

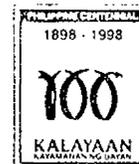


DEPARTMENT OF HEALTH

ENVIRONMENTAL HEALTH SERVICE

Manila, Philippines

1998



IMPLEMENTING RULES AND  
REGULATIONS OF CHAPTER XX

**“POLLUTION OF THE  
ENVIRONMENT”**

OF THE CODE ON SANITATION  
OF THE PHILIPPINES

(P.D. 856)

Printed by the

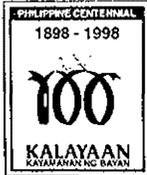
Environmental Health Service  
Department of Health

Not for Sale

IMPLEMENTING RULES AND REGULATIONS OF  
CHAPTER XX - "POLLUTION OF THE ENVIRONMENT"  
OF THE CODE ON SANITATION OF THE PHILIPPINES  
(P.D. 856)

TABLE OF CONTENTS

Section 1	Scope .....	1
Section 2	Definition of Terms .....	1
Section 3	Environmental Health Assessment Report (EHAR) .....	6
Section 4	Sanitary Permit .....	11
Section 5	Sanitary Requirements .....	12
Section 6	Requirements for Personnel .....	15
Section 7	Specific Provisions .....	16
Section 8	Evaluation and Inspection .....	20
Section 9	Responsibility of the Operator .....	25
Section 10	Responsibility of the Regional Health Director .....	25
Section 11	Responsibility of the Local Health Authority .....	26
Section 12	Responsibility of the Local Health Officer .....	26
Section 13	Penal Provisions .....	27
Section 14	Separability Clause .....	27
Section 15	Repealing Clause .....	27
Section 16	Effectivity .....	27



16 April 1998

**IMPLEMENTING RULES AND REGULATIONS OF CHAPTER XX -  
"POLLUTION OF THE ENVIRONMENT" OF THE CODE ON SANITATION OF  
THE PHILIPPINES (P.D. 856)**

To carry out the provisions of Chapter XX - "Pollution of the Environment" of the Code on Sanitation of the Philippines (P.D. 856), these rules and regulations are hereby formulated for implementation and strict compliance of all concerned.

**SECTION 1. SCOPE**

These implementing rules and regulations shall apply to all establishments, premises and facilities that are producing, processing, manufacturing, handling, storing, transporting, selling, distributing, using and disposing the following: fertilizers, pesticides, heavy metals, chemicals, biological agents and pollutants, radioactive materials, food additives, products emitting ionizing and non-ionizing radiation and other products and by-products that may cause harm to public health. These rules and regulations shall also apply to projects, conditions or activities such as industry, transport, energy, infrastructure, food, agricultural and other processes that may generate pollutants that are likely to adversely affect public health.

**SECTION 2. DEFINITION OF TERMS**

As used in these rules and regulations, the terms below shall be defined as follows:

- 2.1 **CONSTRUCTION** - any or all activity necessary or incidental to the alteration, demolition, installation, assembling, or equipping of buildings, private or public highways, roads, premises, parks, utility line, including line grading, excavation and filling.
- 2.2 **DISINFECTION** - a process of reduction or elimination of the number of potentially infectious microorganisms on an item or surface to safe levels.
- 2.3 **ENVIRONMENT** - all that which is external to the individual human host. It includes the physical, biological, chemical, social or economic factors that can influence human health.

- 2.4 **ENVIRONMENTAL COMPLIANCE CERTIFICATE (ECC)** - the document issued by the DENR Secretary or the Regional Executive Director (RED) certifying that based on the representations of the project proponent and the EIS preparers, as reviewed and validated by the Environmental Impact Assessment Review Committee (EIARC), the proposed project or undertaking will not cause a significant negative environmental impact, and that the proponent has complied with all the requirements of the Environmental Impact Statement (EIS) system.
- 2.5 **ENVIRONMENTAL HEALTH** - the characteristics of environmental conditions that affect the quality of health. It is the aspect of public health that is concerned with those forms of life, substances, forces and conditions in the surroundings or person that may exert an influence on human health and well-being.
- 2.6 **ENVIRONMENTAL HEALTH ASSESSMENT REPORT (EHAR)** - a report issued by the duly authorized officer of the DOH (i.e., the Director of the Environmental Health Service in case of health sensitive projects, and the Regional Health Director in case of health sensitive project locations) which contains comments, recommendations, and other inputs, that the proposed project, activity or undertaking has undergone review by the DOH. This report shall be submitted by the DOH to the DENR.
- 2.7 **ENVIRONMENTAL HEALTH IMPACT ASSESSMENT (EHIA)** - a formal study used to predict and determine the positive and negative consequences of developmental projects and existing environmental conditions on public health.
- 2.8 **ENVIRONMENTAL HEALTH RISK ASSESSMENT (EHRA)** - the use of scientific methods and information to define the probability and magnitude of potentially adverse health effects which may result from exposure to hazardous materials or situations.
- 2.9 **ENVIRONMENTAL IMPACTS** - the probable effects or consequences of proposed projects or undertakings on the physical, biological and socioeconomic environment, which can be direct or indirect, cumulative, and positive or negative.
- 2.10 **ENVIRONMENTAL IMPACT STATEMENT (EIS)** - the document(s) of studies on the environmental impacts of a project including the discussion on direct and indirect consequences upon human welfare and ecological and environmental integrity and the appropriate mitigating and enhancement measures.
- 2.11 **ENVIRONMENTAL IMPACT STATEMENT SYSTEM** - the entire process of organization, administration, and procedures institutionalized for purposes of assessing the significance of the effects of any project or undertaking on the quality of the physical, biological and socioeconomic environment, and designing appropriate preventive, mitigating and enhancement measures

- 2.12 **EXPOSURE** - any contact between a potentially harmful agent present in an environmental medium like air, water, food, soil, and surface of the human body like the skin or the lining of the digestive tract or respiratory tract. Exposure can occur in a number of routes like via inhalation, ingestion, direct skin or eye contact, transplacental blood contact or injection directly into the body.
- 2.13 **FERTILIZER** - an organic or inorganic material that is added to soil to supply elements essential to plant growth.
- 2.14 **HAZARD** - a source of danger; a qualitative term expressing the potential that an agent or condition can cause harm.
- 2.15 **HEALTH SENSITIVE PROJECT** - a project, whose raw materials, by products, intermediate products, finished products, waste products, and other processes during the construction, operation and decommissioning phases will pose a significant health risk to the workers and the communities exposed. These undertakings can be classified into major development projects such as, but not limited to the following:
- a. **Heavy Industries** (e.g., non-ferrous metal industries, iron and steel mills, smelting plants, petroleum, and other petrochemical industries, including oil and gas);
  - b. **Resource Extractive Industries** (e.g., major mining and quarrying projects, forestry projects like logging, grazing and extraction of mangrove products, fishery projects including dikes and fishpond development projects);
  - c. **Power Generation Operations** (e.g., thermal, geothermal, hydroelectric, nuclear, and other non-traditional sources of power and energy);
  - d. **Infrastructure Projects** (e.g., major dams, major reclamation projects, major roads and bridges); and
  - e. **Golf Course Projects**
- 2.16 **HEALTH SENSITIVE PROJECT LOCATION** - a project located in an area that meets any of the following characteristics:
- a. Health sensitive project location defined by the presence of endemic diseases in the area, presence of vulnerable environmental pathways which can cause an exposure situation, and presence of significantly high number of vulnerable sector of the community (children, elderly, sick and differently-abled);
  - b. Areas such as national parks, wildlife preserves, watersheds and aquifers where environmental damage may compromise the health of resident communities dependent on these areas for their water, food and other necessities vital to the maintenance of good health;

