



Access information
from the **GOVERNMENT**

www.foi.gov.ph

Freedom of Information Program

Pangalan ng Ahensiya: **LBP INSURANCE BROKERAGE, INC.**

Adres: **12F SYCIP LAW CENTER, 105 PASEO DE ROXAS, LEGASPI VILLAGE, MAKATI CITY**

Pangalan ng FOI Receiving Officer: **DIVINE GRACE A. GUEVARRA**

Impormasyon sa Pakikipag-ugnayan: **(02) 8840-4108**

Email Address: **divine.apo@lbp-insurance.com**

PARAAN NG PAGHILING

Electronic Request



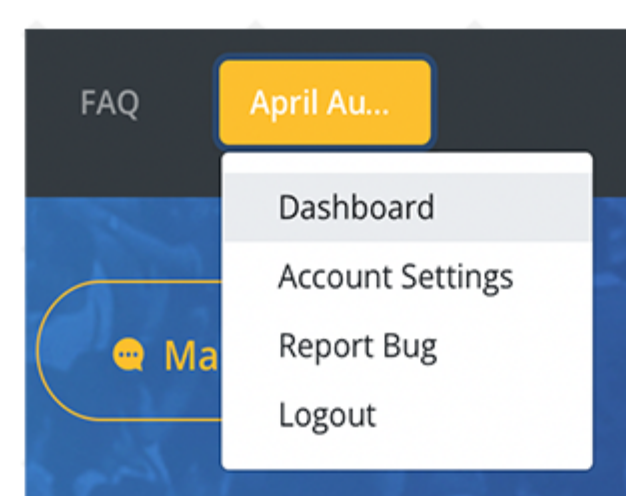
HAKBANG 1

Magtungo sa **www.foi.gov.ph** gamit ang home address ng inyong browser



HAKBANG 2

I-click ang **Sign Up** at ibigay ang mga hinihinging impormasyon. **Maglakip ng valid ID.**



HAKBANG 3

Kapag nakapag-log in na, dadalhin ka sa iyong **Dashboard**. Ang Dashboard ay naglalaman ng lahat ng mga kahilingan FOI ng may-ari ng account.

Make a Request

HAKBANG 4

I-click ang **Make a Request** at piliin ang pangalan ng ahensiyang nais hingan ng impormasyon.

Send my Request

HAKBANG 5

Dadalhin ka ngayon sa pahinang Make a Request. Sagutan ang lahat ng patlang at i-click ang **Send My Request**.



HAKBANG 6

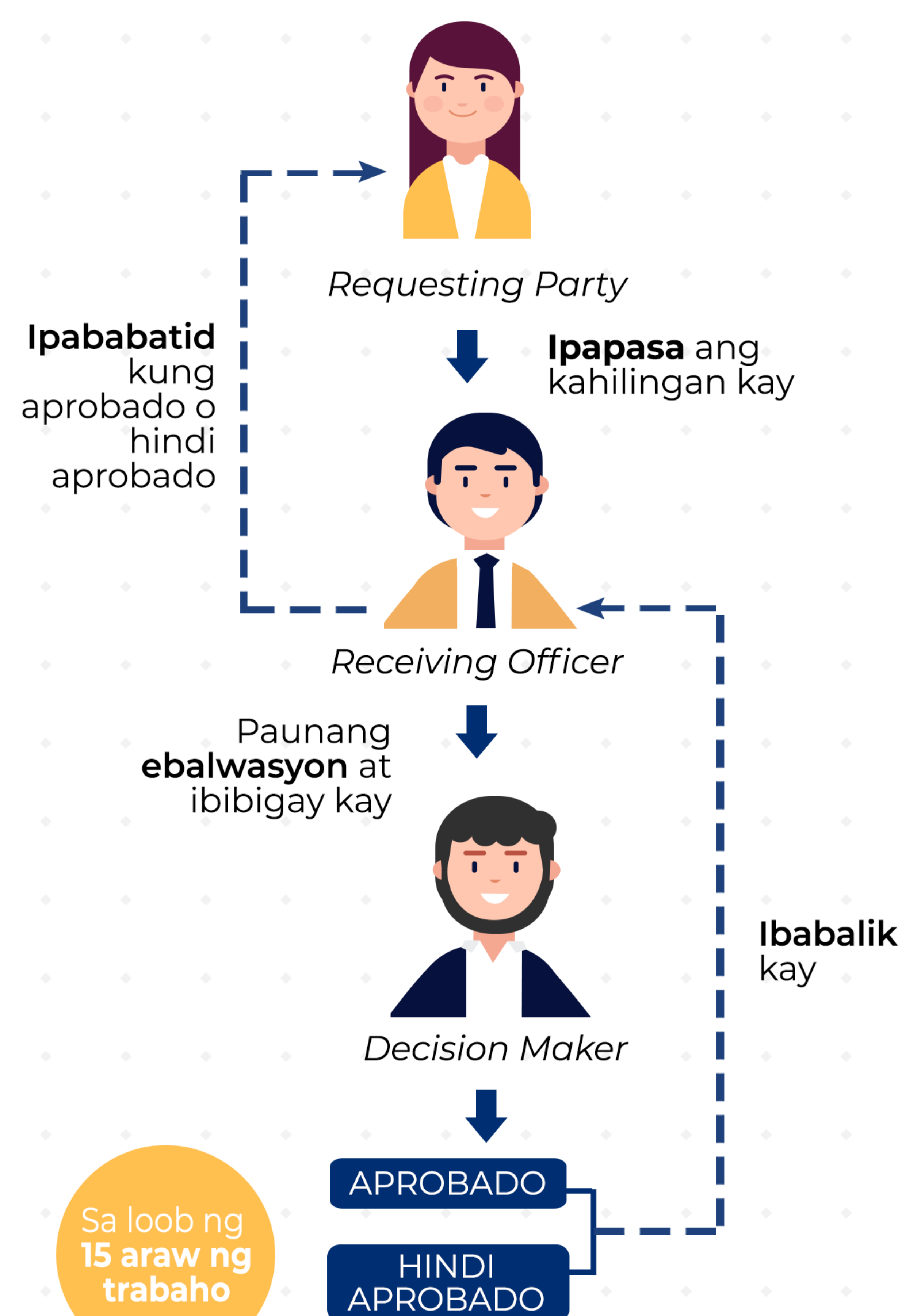
Susuriin ng ahensiya ang iyong kahilingan at padadalhan ka ng pabatid sa loob ng **15 araw ng trabaho**.



