



FDA CIRCULAR
No. 2020-021

07 AUG 2020

SUBJECT: Guidelines for the Acceptance of Certificate of Safety Evaluation (CSE) Applications for Radiofrequency Radiation (RFR) Facilities through the FDA RRD Portal

I. INTRODUCTION

With the alignment to the provisions of Republic Act 11032 or the “*Ease of Doing Business (EODB) and Efficient Government Service Delivery Act of 2018*”, the FDA sought to re-engineer its authorization processes to streamline and establish a more efficient way in government service delivery. As part of these efforts, the FDA through Department of Health (DOH) Administrative Order (AO) No. 2020-0035 or the “*Rules and Regulations on the Licensing and Registration of Radiation Facilities Involved in the Use of Radiation Devices and Issuance of Other Related Authorization*” adopted a new authorization process for radiation facilities under its jurisdiction.

Radiofrequency Radiation (RFR) facilities, such as cell sites/mobile phone base stations, radio, and TV stations, are radiation facilities regulated by the FDA through Republic Act 9711 or the “*FDA Act of 2008*”. DOH AO 2020-0035 includes RFR facilities in the new online authorization process and renames the current RFR evaluation report to a Certificate of Safety Evaluation (CSE). This will automate and streamline the issuance of authorizations by adopting online measures readily accessible to all relevant stakeholders.

II. OBJECTIVES

This Circular aims to provide implementing guidelines to all relevant stakeholders of the new process in the acceptance of applications of CSE for RFR facilities pursuant to DOH AO No. 2020-0035.

III. SCOPE AND COVERAGE

This Circular is issued to all RFR facilities and their authorized representatives for guidance in accessing and utilizing the new online authorization process for radiation facilities.

IV. GUIDELINES

- a. The FDA shall resume the acceptance of applications for RFR Evaluation Reports, now the Certificate of Safety Evaluation (CSE).



- b. All applications shall be accepted, evaluated, and issued through the new FDA Radiation Regulation Division (RRD) portal at <https://rrdportal.fda.gov.ph/> to streamline the issuance process.
- c. For CSE applications, the detailed step-by-step procedure and illustrative guide is annexed hereto as reference and is made an integral part of this issuance.
- d. All processes shall be done in accordance to the general and specific guidelines of DOH AO No. 2020-0035.

V. REPEALING CLAUSE

All issuances, or parts thereof, which are inconsistent with the provisions of this Circular, including FDA Circular No. 2020-006, are hereby repealed, or modified accordingly.

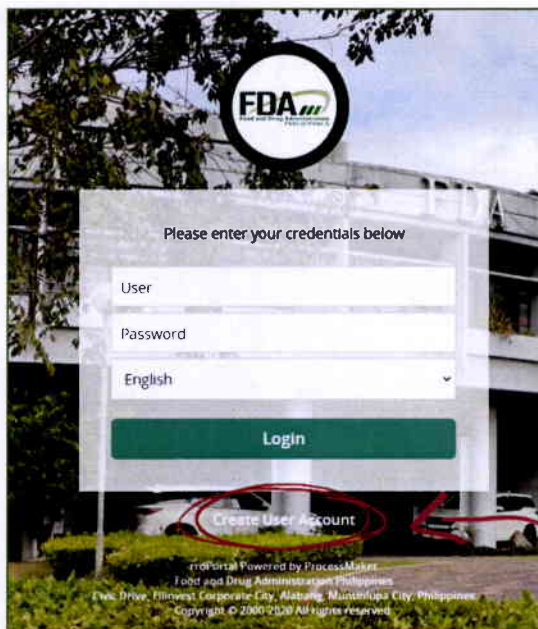
VI. EFFECTIVITY

This circular shall take effect immediately.


ROLANDO ENRIQUE D. DOMINGO, MD
Director General

ANNEX A

GUIDELINES FOR THE REGISTRATION OF USER ACCOUNTS FOR RRDPORTAL



Step 1: Go to <http://rrdportal.fda.gov.ph/>, then click on “Create User Account”.