- c. Areas traditionally occupied by indigenous cultural communities or tribes where development may pose a significant impact on their health;
  - d. Areas classified as prime agricultural lands, bodies of water, mangrove areas, coral reefs, and other locations used by nearby communities as sources of income and sustenance; and
  - e. Areas frequently visited or hard-hit by natural calamities like volcanic activities, earthquakes, floods, etc. that may affect or disrupt the project cycle once located therein, and thereby pose additional hazards or risks to the resident communities.
- 2.17 **HEAVY METAL** - metallic element with high molecular weight, generally toxic to plant and animal life.
- 2.18 **INITIAL ENVIRONMENTAL EXAMINATION (IEE)** - the document required of proponents describing the environmental impact of, and mitigation and enhancement measures for projects or undertakings located in an environmentally critical area (ECA).
- 2.19 **INITIAL HEALTH EXAMINATION (IHE)** - part of the IEE which consists of a list of health hazards which may have significant health risks, including prevention and mitigating measures for projects or undertakings classified under health sensitive project locations.
- 2.20 **LOCAL HEALTH AUTHORITY** - an official or employee responsible for the application of a prescribed health measure in a local political subdivision. For a province, the local health authority is the governor and for a city or municipality, the mayor.
- 2.21 **LOCAL HEALTH OFFICER** - the provincial, city or municipal health officer.
- 2.22 **MULTIPARTITE MONITORING TEAM** - a multisectoral team convened for the primary purpose of monitoring compliance by the proponent with the ECC and applicable laws, rules and regulations.
- 2.23 **NOISE** - an erratic, intermittent, or statistically random oscillation, or any unwanted sound.
- 2.24 **NUISANCE** - anything that offends the senses, produces discomfort to the community, may injure health or endanger life.
- 2.25 **OBJECTIONABLE ODOR** - any odor present in the indoor or outdoor atmosphere that, by itself or in combination with other odors, is or may be harmful or injurious to senses, interferes with comfortable use and enjoyment of life and property, or creates a nuisance.

- 2.26 **PERSONAL PROTECTIVE EQUIPMENT (PPE)** - includes equipment necessary for the protection of workers and other persons against bodily harm resulting in sudden illness, occupational diseases or injury.
- 2.27 **PESTICIDE** - any substance or product, or mixture intended to control, prevent, destroy, repel or mitigate pests. It includes insecticide, fungicide, bactericide, nematocide, herbicide, molluscicide, avicide, rodenticide, plant regulator, defoliant, desiccant, and the like.
- 2.28 **POLLUTANT** - any substance whether solid, liquid or gas, which has direct or indirect impact on health, may alter the quality of the environment, imparts objectionable odor, noise, temperature change, physical, chemical or biological change to any segment of the environment, or is in excess of allowable health and environmental quality standards prescribed by the government.
- 2.29 **POLLUTION** - any alteration of the physical, chemical and biological properties of any water, air and/ or land resources of the Philippines, or any discharge thereto of any liquid, gaseous or solid wastes as will or is likely to create or to render such water, air and land resources harmful, detrimental or injurious to public health, safety or welfare, or which will adversely affect their utilization for domestic, commercial, industrial, agricultural, recreational or other legitimate purposes.
- 2.30 **PROPONENT** - any natural or juridical person intending to implement a project or undertaking.
- 2.31 **REGIONAL HEALTH DIRECTOR** - an official who heads the Department of Health Regional Health Office.
- 2.32 **RISK** - a negative consequence or adverse effect of some action or inaction; a quantitative term expressing the magnitude and probability of the adverse effect occurring after an individual has been exposed to a specific amount of hazard.
- 2.33 **SAFETY** - the condition of being free from danger that may cause accident or disease.
- 2.34 **SANITARY ENGINEER** - a person duly registered with the Board of Examiners for Sanitary Engineers (Republic Act 1364) and who heads the sanitation division/section/unit of the provincial/city/municipal health office or employed with the Department of Health or its regional health offices.
- 2.35 **SANITARY PERMIT** - the certification in writing of the city or municipal health officer or, in his absence, the chief or head of the sanitation division/section/unit that the establishment complies with the existing minimum sanitation requirements upon evaluation or inspection conducted in accordance with Presidential Decree Nos. 522 and 856 and local ordinances.

- 2.36 **SANITATION INSPECTOR** - a government officer employed by the national, provincial, city or municipal government, who enforces sanitary rules, laws and regulations and implements environmental sanitation activities under the supervision of the provincial/municipal/city health officer/sanitary engineer.
- 2.37 **SCOPING** - the stage in the EIS System where information and assessment requirements are established to provide the proponent with the scope of work for the EIS.
- 2.38 **UNDERSECRETARY** - the Undersecretary of Health, Office for Public Health Services of the Department of Health.
- 2.39 **VERMIN** - a group of insects or small animals such as flies, mosquitoes, cockroaches, lice, bedbugs, mice and rats that are vectors of diseases.
- 2.40 **VERMIN ABATEMENT PROGRAM** - a series of preventive and control activities or procedures to eliminate or reduce the presence of vermin.

**SECTION 3. ENVIRONMENTAL HEALTH ASSESSMENT REPORT (EHAR)**

**3.1 Coverage**

The Environmental Health Assessment Report (EHAR) shall cover (a) Health Sensitive Projects, and (b) Health Sensitive Project Locations. The coverage shall include new development projects and projects being proposed for expansion in terms of operations or area, or modification of processes.

**3.2 Procedure**

**3.2.1 Health Sensitive Project**

Proponents of health sensitive projects shall conduct an environmental health impact assessment (EHIA) as part of the EIS documents submitted to the DENR. Health sensitive projects shall be reviewed at the national level by the DOH Environmental Health Service (EHS) in accordance with the following procedures: (Please refer to Annex 1 for the flowchart)

- a. The project proponent, after securing an application for ECC, shall prepare for the conduct of the scoping meeting with DENR-EMB, Local Government Units, Non-Government Organizations, EIA Review Committee and other stakeholders, including the DOH.
- b. Upon submission of the EIS documents by the proponent, the DENR-EMB shall provide a copy of the EIS to DOH-EHS.

- c. The DOH-EHS shall review the environmental health impact assessment (EHIA) component of the EIS documents within thirty (30) days from receipt thereof. The DOH-EHS shall invite, if necessary, experts from other offices/units of the DOH in the review of the EIS.
- d. After the DOH review process, the DOH reviewer(s) shall recommend to the Director of Environmental Health Service the approval of the EHAR or the need to request for additional information from the proponent. The EHAR shall be noted by the Undersecretary of Health before transmittal to the DENR.
- e. In case there is a need for additional information after the DOH review process, the DOH-EHS shall inform the proponent through the DENR Review Committee.
- f. Upon the proponent's submission of additional information, the DENR-EMB shall provide a copy to DOH-EHS.
- g. The DOH-EHS shall review the additional information within thirty (30) days upon receipt thereof. Upon completion of the review, the DOH reviewer(s) shall endorse the findings and recommendations to the Director of Environmental Health Service for the approval of the EHAR.
- h. The EHAR shall be submitted directly to the DENR EIA Review Committee within fifteen (15) days after the DOH review process. The processing of the EHAR, however, may be prolonged depending on the extent of the additional information that will be required.