HAKBANG 7

Ihahanda ng ahensiya ang impormasyong ilalabas ayon sa **nais mong format**. Ipadadala ito batay sa iyong napiling paraan ng pagtanggap.

Standard Request



Mekanismo ng Pag-apela

Kung hindi ka nasiyahan sa naging tugon sa iyong kahilingang FOI, maaaring hilingin sa amin na magsagawa ng internal review sa tugon sa pamamagitan ng pagliham sa libi@lbp-insurance.com. Kailangang ipaliwanag sa iyong hiling na review kung bakit hindi ka nasisiyahan sa tugon, at dapat na isumite ito sa loob ng 15 araw mula sa petsa ng pagkakatanggap ng liham na ito. Isasagawa namin ang review at ipababatid sa iyo ang resulta sa loob ng 30 araw mula sa petsa ng pagkakatanggap ng iyong apela.



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Name of Agency: **LBP INSURANCE BROKERAGE, INC.**

Address: **12F SYCIP LAW CENTER, 105 PASEO DE ROXAS, LEGASPI VILLAGE, MAKATI CITY**

FOI Receiving Officer: **DIVINE GRACE A. GUEVARRA**

Contact Details: **(02) 8840-410**

Email Address: **divine.apo@lbp-insurance.com**

MODE OF REQUESTS

Electronic Request



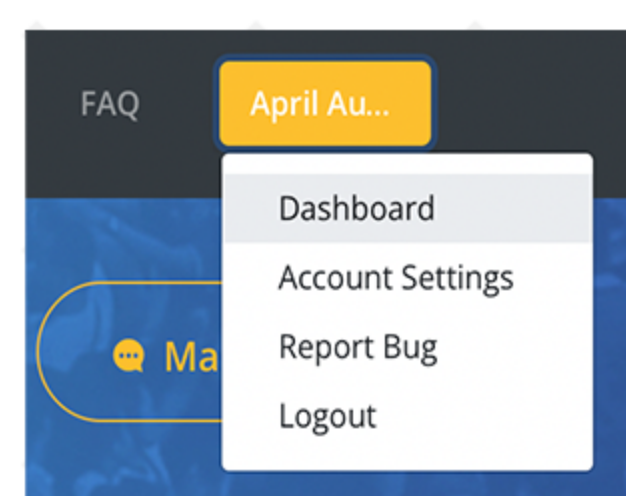
STEP 1

Go to **www.foi.gov.ph** to your browser's home address.



STEP 2

Click the **Sign-Up** button and provide all the required fields. **Attach a valid ID.**



STEP 3

Once logged in, you will be directed to your **Dashboard**. The Dashboard contains all the FOI requests of the account owner.

Make a Request

STEP 4

Click the **Make a Request** button then select the name of the agency you wish to ask.

