

External Services



1. Request for Issuance of Persons with Disability Identification Card

The Identification Card shall be the proof of entitlement to benefits and privileges indicated in R.A. 9442 and R.A. 10754 to bonafide persons with disability.

Office or Division:	Persons with Disabilities Affairs Office	
Classification:	Simple	
Type of Transaction:	G2C	
Who may avail:	<ol style="list-style-type: none"> 1. Bonafide person with disabilities in General Santos City 2. Authorized representative of persons with disabilities in General Santos City 	
	CHECKLIST OF REQUIREMENT/S	WHERE TO SECURE
	<p>For New Application</p> <ol style="list-style-type: none"> 1. Birth Certificate or any proof of birth in the absence of a birth certificate-1 photocopy <ol style="list-style-type: none"> a. Certificate of Residency (For IPs) b. Baptismal Certificate c. National ID d. Passport ID e. UMID f. PRC ID 2. Medical Certificate issued by a specialized physician based on the declared disability- original and photocopy 3. 1x1 colored picture (1 piece) 4. Application form- original 5. Voter's ID or Certificate-1 photocopy 6. Certificate of mental incapacity or physical incapability to vote-1 original copy 7. Marriage Contract for married woman- 1 photocopy <p>For Renewal</p> <ol style="list-style-type: none"> 1. 1x1 colored picture (1 piece) 2. Application form- original 3. Latest Medical Certificate issued by a specialized physician based on the declared disability- original 4. Expired PWD ID 5. Voter's ID or Certificate-1 photocopy 6. Marriage Contract for married woman- 1 photocopy <p>For Lost ID</p> <ol style="list-style-type: none"> 1. Affidavit of Loss - 1 original copy 	<ol style="list-style-type: none"> 1. Philippine Statistics Authority/Local Civil Registrar/Barangay, Professional Regulation Commission, Church and IP Chieftains/Department of Foreign Affairs/Social Security System 2. City Health Office or any licensed specialized physician for particular disabilities such as cancer, mental, intellectual, learning and apparent disabilities 3. Provided by applicant 4. Persons with Disabilities Affairs Office 5. Commission on Election 6. City Health Office 7. Local Civil Registry <ol style="list-style-type: none"> 1. Provided by applicant 2. Persons with Disabilities Affairs Office 3. City Health Office or any Licensed Specialized physician for particular disabilities such as cancer, mental, intellectual, learning and apparent disabilities 4. Persons with Disabilities Affairs Office 5. Commission on Election 6. Local Civil Registry <ol style="list-style-type: none"> 1. Any lawyer

CLIENT STEPS	AGENCY ACTIONS	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits all the requirements to frontline staff	1. Receives, checks, verifies and assesses the authenticity of submitted required documents by the applicant.	None	5 minutes	<i>Administrative Aide II,</i> Receiving Area, PWD Center.
2. Fills out the PWD ID application form	2.Assists in the filling out of the PWD ID application form	None	2 minutes	<i>Administrative Aide II,</i> Receiving Area, PWD Center.
3. none	3.Process the PWD ID (verification, scanning of pictures and signature, encoding of SPSIS entries, QR code, ID production and PRPWD)	None	15 minutes	<i>Administrative Aide II/Administrative Aide III,</i> Receiving Area, PWD Center.
Waiting for client's appropriate action				
4. Checks the correctness of the details of the ID, and the registration to the DOH website by accessing the QR code	4. Assists client in accessing the QR code		1 minutes	<i>Administrative Aide II,</i> Receiving Area, PWD Center
5. Accepts PWD ID	5. Releases PWD ID		2 minutes	<i>Administrative Aide II,</i> Receiving Area, PWD Center
	TOTAL	None	25 minutes/ transaction	
END OF TRANSACTION				