**3.2.2 Health Sensitive Project Location**

Proponents of projects in health sensitive location shall conduct an Initial Health Examination (IHE) as part of the IEE documents submitted to the DENR Regional Office. Projects in health sensitive location shall be reviewed by the DOH Regional Health Office-Technical Division (RHO-TD) in accordance with the following procedures: (Please refer to Annex 2 for the flowchart)

- a. Upon submission of the IEE documents by the proponent, the DENR Regional Office provides a copy of IEE to DOH-Regional Health Office (RHO).
- b. The DOH-RHO technical staff shall review the IHE component of the IEE documents within fourteen (14) days from receipt thereof.

- c. After the DOH-RHO review process, the DOH-RHO reviewer(s) shall recommend to the Regional Health Director the approval of the EHAR or the need to request for additional information from the proponent.
- d. In case there is a need for additional information after the DOH -RHO review process, the DOH-RHO shall inform the proponent through the DENR Regional Office.
- e. Upon the proponent's submission of additional information, the DENR Regional Office shall provide a copy to DOH-RHO.
- f. The DOH-RHO shall review the additional information within fourteen (14) days upon receipt thereof. Upon completion of the review, the DOH-RHO reviewer(s) shall recommend to the Regional Health Director the approval of the EHAR.
- g. The EHAR shall be submitted directly to the DENR Regional Office within seven (7) days after the DOH-RHO review process. The processing of the EHAR, however, may be prolonged depending on the extent of the additional health information that will be required.

3.2.3 The Philippine National Framework and Guidelines for Environmental Health Impact Assessment shall be the basis for the conduct of EHIA for health sensitive projects and IHE for projects in health sensitive location and is hereby made part of these implementing rules and regulations.

### 3.3 Contents of the Environmental Health Impact Assessment (EHIA) Report

After classification or screening for health sensitive project or health sensitive project location, the proponent shall collect the following environmental health data for the EHIA report for inclusion in the EIS documents:

#### 3.3.1 Baseline Health and Sanitation Information

- a. Demographic Profile
- b. Vital Statistics
- c. Local Health Resources
- d. Environmental Health and Sanitation Profile
  - i. Water supply
  - ii. Human excreta management
  - iii. Waste management and disposal systems
  - iv. Food hygiene
  - v. Other baseline environmental data (e.g., community noise levels, dust and other air pollutant levels, ground water quality, quality of existing bodies of water, soil quality and other parameters which may be aggravated as a consequence of the development project).

#### 3.3.2 Environmental Health Impact and Risk Assessment Component

- a. Description of the stages of the development project
- b. Identification and description of environmental health sensitive activities and processes during the various phases of the project
- c. Identification of health hazards present during the project activities
- d. Identification of impact population or receptors
- e. Description of the health consequences

#### 3.3.3 Control and Mitigating Measures

- a. Management control measures
- b. Health hazards control program
  - i. Engineering controls
  - ii. Administrative controls
  - iii. Personal protective equipment
  - iv. Community strategies and intervention to be implemented by the proponent
- c. Consequence recovery or mitigating measures
  - i. First-aid programs
  - ii. Medical emergency response strategies
  - iii. Community emergency and disaster plans
  - iv. Communication and warning strategies
  - v. Options for community rehabilitation and relocation
- d. Health surveillance, evaluation and monitoring plans
  - i. Monitoring parameters (ambient sampling)
  - ii. Composition of monitoring teams
  - iii. Schedule and frequency of monitoring
  - iv. Costs allocation of monitoring expenses
  - v. Recording and reporting systems to regulatory agencies and other stakeholders

### 3.4 Non-Coverage

3.4.1 Projects that do not meet the definition of Health Sensitive Project or Health Sensitive Project Location shall submit a Health and Safety Management Plan (HSMP) to the concerned DOH and DENR Regional Offices. The pertinent sections of the Philippine National Framework and Guidelines for Environmental Health Impact Assessment shall be the basis for formulation of the HSMP.

- 3.4.2 The HSMP shall include the following components
- a. Project description
  - b. Listing of health and safety hazards in the workplace and those with potential health impacts to the community
  - c. Statement of proposed strategies to prevent and control health and safety hazards identified
  - d. Proposal for the proper management, evaluation, monitoring and audit of the HSMP

### 3.5 Approval of the EHAR

- 3.5.1 The DOH shall issue the EHAR upon compliance with the documents required and after the evaluation of the health impacts. The EHAR which contains comments, recommendations, and other inputs shall be submitted by the DOH to the DENR.
- 3.5.2 Basis for the non-issuance of the EHAR shall be the following:
- a. That the statement in the document submitted is false or misleading;
  - b. That the documents submitted are incomplete, or failed to comply with the provisions of these rules and regulations;
  - c. That the proponent has failed to demonstrate or has not submitted the necessary documents stating the health, sanitation and safety components of the project; and
  - d. Other compelling reasons that may include adverse negative consequences that may impact on public health and for which acceptable mitigation and control measures have not been fully satisfied by the proponent.
- 3.5.3 The EHAR for Health Sensitive Project shall be signed by the DOH Reviewers, approved by the Director of Environmental Health Service, and noted by the Undersecretary and shall be transmitted directly to the DENR EIA Review Committee.
- 3.5.4 The EHAR for Health Sensitive Project Location shall be signed by the DOH-RHO Reviewers and approved by the Regional Health Director and shall be transmitted directly to the DENR Regional Office.

### 3.6 Environmental Health Advisory Committee

The Secretary of Health, as Chairperson of the Interagency Committee on Environmental Health (IACEH), may at any time refer matters to member agencies or groups of experts who have authority on such fields in relation to the implementation of the EHIA process. The Environmental Health Service shall act as the Secretariat to the Advisory Committee.

### 3.7 Visitorial Power

The Secretary of Health or his duly authorized representative shall have visitorial power to ascertain the compliance with the existing commitments stipulated in the EIS document, standards, conditions and requirements relative to public health and safety, within the context of the Multipartite Monitoring Team (MMT) formed for such purpose.

### 3.8 Coordination with Other Agencies

The Secretary of Health or his duly authorized representative shall coordinate with the Department of Environment and Natural Resources and other agencies concerned in the implementation of the EHIA process.

## SECTION 4. SANITARY PERMIT

- 4.1 No person or entity shall operate any establishment, premises or facility without a Sanitary Permit issued by the local health officer.
- 4.2 Any extension or additional construction or alteration in an establishment shall require a new sanitary permit before it can operate.
- 4.3 **Application or Renewal of Sanitary Permit**
- 4.3.1 The application or renewal of the sanitary permit shall be filed with the city or municipal health office having jurisdiction over the establishment utilizing the prescribed EHS Form.
- 4.3.2 Sanitary permit shall be issued only upon compliance to at least satisfactory rating utilizing appropriate EHS standard forms for the type of establishment that is being inspected.
- 4.3.3 **Fees.** The fees for the application, renewal and noting of the sanitary permit shall be paid to the local government unit. The amount of fees shall be set through city or municipal ordinance.
- 4.3.4 **Noting of Permit.** If there is a change in ownership of the establishment, premises or facility covered by these rules and regulations, the new owner shall apply to the city or municipal health office within fourteen (14) days to have such change noted in the records and permit certificate. The new owner shall pay the corresponding fee for such noting.
- 4.3.5 **Validity.** The sanitary permit shall be valid for one (1) year, ending on the last day of December of each year, and shall be renewed every first month of the year thereafter. However, for new establishments, the sanitary permit shall also expire at the end of December of the current year.