Request for FDA CDRRHR-RRD User Account

PRIVACY NOTICE

We value your privacy and we uphold your rights under the Data Privacy Act of 2012. By voluntarily submitting this form, you are hereby allowing the Food and Drug Administration (FDA) to collect, use, process, consolidate, share, store, and retain your personal data. FDA will use your personal data to process this form along with related activities.

First Name *

Last Name *

City * Select

Region * select

eMail Address of the Authorized Representative *

Position in the Company *

Phone Number *

Mobile Number *

Company Name *

Authorization Type *

For CDRRHR, Company Name of the Authorized Sub-contractor

Click here to download the printable Authorization Letter

CLICK TO DOWNLOAD THE AUTHORIZATION FORM.

Authorization Letter

Choose File

Attached Authorization letter shall be notarized, signed by the owner/legal person/authorized officer.

Submit

Click here to upload the scanned Authorization Letter

Step 2: Fill in all the required fields for the user account registration, then click “Submit”.

[[COMPANY LETTERHEAD]]

DATE

The Director General
Food and Drug Administration
Civic Drive, Filinvest City
Alabang, Muntinlupa City

Dear Director General:

We, _____ (Company Name) with business address at _____ hereby authorize _____ (Name of Company Representative) as the registered user/account holder of RRD online authorization services for _____ (License to Operate LTO, Certificate of Facility Registration CFR, Clearance for Customs Release CFCR, Certificate of Safety Evaluation CSE) and shall be responsible for all the applications submitted through the RRD Portal System.

I hereby declare and undertake that all the data and information submitted in connection with this application, as well as other submissions in the future including variations are true, correct and reflect the total information available.

(Owner/Legal Person/Authorized Officer)

SUBSCRIBED AND SWORN to before me, this ____ day of _____ 20__ at _____


Notary Public

Doc No. _____
Page No. _____
Book No. _____
Series No. _____

NOTE: Authorization Letter shall be duly filled up, printed with the letter head of the company, notarized and then scanned before uploading to the system.

Note: Once your Request for User Account has been approved, the registered Email Address will receive a confirmation email containing the **Username**, **Password**, and the **Validity** of the User Account.

FDA User Account Request > **Inbox x**


 **FDA PH**
to me ▾

Dear Carla Ediza,

We would like to inform you that your Request for User Account has been APPROVED. Please see the details below:

User Account Information
Company Name: Doofenshmirtz Evil Incorporated
Username: FDARRD_0021
Password: KubaQo3P3Wqx
Validity: 24 September 2020



You can now Access the FDA rrdPortal at <http://rrdportal.fda.gov.ph>



Thank You,


CDRRHR-RRD
Food and Drug Administration, Philippines

P.S. This is an Automated Notification Message. Please do not reply.

Sample email for the **Approved** Request for User Account

FDA User Account Request > **Trash x**

 **FDA PH**
to me ▾ 10:15 AM (17 minutes ago)

Dear Carlo Ediza,

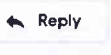

We regret to inform you that your Request for User Account for the Doofenshmirtz Evil Incorporated has been DISAPPROVED for the following reason's:

.

Thank You,

CDRRHR-RRD
Food and Drug Administration, Philippines

P.S. This is an Automated Notification Message. Please do not reply.

