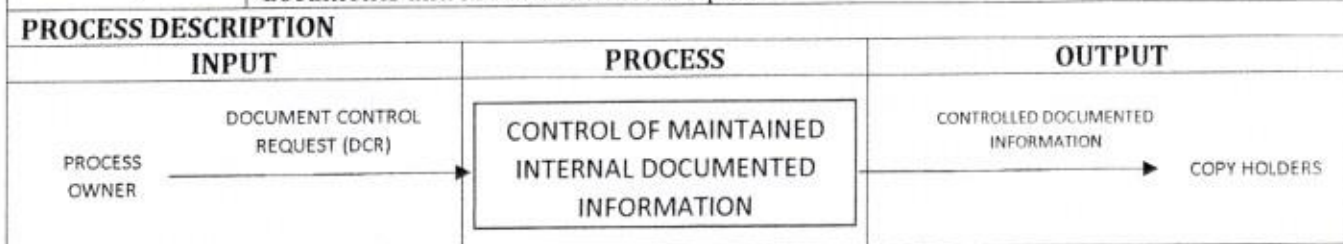




DILG REGIONAL OFFICE 02  
**SYSTEM  
 PROCEDURE (SP)**

Document Code		
SP-R02-01A		
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<b>PROCEDURE TITLE</b>	<b>CONTROL OF MAINTAINED INTERNAL DOCUMENTED INFORMATION</b>
<b>SCOPE</b>	This process starts from the identification of the need for creation/revision of document, control and issuance at points of use, up to recall of obsolete or deletion of internal documents.
<b>PURPOSE/S</b>	To manage and control the creation, revision, distribution and deletion of internal documents and recall of obsolete copies.



**DESCRIPTIVE STATEMENT:**

The process owner submits a duly accomplished Document Control Request Form together with the draft of the document to be changed to the Regional Document Controller who reviews the request and the draft of the document, layouts accordingly and return to process owner for review and approval by the designated signatories. Upon approval, document controller subject the document to control, which includes updating the Master List, stamping of control status, recalling obsolete copies and distributing control copies.

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
1	PROCESS OWNER	Identify the need for document creation/revision/deletion	<ul style="list-style-type: none"> <li>Accomplish the Document Control Request (DCR) Form (Internal Document) and have it signed by authorized signatories.</li> <li>For approved deletion of document, forward the DCR to the Regional Document Controller, and proceed to Step 3.</li> </ul>	<ul style="list-style-type: none"> <li>Document Control Request (DCR) Form</li> </ul>
2	PROCESS OWNER	Draft the new Document or proposed revision	<ul style="list-style-type: none"> <li>Draft the Document following the prescribed format and forward to Regional Document Controller (RDC) together with the approved DCR and the e-copy of the Document.</li> </ul>	<ul style="list-style-type: none"> <li>DCR Form</li> <li>New Document/Revised Document</li> </ul>
3	REGIONAL DOCUMENT CONTROLLER (RDC)	Record the DCR Control Number and layout the Document	<ul style="list-style-type: none"> <li>Review the DCR and if found okay, assign DCR Control No. and record in the DCR Log Sheet.</li> </ul> <p><b>Note:</b> For reference document (e.g. Policies, Memorandum, manual, brochure), proceed to Step 5.</p>	<ul style="list-style-type: none"> <li>DCR Form</li> <li>DCR Log Sheet</li> <li>Soft copy of the Document</li> <li>Document</li> </ul>

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Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			<ul style="list-style-type: none"> <li>For deletion, proceed to Step 5.</li> <li>For creation or change/revision, review the document and layout in appropriate form indicating the document controls such as: Document Code; Revision Number; Effectivity Date; Authorized Signatories; and other Document Control indicators (Header/Footer).</li> <li>Print the Document and forward to the designated signatories.</li> </ul>	
4	DESIGNATED SIGNATORIES	Approve the document	<ul style="list-style-type: none"> <li>Review the document and if found okay, sign the document, otherwise, return to RDC for appropriate action.</li> <li>Return signed document to RDC.</li> </ul>	<ul style="list-style-type: none"> <li>Document</li> </ul>
5	REGIONAL DOCUMENT CONTROLLER (RDC)	Update the Master List of Internal Documents	<ul style="list-style-type: none"> <li>Update the corresponding Master List of Internal Document to include the approved changed/created document.</li> <li>Sign the updated Master List and secure signature of concerned Deputy QMR or QMR.</li> </ul>	<ul style="list-style-type: none"> <li>Master List of Internal Documents</li> </ul>
6	REGIONAL DOCUMENT CONTROLLER (RDC)	Control the master copy of the updated documents	<ul style="list-style-type: none"> <li>Stamp "MASTER COPY" at the back of the updated documents and affix initial.</li> </ul> <p><b>Note:</b> Reference documents distributed through and by Regional Records Unit or other concerned Office (e.g. Policies, Memorandum, manual, brochure) are not subject to stamping for identification of control status.</p>	<ul style="list-style-type: none"> <li>Master copy</li> </ul>