- 4.3.6 **Revocation or Suspension.** Upon the recommendation of the local health officer, the sanitary permit shall be suspended or revoked by the local health authority upon violation of any sanitation rules and regulations.
- 4.3.7 **Posting of Permit.** The sanitary permit shall be posted in a conspicuous part of the establishment and shall be available for inspection by authorized health and other regulatory personnel.
- 4.3.8 **Record of Permit.**
- a. Every city or municipality shall keep a record of all establishments that have been issued sanitary permit and renewal thereof.
  - b. The record shall in every case show the following:
    - i. The name and address of the holder of the permit who in every case shall be the actual occupant of the establishment;
    - ii. The location of the establishment;
    - iii. The nature and kind of business for which the permit has been issued;
    - iv. The date the first permit was issued and the dates of any renewal thereof;
    - v. Every change of occupation and management of the establishment since the first permit was issued;
    - vi. Sanitary conditions under which the permit was issued or any renewal thereof granted; and
    - vii. The revocation of the permit.
  - c. The record shall be available at all reasonable time for inspection by authorized officer of the Department of Health or the local government unit.

## SECTION 5. SANITARY REQUIREMENTS

### 5.1 Site Requirements

- 5.1.1 The establishment, premises and facility shall be located only in areas or zones designated by existing laws or ordinances for that type of establishment.
- 5.1.2 Suitable warning devices in workplaces where hazardous substances are manufactured, handled, stored, transported and disposed shall be installed to alert the personnel in case of the liberation of dangerous quantities of such substances.

### 5.2 Water Supply

- 5.2.1 The water shall be adequate and potable whether from a public or private water supply system. The quality of drinking water used shall be in accordance with the Philippine National Standards for Drinking Water.
- a. All drinking water sources shall have a certificate of potability of drinking water issued by the local health officer.
  - b. A minimum of forty (40) liters of water per capita per day shall be maintained.
- 5.2.2 The source, delivery, operation, examination and protective measures for drinking water supply shall be in accordance with the provisions of Chapter II - "Water Supply" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.

### 5.3 Food and Drinks

Dispensing of food and drinks within the establishments, premises, and facilities covered by these rules and regulations shall be in accordance with the provisions of Chapter III - "Food Establishments" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.

### 5.4 Sewage Collection and Disposal

All sewage discharged from the establishments shall be disposed in a public sewerage system, or in the absence thereof, in a manner complying with the provisions of the Chapter XVII - "Sewage Collection and Disposal, Excreta Disposal and Drainage" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.

### 5.5 Solid Waste Management

Refuse segregation/separation, storage, collection, transport and disposal shall be in accordance with the provisions of Chapter XVIII - "Refuse Disposal" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.

### 5.6 Vermin Control

- 5.6.1 A vermin abatement program shall be maintained in the establishment by the operator. If they fail, neglect or refuse to maintain a vermin abatement program, the local health office shall undertake the work at the expense of the operator.
- 5.6.2 The procedure and frequency of vermin abatement program shall be determined by the local health officer and approved by the local health authority.

- 5.6.3 Proper housekeeping and cleaning of surroundings shall be maintained at all times by the owner or operator of the establishment, premises or facility.
- 5.6.4 Owners or operators of establishments, premises or facilities shall comply with the pertinent provisions of Chapter XVI - "Vermin Control" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.
- 5.7 Handwashing Facilities**
- 5.7.1 Wash-hand basins shall be installed in convenient places and as near as practicable to where the person for whose use they are provided or in such locations as may be otherwise prescribed by the local health office.
- 5.7.2 If required in writing by the local health officer, additional wash-hand basins shall be installed as near the toilet facilities as possible. The installation of such shall be in accordance with the provisions of the National Plumbing Code of the Philippines.
- 5.7.3 Wash-hand basins shall be maintained properly. Adequate supply of water, soap, and hand drying facilities shall be provided to workers and clients. The basins shall be maintained clean and in good repair at all times.
- 5.8 Toilet Facilities**
- 5.8.1 The operator shall provide adequate and clean toilet facilities for male, female and differently-abled workers and clients.
- 5.8.2 The toilets shall be easily accessible to the workers and clients.
- 5.8.3 Toilet rooms shall be completely enclosed, properly lighted and provided with adequate ventilation.
- 5.8.4 The number of water closets, urinals, wash-hand basins and showers shall depend on the general category of establishment. For industrial establishments, the pertinent provisions of Chapter VII - "Industrial Hygiene" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations shall be complied. For other types of establishments, pertinent provisions of other chapters of P.D. 856 and existing standards of the DOH shall be complied.
- 5.9 Lighting and Ventilation**
- The general illumination and ventilation requirements of specific implementing rules and regulations of P.D. 856 is hereby adopted and made as integral part of these implementing rules and regulations.

- 5.10 Sound and Vibration**
- 5.10.1 Sound-absorbing materials shall be installed in all areas where sound is produced to decrease reverberation.
- 5.10.2 Anti-vibration mountings shall be utilized for sound or vibration producing equipment
- 5.10.3 Total enclosure of the establishment or facility or area where sound and vibration are produced shall be required to prevent the escape of noise that may disturb the neighboring communities.
- 5.10.4 Employees working in areas where sound level exceeds 75 dB shall be provided with hearing protection equipment.
- 5.11 Change Rooms**
- 5.11.1 Establishments, premises or facilities shall be provided with change rooms for workers in accordance with specific implementing rules and regulations of P.D. 856.
- 5.11.2 Change rooms shall be provided for each gender and shall be located adjacent to the bathrooms.
- 5.11.3 Change rooms shall be provided with individual lockers, chairs and lounges.
- SECTION 6. REQUIREMENTS FOR PERSONNEL**
- 6.1 No worker shall be allowed to work in the establishment, premises or facility without an up-to-date health certificate issued by the city or municipal health officer of the locality where the establishment is situated.
- 6.2 Health Certificates (EHS Form 102-A & B) shall be issued after the personnel has undergone physical and medical examinations and immunizations. All certificates are non-transferable and shall be renewed at least once a year.
- 6.3 The worker shall wear the health certificate while at work.
- 6.4 No worker suffering from communicable disease shall be allowed to work in the establishment.
- 6.5 Workers shall wear clean working garments and shall observe good personal hygiene and practices while working. Smoking and drinking alcoholic beverages are not allowed while at work. The use of prohibited drugs is likewise prohibited.

- 6.6 Workers shall be required to wear personal protective equipment while working in areas exposed to pollutants and other hazards.
- 6.7 Workers shall be trained on procedures to prevent and control the liberation of hazardous substances, eliminate pollution, and evacuate from the affected area in orderly manner.

**SECTION 7. SPECIFIC PROVISIONS**

**7.1 Pesticide and Fertilizer Establishments**

- 7.1.1 No pesticide and fertilizer establishment shall operate without securing appropriate clearances from concerned agencies as required under P.D. 856, P.D. 1151, P.D. 1586, P.D. 1144, R.A. 6969 and other relevant laws and regulations.
- 7.1.2 Every employer shall provide the workers with personal protective equipment (PPE), protective shields and barriers whenever necessary.
- 7.1.3 All PPE shall be of the approved design and construction appropriate for the exposure or the work to be performed.
- 7.1.4 Agricultural chemicals shall be handled and used only by trained personnel.
- 7.1.5 Pesticides used in public health shall be handled only by accredited urban pest control applicators.
- 7.1.6 The pertinent provisions of Chapter XVI - "Vermin Control" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations shall be enforced.

**7.2 Steel and Metal Industries**

- 7.2.1 Steel and metal plants shall be located only in areas designated by local zoning laws and ordinances.
- 7.2.2 Waste water and other discharges coming from steel and metal plants shall be treated prior to its final disposal and shall conform to the DENR standards for effluents.
- 7.2.3 Air emissions coming from steel and metal plants shall conform to the DENR standards.
- 7.2.4 The workers shall wear personal protective equipment while at work.
- 7.2.5 The local health office shall monitor the environmental health effects to the communities within the impact zone as well as the occupational health of all workers working thereat.