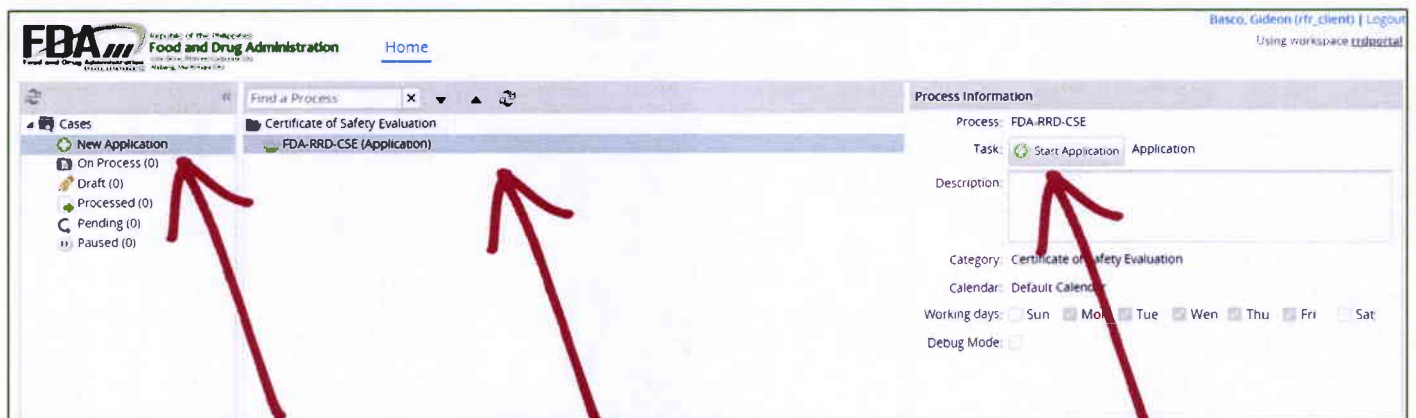
Sample email for the **Disapproved** Request for User Account

ANNEX B

GUIDELINES FOR THE ONLINE APPLICATION OF CERTIFICATE OF SAFETY EVALUATION



Step 1: Go to <http://rrdportal.fda.gov.ph/>, then log in using your Registered User Account.



Step 2: Select "New Application", click on "FDA-RRD-CSE (Application)", and then click "Start Application".

Application # 986 Title: #986

TERMS AND CONDITIONS

Welcome to the FDA-CDRRHR/RRD Online Authorization Application / Services.

Please read these Terms and Conditions carefully before using this website. Your access to and use of the Service is conditioned on your acceptance of and compliance with these Terms. These terms may be updated or modified from time to time without notifying you, therefore, your continued use of the Service after such modification will constitute your acceptance. These Terms apply to all visitors, users and others who access or use the Service.

DESCRIPTION OF SERVICE

The aim of this Service is to expedite receiving, payment of fees, evaluation and processing of applications for:

- Certificate of Safety Evaluation (CSE) for Non-ionizing Radiation Facility

PRIVACY

- The information gathered from this site will be treated as highly confidential. The FDA-CDRRHR/RRD may use your contact information in order to send an e-mail and/or other communications regarding the status of your applications or updates about this service. We may also use your data for statistics, summaries, research and studies for the development of new standards.

AVAILABILITY OF SERVICE

- While FDA-CDRRHR/RRD Online Services is available twenty-four (24) hours a day, seven (7) days a week, service may not be available at certain times due to designated service periods, maintenance, computer, telecommunication, electrical or network failure and/or any other reasons beyond the control of FDA-CDRRHR/RRD

I have read and agree with the above terms and conditions

Next

Step 3: Read the Terms and Conditions carefully. Tick the checkbox that says “I have read and agree with the above terms and conditions”, then click “Next”.

Application # 986 Title: RRD-CSE-900000000982

Previous Step

General Information

Classification of RFR Facility: Mobile Telephone Base Station

Type of Application: Personal Use

Type of Antenna Installation: Outdoor Antenna

I pledge that the provided information are true and correct.