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Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			<ul style="list-style-type: none"> <li>Scan the master copies of the updated documents.</li> <li>Distribute the scanned master copies of the updated documents to the Deputy Document Controllers.</li> </ul>	
7	REGIONAL DOCUMENT CONTROLLER (RDC)	Retain the Obsolete Master Copy	<ul style="list-style-type: none"> <li>Retrieve the previous (obsolete) master copy of the updated document and stamp "OBSOLETE COPY" on the lower left corner and affix initial.</li> <li>Record the obsolete document in the Registry of Obsolete Documents</li> </ul>	<ul style="list-style-type: none"> <li>Obsolete master copy</li> <li>Registry of Obsolete Documents</li> </ul>
8	DEPUTY DOCUMENT CONTROLLER (DDC)	Recall the obsolete controlled copies of the document, if any	<ul style="list-style-type: none"> <li>Upon receipt of the scanned master copies of the updated documents, retrieve the previous Distribution List, if any, and prepare the Recall List.</li> <li>Tag the scanned obsolete master copy by renaming the file, OBSxxfilename. Where xx stands for the revision no and filename is the default filename as distributed by the RDC.</li> <li>Recall the obsolete controlled copies, if any, and record the document retrieval with indicated date of recall in the Recall List.</li> <li>Mark the retrieved obsolete controlled copies with page-wide "X" and re-use.</li> </ul>	<ul style="list-style-type: none"> <li>Recall List</li> <li>Obsolete copies</li> </ul>
9	DEPUTY DOCUMENT CONTROLLER (DDC)	Reproduce the document and stamp "Controlled Copy"	<ul style="list-style-type: none"> <li>Prepare the Distribution List.</li> </ul>	<ul style="list-style-type: none"> <li>Master copy of approved document</li> </ul>

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Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			<ul style="list-style-type: none"> <li>Reproduce the document based on the distribution list.</li> <li>Stamp the reproduced copies "CONTROLLED COPY" and affix initial on the lower left corner, as follows:               <ul style="list-style-type: none"> <li>For bound documents, on the top sheet, only;</li> <li>For non-bound documents, on each page.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Controlled copies of the document</li> <li>Distribution List</li> </ul>
10	DEPUTY DOCUMENT CONTROLLER (DDC)	Distribute the Document	<ul style="list-style-type: none"> <li>Distribute the document based on the Distribution List.</li> <li>Record the distribution of the document in the Distribution List.</li> </ul>	<ul style="list-style-type: none"> <li>Document</li> <li>Distribution List</li> </ul>
11	RDC and DDCs	Retain Records	<ul style="list-style-type: none"> <li>Retain records in accordance with the Control of Retained Documented Information procedure and the Master List of Records.</li> </ul>	<ul style="list-style-type: none"> <li>Control of Retained Documented Information Procedure</li> <li>Master List of Records</li> </ul>

Prepared By	Reviewed By	Approved By
(sgd.) <b>IVE B. SALUDEZ</b> QMS Secretariat Head	(sgd.) <b>ATTY. ODILON L. PASARABA, CESO V</b> Regional Quality Management Representative	(sgd.) <b>JONATHAN PAUL M. LEUSEN, JR., CESO IV</b> Regional Director

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DILG REGIONAL OFFICE 02

**DOCUMENT CONTROL  
REQUEST (DCR) FORM  
(Internal Document)**

Document Code

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DATE OF REQUEST			
REQUEST FOR <small>Please tick ✓ appropriate checkbox.</small>	<input type="checkbox"/> CREATION	<input type="checkbox"/> CHANGE	<input type="checkbox"/> DELETION
TITLE OF DOCUMENT			
DOCUMENT CODE			
PROPOSED CHANGE			
REVISION NO.	FROM/CURRENT:	TO:	
EFFECTIVITY DATE			

<b>REASON FOR THE REQUEST</b> (State Purpose of the New Document or Reason for Change or Deletion)

*Note: For creation (new document), signatories are as identified in the Document Responsibility Matrix. For change and creation, signatories are the same with the signatories in the original document being requested for revision/deletion.*

Prepared By:	Reviewed By:	Approved By:
Name:	Name:	Name:
Date:	Date:	Date:
Position Title:	Position Title:	Position Title:
Date Received by the QMS Secretariat		DCR Control No. _____

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DOCUMENT CODE	DOCUMENT TITLE	REVISION					
		00	01	02	03	04	05

Prepared By
(sgd.) CATHERINE ALLAM-MIRANDA
Regional Document Controller

Noted By
(sgd.) (sgd.) LORNA M. DURWIN DIGNA R. HERRERA
Deputy QMRs

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Republic of the Philippines  
**DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT**  
**REGIONAL OFFICE 02**  
Regional Government Center, Carig Sur, Tuguegarao City, Cagayan  
<http://region2.dilg.gov.ph>

**DISTRIBUTION LIST FORM**

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Name of Office: DILG REGIONAL OFFICE 02  
Date of Distribution:

DOCUMENT CODE	DOCUMENT TITLE	REVISION /EDITION	COPY HOLDERS [Indicate Office/Process Owner (PO)]							
			Office/PO	Signature	Office/PO	Signature	Office/PO	Signature	Office/PO	Signature
Forms										
			1							
			2							
			3							
			4							
			5							

Prepared By  
(sgd.)  
CATHERINE ALLAM-MIRANDA  
Regional Document Controller

Noted By  
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Deputy QMRs

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IVE B. SALUDEZ  
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ATTY. ODILON L. PASARABA, CESO IV  
Regional Quality Management Representative

Approved By  
(sgd.)  
JONATHAN PAUL M. LEUSEN, JR., CESO IV  
Regional Director





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**RECALL FORM**

DOCUMENT CODE	DOCUMENT TITLE	REVISION / EDITION	Document RECALLED / WITHDRAWN [Indicate Office/Process Owner (PO)] (Document Controller to sign upon receipt of document from copy holder)									
			Office/PO	Date	Office/PO	Date	Office/PO	Date	Office/PO	Date	Office/PO	Date

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DILG-REGIONAL OFFICE 02

**DCR LOG SHEET**

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No	Date Received	DCR Control No. (yyyymm-XXX-I/E)	Date of Request	Type			Title of Document	Document Code	Revision No.		Effectivity Date	Reason for Request
				Creation	Change	Deletion			From/Current	To		

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