**7.3 Electric and Electronic Industries**

- 7.3.1 High-tension transmission lines shall never pass overhead or underground of residential areas.
- 7.3.2 Manufacturers of electrical or electronic products and other products emitting radiation that may adversely affect the health and safety of the people shall be required to secure clearance from the DOH before selling their products.
- 7.3.3 The provisions of P.D 480 and the rules and regulations of the Radiation Health Service of the Department of Health shall be applied and enforced.

**7.4 Transport Industries**

- 7.4.1 All drivers, conductors and inspectors of public utility vehicles shall be required to secure an up-to-date health certificate from the local health office.
- 7.4.2 Emissions of all land motor transport vehicles shall conform to the maximum allowable emission standard set forth under P.D. 1181 "Abatement, Control and Prevention of Vehicular Pollution" and its implementing rules and regulations.
- 7.4.3 Land motor transport vehicles, particularly the public utility vehicles and tricycles, shall not produce noise above 70 dB from source such as engine, muffler or radio/stereo.
- 7.4.4 Blowing of horns shall be prohibited while passing public buildings like courthouses, places of worships, schools, hospitals, offices and other institutions. Local government units shall promulgate local ordinances to this effect.
- 7.4.5 No residential area shall be established along the path of sonic booms from airplanes/aircraft.
- 7.4.6 No airport shall be established in a place designated by zoning laws and ordinances as residential areas.

**7.5 Construction Industries**

- 7.5.1 No vertical, horizontal or underground construction activities shall be allowed to discharge or emit pollutants (water, air, soil, noise, odor) that may adversely affect the health of the workers and the community. Workers shall be protected from the effect of the activities by the proper use of applicable PPE.

- 7.5.2 Harmful dust, gases and fumes present in an excavation shall be rendered harmless by the installation of ventilators or other control and mitigating measures to free the area from contaminants. Internal combustion engine shall be operated in an excavation only when provision has been made to ensure that exhaust gases and fumes are rendered harmless or discharged to a point away from the excavation.
- 7.5.3 Explosives, when used incidental to the construction works, shall not cause or produce pollutants that may adversely affect the health and safety of the nearby communities or the workers in the construction site.
- 7.5.4 Vertical construction works shall be well shielded or screened to prevent the dissipation of dusts that are hazardous to workers and the people outside the construction site.
- 7.5.5 Land development projects like golf courses, memorial parks, subdivisions, industrial estates, sewerage and water supply projects and construction requiring boring such as in geothermal development and mining, shall ensure that the underground and surface water sources are protected from pollution.

**7.6 Health Care Facilities**

- 7.6.1 The handling, storage, collection, transport and disposal of solid and liquid wastes, particularly infectious, pathologic and hazardous wastes, from health care facilities such as hospitals, clinics, laboratories and other similar establishments, shall conform to the pertinent provisions of Chapter XVII - "Sewerage Collection and Disposal, Excreta Disposal and Drainage" and Chapter XVIII - "Refuse Disposal" of the Code on Sanitation of the Philippines (P.D. 856) and their implementing rules and regulations.
- 7.6.2 The owner or operator of the establishment shall provide personnel of health care facilities handling biomedical wastes with appropriate PPE.

**7.7 Shops and Cottage Industries**

- 7.7.1 Shops and other cottage industries using chemicals or other materials that may produce pollution like water, air, soil, odor, noise shall conform to specific provisions and implementing rules and regulations of P.D. 856 and other relevant laws.
- 7.7.2 The escape and inhalation of fumes, gases or dusts shall be prevented by the provision of local, natural or mechanical, or general ventilation systems. The air shall be discharged to clear areas where it can be easily diluted and shall not affect the neighborhood and the people living in the community. The discharged air shall conform to the DENR standards for air emissions.

- 7.7.3 The discharge of wastewater shall conform to the DENR standards for effluents.
- 7.7.4 Shops and other cottage industries shall conform to the pertinent provisions of Chapter VII - "Industrial Hygiene" and Chapter XIX - "Nuisances and Offensive Trades and Occupation" of the Code on the Sanitation of the Philippines (P.D. 856) and their implementing rules and regulations.

**7.8 Sanitary Landfills and Other Garbage Disposal Areas**

Sanitary landfills and other garbage disposal areas shall conform to the provisions of Chapter XVIII - "Refuse Disposal" of the Code on Sanitation of the Philippines (P.D. 856) and its implementing rules and regulations.

**7.9 Firecrackers, Explosives and Ammunition Industries**

- 7.9.1 Firecrackers, ammunition and explosive plants/shops shall be allowed only in areas designated by the local zoning ordinance for that type of industry.
- 7.9.2 The owner or operator of such establishment shall institute appropriate health, sanitation and safety measures to prevent, mitigate and control adverse impact to public health and safety.

**7.10 Ricemills and Lumberyards**

- 7.10.1 Rice husks from rice mills (stationary or mobile) shall not be stored and disposed in a manner that will create pollution. Storage and disposal of rice husks shall conform to the provisions of Chapter XVIII - "Refuse Disposal" of the Code on Sanitation of the Philippines (P.D. 856.) and its implementing rules and regulations.
- 7.10.2 Saw dusts and wood shavings from lumberyards shall not be stored and disposed in a manner that will create pollution.
- 7.10.3 The owner or operator of ricemills and lumber yards shall institute appropriate preventive, mitigation and control measures for the protection of public health and safety.

**7.11 Biomass Fuel**

- 7.11.1 Wood, crop residues, animal dung, and other forms of biomass shall not be used in establishments for cooking and/or heating fuels unless the establishment has a satisfactory ventilation system. Unprocessed solid fuels, like wood or coal shall not be used in establishments even if they satisfy the ventilation requirement.

7.11.2 Open fire cooking, roasting and barbecuing in streets and other crowded areas shall not be permitted.

**7.12 Other Establishments, Premises and Facilities**

Cement plants, car assembling plants, battery plants, mining and quarrying plants, food manufacturing and processing plants, abattoirs, funeral parlors and embalming establishments, industrial and commercial complex, recreation facilities, and other similar establishment, premises or facility that may create pollution shall conform to the pertinent provisions of P.D. 856 and other applicable laws.

**SECTION 8. EVALUATION AND INSPECTION**

**8.1 Responsible Officer**

It shall be the duty of the city/municipal health officer to cause the inspection and evaluation of every establishment, premises or facility covered herein at least every three (3) months and to cause as many additional inspections and re-inspections and evaluation as deemed necessary for the enforcement of the provisions of these rules and regulations. Inspection of the establishment shall be conducted within seven (7) working days after payment of the inspection fee to the city/municipal treasurer concerned.

**8.2 Sanitation Inspection Fee**

The fees payable on every inspection shall be of such amount prescribed by local ordinance.

**8.3 Mission Order**

8.3.1 The city/municipal health officer or the chief of the sanitation division/section/unit of the local health office, as the case may be, shall issue a mission order (EHS Form No. 112) for every sanitation inspection that will be conducted by the sanitary engineer/sanitation inspector.

8.3.2 The mission order must contain the date, mission order number and series, the name of the inspector and I.D. number, the business names, addresses, categories of establishments to be inspected and the scheduled dates of inspections. This must be shown to the owner/operator of the establishment before any inspection is conducted. The immediate supervisor of the inspector shall monitor the enforcement of the mission order.

8.3.3 Sanitary inspection conducted without a mission order is prohibited.

8.3.4 The owner/operator of the establishment shall report to the local health officer or chief of sanitation division/section/unit any unauthorized inspection that was executed.