Send my Request

STEP 5

You will now be directed to the Make a Request Page. Accomplish all fields then click **Send My Request**.



STEP 6

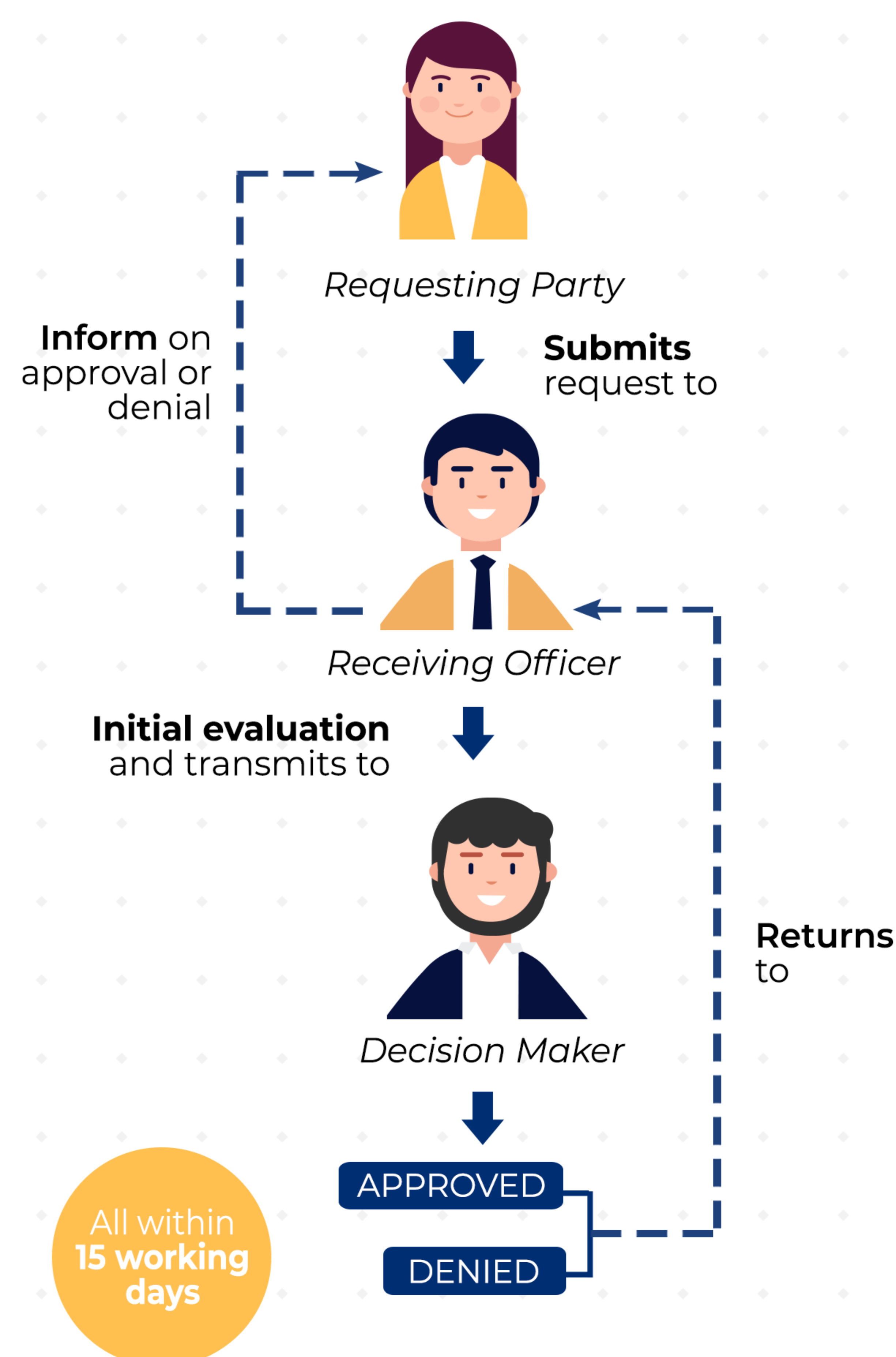
The agency will evaluate your request and will notify you within **15 working days**.



STEP 7

The agency will prepare the information for release, **based on your desired format**. It will be sent to you depending on the receipt of preference

Standard Request



Appeals Mechanism

If you are not satisfied with the response to your FOI request, you may ask us to carry out an internal review of the response by writing to libi@lbp-insurance.com. Your review request should explain why you are dissatisfied with the response, and should be made within 15 calendar days from the date when you received this letter. We will complete the review and tell you the result within 30 calendar days from the date when we receive your appeal.