by the sub-project to the covered community/ies.

### **F. Enumerate the environmental impacts during and after the construction period and the corresponding mitigating measures provided by the community.**

### **G. List of community trainings provided and the impact made to the volunteers**

### **H. list of Ad Hoc Committee volunteers that participated the Community Empowerment Activity Cycle**

### **I. State the overall assessment of the community with regards to the sub-project implementation**

1. Cost of other similar type of infrastructure/intervention provided to the locality or nearby municipality
2. Cost effectiveness of the sub-projects as per actual cost against the program amount
3. Average number of days from the date of submission of the BSPMC request to the release of funds
4. Majority of end users. If IP area, indicate the name of Tribe
5. Average participation rate during Barangay Assemblies conducted from 1st BA to the last BA conducted
6. Actual commitments delivered and O&M arrangement forged by the community with full documentation
7. Other entities that provided contributions during preparation to implementation of the sub-project
8. List of monitors who visited the area. (KC-RPMT, NPMO staff, etc.)
9. Type of grievance received and resolved during the empowerment activity cycle

### **J. Lessons that the community would like to share for implementing the KC project and aspect that they would like to improve on the next project implementation process**