**8.4.1 Uniform of the Sanitation Inspector and Basis of Inspection**

8.4.1 The sanitation inspector shall wear the prescribed uniform of the office with the proper identification card while conducting the inspection.

8.4.2 He/She shall likewise bring all the equipment and supplies needed in the inspection such as the inspection forms, clipboard, thermometer, flashlight, measuring tape, camera, light meter, water pressure gauge, residual chlorine and pH comparator kits, blacklight, copy of the sanitation laws, regulations, standards and other reference materials needed in the inspection.

**8.5 Frequency of Inspection**

Inspection of establishments, premises or facilities covered herein shall be conducted at least once every three (3) months.

**8.6 Recording of Inspection**

8.6.1 The sanitary engineer/sanitation inspector shall keep a record of all inspections or evaluation reports in an inspection form (EHS Form No. 103-B).

8.6.2 The sanitary engineer/sanitation inspector shall furnish the original copy of such report to the operator/owner of the establishment.

8.6.3 Demerits entered in the appropriate column of the inspection form shall indicate that the item does not conform to the requirements of these rules and regulations.

a. The inspection form has twenty (20) items. Non-complying items are indicated with an (X). Every such item is weighted with a demerit of 5. The rating of the establishment is therefore 100 less (number of demerits x 5). The result is expressed as a percentage (%) rating.

**8.6.4 Sanitation Standard**

a. The percentage rating has an equivalent sanitation standard as follows:

Percentage Rating	Sanitation Standard	Color Code
90 - 100 %	Excellent	Luminous Green
70 - 89 %	Very Satisfactory	Luminous Yellow
50 - 69 %	Satisfactory	Luminous Red

b. Establishment, premises or facility with percentage rating below 50% shall be recommended for suspension of operation until compliance.

- c. The Sanitation Standard Rating Sticker (SSRS) (EHS Form No. 104-A/C) shall be posted in a conspicuous part of the establishment, preferably at the door, for guidance of the general public. It shall be updated once every three (3) months, unless revoked earlier.
- 8.6.5 The average sanitation standard of every establishment shall be evaluated by the local health officer/chief of the sanitation division/section/unit every end of the year to determine its improvement/maintenance of rating.
- 8.7 Report of Inspection**
- 8.7.1 The sanitary engineer/sanitation inspector who conducted the inspection shall complete the sanitary inspection report, and whenever an inspection form issued indicates non-complying items, he shall notify the owner/operator of the corrections to be made and indicate a reasonable period for its compliance.
    - a. The recommended corrective measures shall be specific in nature for the easy understanding of the owner/operator of the establishment.
    - b. Reasonable period for compliance or grace period shall be inclusive of Saturdays, Sundays and holidays.
  - 8.7.2 The sanitary engineer/sanitation inspector who conducted the inspection shall likewise prepare a sanitary order (EHS Form No. 107) for approval by the city or municipal health officer or chief of the sanitation division/section/unit, as the case may be.
  - 8.7.3 Within 48 hours after the inspection or evaluation, the original copy of the inspection report (EHS Form No. 103-B) and the sanitary order shall be furnished and acknowledged by the holder of the sanitary permit or the owner/operator of the establishment. The inspection report shall be personally delivered, or shall be sent through the postal service, registered with return card.
- 8.8 Re-inspection**
- 8.8.1 If upon re-inspection of the establishment after the deadline, the sanitary engineer/sanitation inspector finds that the correction has not been effected, he shall report to the health officer who shall recommend to the local health authority the revocation of the sanitary permit.
  - 8.8.2 A copy of the inspection form and any notice served shall, in all cases be filed and kept by the local health office and be available for inspection by authorized officials.

**8.9 Service of Notice**

- 8.9.1 Whenever an inspection or evaluation form indicates non-complying items, the city/municipal health officer shall serve to the owner/operator of the establishment a sanitary order requiring him, within the grace period stated in the order, to take such remedial action as may be specified therein.
- 8.9.2 In the event of non-compliance with the terms of the first sanitary order by the owner/operator, the city/municipal health officer may serve a second notice:
  - a. **Second Sanitary Order**
    - i. If the owner/operator of the establishment needs additional time to comply with the first sanitary order, he shall request the city/municipal health officer in writing, prior to the expiration of the sanitary order, for an extension of the grace period. The city/municipal health officer, upon the recommendation of the sanitary engineer/sanitation inspector who conducted the inspection, will act on such request.
    - ii. Notice of Hearing (EHS Form No. 118). The city/municipal health officer shall call the owner/operator of the establishment to show cause, at a time and place stated in the notice, why the permit issued to the establishment shall not be revoked.

**8.10 Revocation of Permit**

- 8.10.1 After prior notice and hearing as provided above, the city/municipal health officer, if satisfied that the terms of the two notices have not been complied with or that failure to comply therewith is not excusable, shall recommend to the local health authority the revocation of the said permit, or;
- 8.10.2 After the second sanitary order on an extended grace period, a re-inspection was conducted and still the owner/operator of the establishment fails to comply with such order as reported by the sanitary engineer/sanitation inspector, the city/municipal health officer shall recommend to the local health authority the revocation of the sanitary permit without delay and shall inform other related agencies of the city/municipality of such revocation.
- 8.10.3 Lifting of suspension of permit may be recommended by the local health officer to the local health authority whenever the owner/operator of the establishment complies with the notices.

- 8.10.4 The owner/operator of the establishment may file a motion for reconsideration to the local health authority if he is not satisfied with the action of the city/municipal health officer.
- 8.10.5 The local health authority may file court proceedings against any establishment continuously operating after the revocation of its permit.
- 8.11 **Summary Suspension of Permit**
- Whenever the city/municipal health officer finds unsanitary or unhealthy conditions in the operation of an establishment which in his judgement constitute a substantial hazard to public health, the local health officer may recommend to the local health authority the immediate suspension of the sanitary permit. Any person to whom such order is issued may file a written petition and shall be afforded a hearing within 48 hours.
- 8.12 **Appeals**
- The person or panel conducting the hearing may confirm, modify or reverse the decision appealed from which decision shall be final.
- 8.13 **Power of Entry**
- Any sanitary engineer/sanitation inspector or duly authorized officer of the Department of Health or of the provincial, municipal or city health office, upon presentation of proper credentials may at all reasonable times enter into any establishment, premises or facility used for any of the purposes referred to in these rules and regulations for the purpose of inspection or any other action necessary for administration of these rules and regulations.
- 8.13.1 Sanitary inspections shall be conducted by officials in accordance with section 8.3 of these rules and regulations.
- 8.13.2 Sanitary inspections shall be done preferably during the time while the establishment is in operation.
- 8.14 **Hearings**
- The local health authority may conduct hearings regarding erring establishments to include appeals from establishments. The decision of the local health authority shall be deemed final and executory.

## SECTION 9. RESPONSIBILITY OF THE OPERATOR

The operator shall:

- 9.1 Secure sanitary permit from the local health office before operating the establishment, premises or facility;
- 9.2 Post the Sanitary Permit and Sanitation Standard Rating Sticker (SSRS) in a conspicuous part of the establishment;
- 9.3 Renew the sanitary permit as prescribed;
- 9.4 Prevent the escape of pollutants from the establishment, premises or facility by installing pollution control devices;
- 9.5 Employ only workers with up-to-date health certificate;
- 9.6 Assist the local health office in the evaluation and inspection of the establishment, premises or facility;
- 9.7 Submit regular reports to the local health authority through the local health officer;
- 9.8 For proposed development projects or projects for expansion classified under health sensitive projects and health sensitive project location, secure the necessary clearances/permits from appropriate national government agencies; and
- 9.9 Comply with the provisions of these implementing rules and regulations.