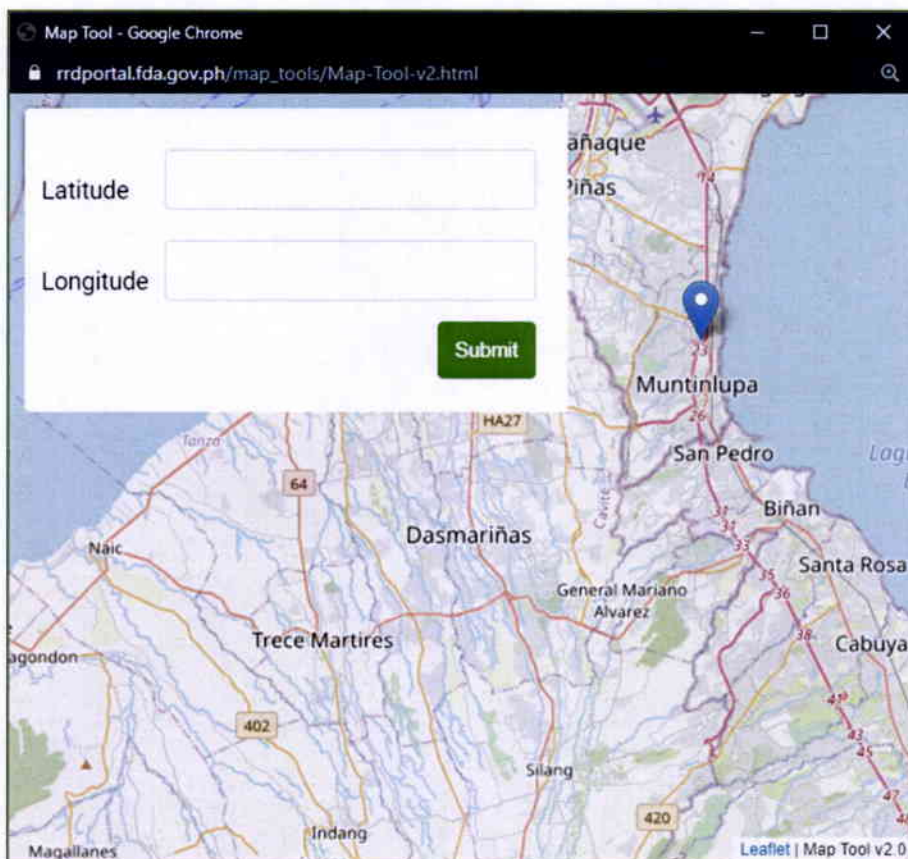
Next

Step 4: Fill in all the required fields for General Information, tick the check box that says “I pledge that the provided information are true and correct.”, then click “Next”.

Application # 996 Title: RRD-CSE-900000009862
 Application # 996
 Previous Step Next Step
Site Address
 Specific Site Name and/or ID *
 Colocated * Select...
 Site Address *
 Region * Select
 Provincia * Select
 City * Select
 Zip Code * Select
 Show Map Tool
 GPS Latitude
 GPS Longitude
 I pledge that the provided information are true and correct.
 Next

Step 5: Fill in all the required fields the Site Address, tick the check box that says “I pledge that the provided information are true and correct.”, then click “Next”.

NOTE: For the GPS Latitude and Longitude, click the “Show Map Tool” button and look for the exact location of the facility by zooming and dragging into the map. Pin the site location to capture the Longitude and Latitude, then click “Submit”.



Details of the Contractor

Telecommunications Company *

Contractor Name *

Contractor Address *

Contact Number *

Contractor's Authorized Officer

Name *

Contact Number *

Designated RFR Safety Officer

Surname

First Name

Middle Name

I pledge that the provided information are true and correct.

Next

Step 6: Fill in all the required fields for the Contractor Details, tick the check box that says “I pledge that the provided information are true and correct.” then click “Next”.

List of Antenna

Do you have Link Antenna? *

I pledge that the provided information are true and correct.

Next

Link Antenna

Transmit Frequency (MHz)

Received Frequency (MHz)

Antenna Brand

Antenna Model

Transmitted Power (watts)

Antenna Height (AGL) meters

Antenna Gain (dBi)

Type of Installation

I pledge that the provided information are true and correct.

Next

Step 7: For the List of Antenna, select whether you have Link Antenna or not, if yes, fill in all the required fields for the Link Antenna Specs, tick the checkbox that says “I pledge that the provided information are true and correct.”, then click “Next”.