## SECTION 10. RESPONSIBILITY OF THE REGIONAL HEALTH DIRECTOR

The regional health director shall:

- 10.1 Assign technical staff or reviewers who shall assess/evaluate the Initial Health Examination (IHE) component of the IEE for projects classified under health sensitive project location;
- 10.2 Approve the Environmental Health Assessment Report (EHAR) for projects in health sensitive location;
- 10.3 Cause the transmittal of the EHAR or the request for additional information from the project proponent to the DENR Regional Office;
- 10.4 Coordinate with the DENR Regional Office and other regional offices of national government agencies in relation to the implementation of the EHIA process and its integration with the EIS System at the regional level; and

- 10.5 Review and approve the Health and Safety Management Plan submitted for projects not covered by the EHIA process.

#### SECTION 11. RESPONSIBILITY OF THE LOCAL HEALTH AUTHORITY

The local health authority shall:

- 11.1 Initiate and enforce local zoning ordinance;
- 11.2 Certify the passing of an ordinance consistent to these rules and regulations and to strengthen its enforcement;
- 11.3 Suspend or stop the operation of establishments violating the provisions of these implementing rules and regulations;
- 11.4 Provide necessary supplies, materials and equipment and other logistic support to the local health office for use in the conduct of evaluation, inspection and monitoring of establishments covered by these implementing rules and regulations; and
- 11.5 Enforce the provisions of these implementing rules and regulations.

#### SECTION 12. RESPONSIBILITY OF THE LOCAL HEALTH OFFICER

The local health officer shall:

- 12.1 Inspect or cause the inspection and evaluation of establishments, premises and facilities to ascertain their compliance to these implementing rules and regulations;
- 12.2 Act on complaints against establishments, premises and facilities emitting or discharging pollutants and institute necessary measures to prevent the spread of diseases from such pollutants;
- 12.3 Monitor accidents and sickness of workers in establishments, premises and facilities;
- 12.4 Issue the sanitary permit for establishments and the health of workers;
- 12.5 Require the posting of the sanitary permit in a conspicuous place of the establishment;
- 12.6 Implement the posting of the SSRS for the guidance of the general public;
- 12.7 Recommend to the local health authority the temporary or permanent closure of establishments violating the provisions of these implementing rules and regulations.
- 12.8 Assist the DOH in the implementation of EHIA process; and
- 12.9 Enforce the provisions of these implementing rules and regulations.

#### SECTION 13. PENAL PROVISIONS

- 13.1 Any person who shall violate, disobey, refuse, omit or neglect to comply with any of the provisions of these rules and regulations shall be guilty of misdemeanor and upon conviction shall be punished by imprisonment for a period not exceeding six (6) months or by a fine not exceeding Php 1,000.00 or both depending on the discretion of the court.
- 13.2 Any person who shall interfere with or hinder, or oppose any officer, agent or member of the Department of Health or of the bureaus and offices under it, provincial, city or municipal health officers, sanitary engineers and sanitation inspectors in the performance of his duty as provided for under these rules and regulations, or shall tear down, mutilate, deface or alter any placard or notice affixed to the premises in the enforcement of these rules and regulations shall be guilty of misdemeanor and punishable upon conviction by imprisonment for a period not exceeding six (6) months or by a fine not exceeding Php 1,000.00 or both depending on the discretion of the court.

#### SECTION 14. SEPARABILITY CLAUSE

In the event that any rule, section, paragraph, sentence, clause or word of these implementing rules and regulations is declared invalid for any reason, the other provisions thereof shall not be affected thereby.

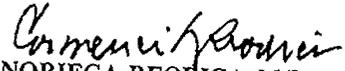
#### SECTION 15. REPEALING CLAUSE

All rules and regulations that are inconsistent with the provisions of these implementing rules and regulations are hereby repealed or amended accordingly.

#### SECTION 16. EFFECTIVITY

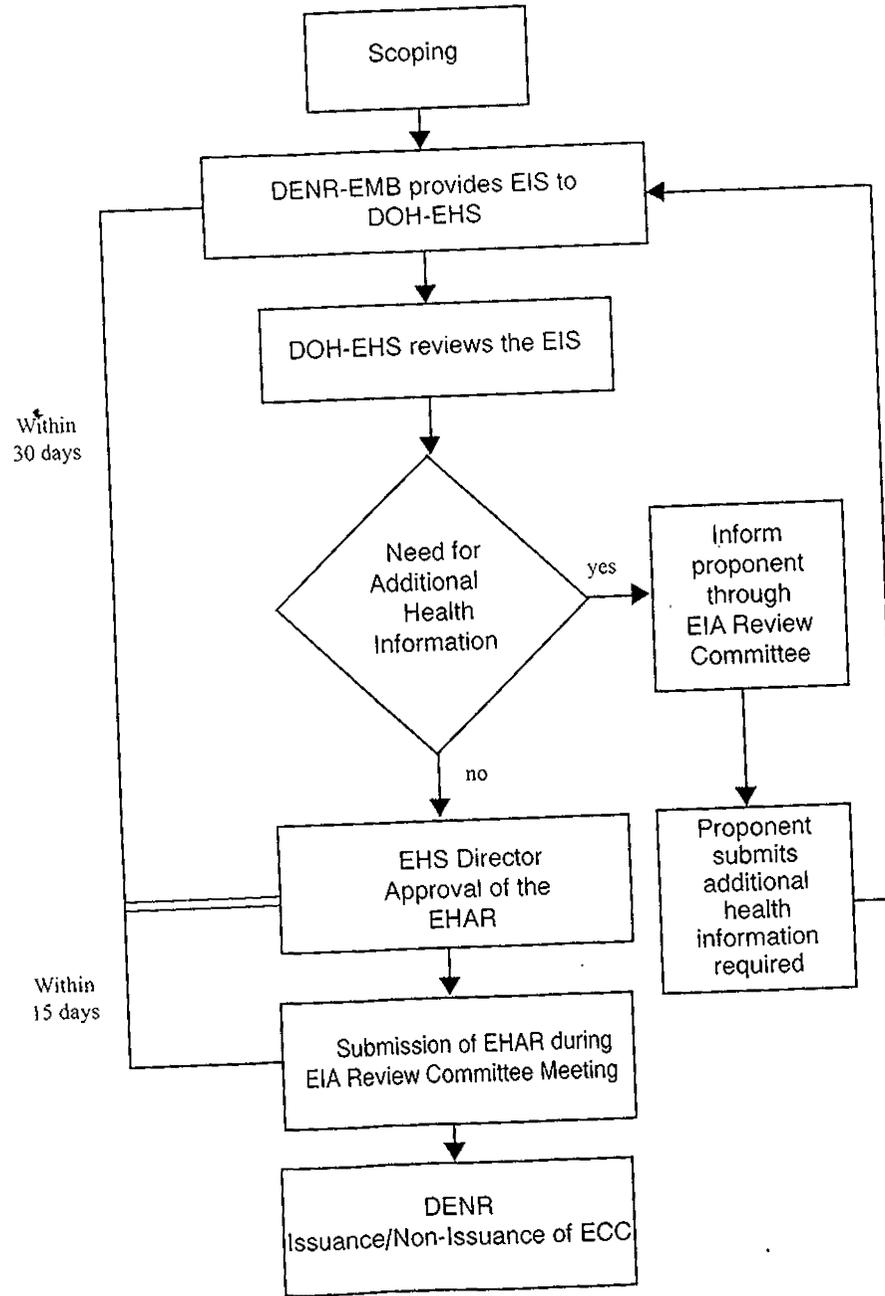
These rules and regulations shall take effect after fifteen (15) days from the date of publication in the official gazette or a newspaper of general circulation.