Application # 985 Title: RRD-CSE-900000009862

Do you have Cellular Antenna? *

Select...

Yes

No

I pledge that the provided information are true and correct.

Next

Application # 988 Title: RRD-CSE-900000009862

List of Antenna

Type of Installation: Tower Mounted

Sector: Sector 1

I pledge that the provided information are true and correct.

Next

Step 8: Select whether you have Cellular Antenna or not, if yes, fill in all the required fields for the Link Antenna Specs, tick the checkbox that says “I pledge that the provided information are true and correct.”, then click “Next”.

Application # 988 Title: RRD-CSE-900000009862

Antenna Summary List

| | Band/Service | Transmit Freq... | Received Freq... | Antenna Brand | Antenna Model | Antenna Gain (dB) | Transmitted Po... | Antenna Height (...) | Type of Installation | Exposure Limits | Safety Parameter | Safety Value |
|---|----------------|------------------|------------------|---------------|---------------|-------------------|-------------------|----------------------|----------------------|--------------------|------------------|-------------------|
| 1 | Point-to-Point | 1 | 1 | SAMPLE BRAND | SAMPLE MODEL | 1 | 1 | 1 | Tower Mounted | Occupational Limit | Minimum Safe | Occupational 0.01 |
| 2 | 1 | 1 | 1 | SAMPLE BRAND | SAMPLE MODEL | 1 | 1 | 1 | Tower Mounted | Occupational Limit | Minimum Safe | Occupational 0.01 |

Next

Step 9: Review the list of antenna you entered. Click “Previous Step” to correct if there are any corrections, if none, click “Next”.

FDA Republic of the Philippines
Food and Drug Administration
One Drive, Alabang Corporate City
Makati, Metro Manila City

Basco, Gideon (rfr_client) | Logout
Using workspace rrdportal

Home

Steps Information Actions Application Notes

Application #: 986

Application #: 986 Title: RRD-CSE-900000009862

Previous Step Next Step

NOTE:
Please provide the scanned copy of the following documents:

+ New

1 Choose File

Floor Plan for Indoor Antenna

ELEVATION DRAWING

Elevation Drawing and NTC Temporary Permit for Broadcasting Network

I pledge that the provided information are true and correct.

Next

Step 10: For the documentary requirements, click on the  icon to choose the file you will upload, tick the check box that says “I pledge that the provided information are true and correct.” then click “Next”.

FDA Republic of the Philippines
Food and Drug Administration
One Drive, Alabang Corporate City
Makati, Metro Manila City

Basco, Gideon (rfr_client) | Logout
Using workspace rrdportal

Home

Steps Information Actions Application Notes

Application #: 986

Application #: 986 Title: RRD-CSE-900000009862

Previous Step Next Step

Please review your submission. Should you need to correct/edit, click the Previous Step.

General Information

Classification of RFR Facility: Mobile Telephony Base Station
Type of Application: Upgrade Site
Type of Antenna Installation: Outdoor Antenna

Details of the Contractor

Telecommunications Company: Sample Telecom
Contractor/Sub-contractor Name: Sample Contractor
Contractor/Sub-contractor Address: Sample Address
Contract Number: 00223456789
Contractor Sub-contractor's Authorized Officer:
Name: Sample Full Name
Contract Number: 00223456789
Designator RFR Safety Officer:
Surname: Sample
First Name: Sample
Middle Name: Sample

Site Address

Specific Site Name and/or ID: SAMPLE_SITE_ID_12345
Collocated? Yes With: Other

Site Address: Brgy. Das, Lipa, Batangas
Region: Region IV-A
Province: Batangas
City: Lipa City
Zip Code: 4217
GPS Latitude (at least 8 Decimals): 14.3222967774276
GPS Longitude (at least 8 Decimals): 121.1362539062501

SAMPLE_SITE_ID_12345
14.3222967774276; 121.1362539062501

Antenna Grid

Antenna Grid

Step 11: Check the application summary. Click “Previous Step” to correct if there are any corrections, if none, click “Next”.