Approved on this 16<sup>th</sup> day of April nineteen hundred ninety eight, Manila, Philippines.

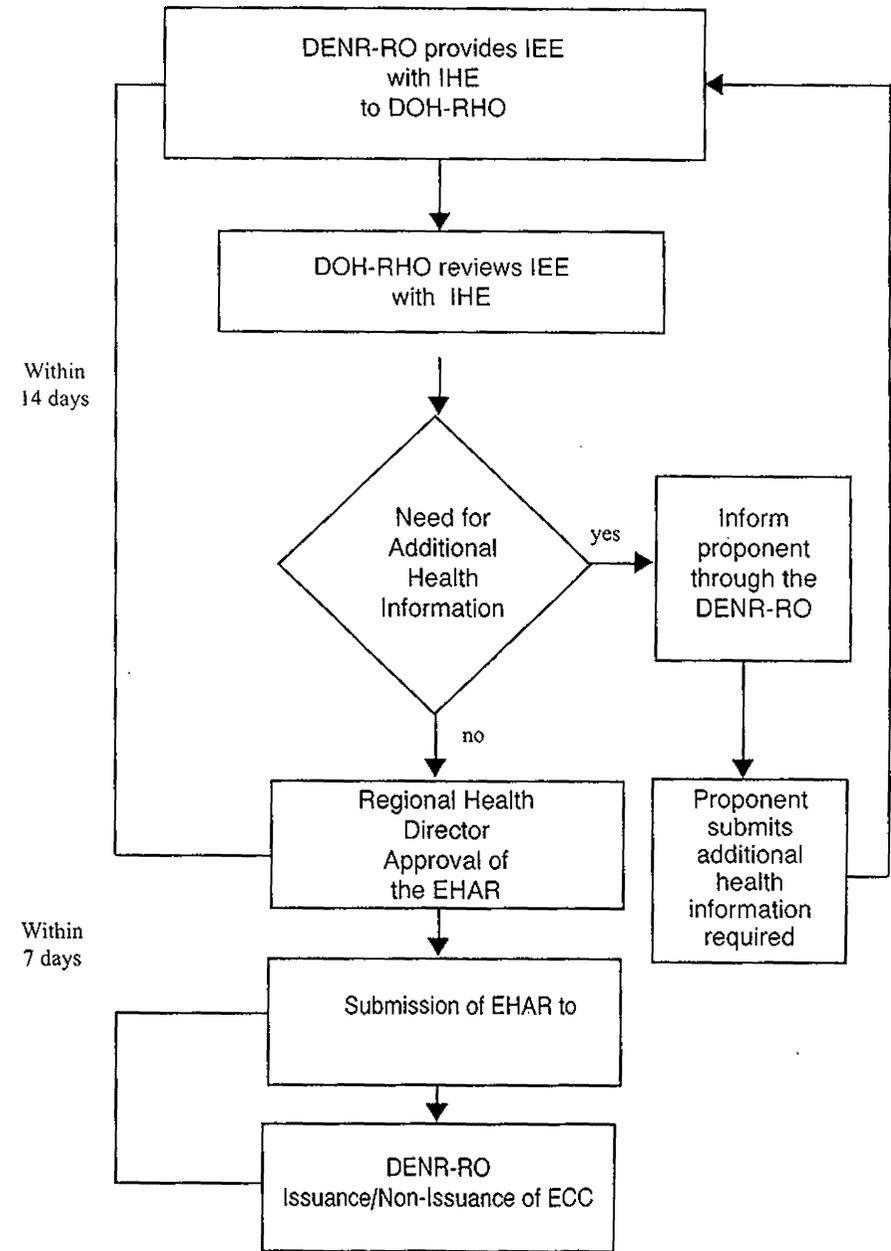
  
CARMENCITA NORIEGA-REODICA, M.D., M.P.H., CESO II  
Secretary of Health

Date of Publication: 10 June 1998  
Philippine Daily Inquirer

**Annex 1**  
**Environmental Health Assessment Report Flowchart**  
**for Health Sensitive Projects**



**Annex 2**  
**Environmental Health Assessment Report Flowchart**  
**for Health Sensitive Project Location**



# ACKNOWLEDGEMENT

The Department of Health gratefully acknowledges the invaluable contributions of *Dr. Mario C. Villaverde*, Director of the Environmental Health Service, for his role in the conceptualization, planning, editing, and production of this document.

The agency also wishes to thank all the Environmental Health Service technical staff in Plans, Programs and Policies Development Section for their valuable assistance in the refinement of this document.

Special thanks are extended to the following agencies, associations, and organizations for their many useful suggestions and insights that were beneficial in the completion of this document:

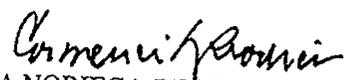
1. Metro Manila Development Authority, Makati City
2. Philippine Society of Sanitary Engineers, Inc., Manila
3. Department of Environment and Natural Resources, Baguio City, Davao City, Iloilo City, NCR, Mountain Province
4. Department of Agriculture, Davao City, Iloilo City
5. Department of Trade and Industry, Davao City, Iloilo City
6. National Meat Inspection Commission, Quezon City, CAR-Baguio City, Davao City, Iloilo City
7. Department of Labor and Employment, CAR Baguio City, Iloilo City
8. Bureau of Animal Industry, Quezon City
9. Philippine Information Agency, Iloilo City
10. Office for Public Health Services, Department of Health, Manila
11. Office for Legal Affairs, Department of Health, Manila
12. Health Policy Development Staff, Department of Health, Manila
13. Department of Health Regional Offices
14. Provincial Health Offices of Misamis Oriental, Davao Oriental, Misamis Occidental, Davao del Sur, Aklan, Capiz, Antique, Guimaras, Ilocos Sur, Aurora, Zambales
15. City/Municipal Health Offices of Cagayan de Oro, Davao City, Gingoog City, Oroquieta City, Bacolod City, Sagay City, La Carlota City, Cadiz City, San Carlos City, La Trinidad-Benguet, Cavite City, Makati City, Quezon City
16. Engr. Simon M. Cuevo, City Health Department, Manila
17. City Veterinarian Office, Baguio City
18. Soiltech, San Fernando City, La Union
19. Benguet Mining Corporation, Baguio City

20. UKK Farm, Davao City
21. Davao Fresh Food Corporation, Davao City
22. Claudio Poultry Farm, Davao City
23. Piggery Association, Baguio City
24. Bacnotan Steel Corporation, San Fernando City, La Union
25. Ecano Metal Craft, Manila
26. Pangasinan Farm, Dagupan City
27. San Miguel Corporation, Bacolod City
28. Formix Feeds, Iloilo City

The agency also highly appreciates the assistance of the following DOH personnel who compassionately nurtured the spirit of collaboration in the final review and approval of these IRRs:

1. **Dr. Antonio S. Lopez**  
Undersecretary of Health  
Office for Public Health Services
2. **Atty. Agustin C. Mangila V**  
Director III  
Office for Legal Affairs
3. **Ms. Myleen Meniado-Beltran**  
Officer-in-Charge  
Health Policy Development Staff

The Department of Health enjoins all agencies especially the Local Government Executives in meeting the demands and challenges for a healthful living environment as we enter our journey for economic development towards Philippines 2000.

  
CARMENCITA NORIEGA-REODICA, M.D., M.P.H., CESO II  
Secretary of Health