



Republic of the Philippines
City of Tagaytay
OFFICE OF THE BUILDING OFFICIAL

CONTROL NO. _____

PERMIT NO. _____

BUILDING PERMIT

_____ Date of Application

Original

Renewal

_____ Date Issued

BOX 1 (TO BE ACCOMPLISHED BY DESIGNING ARCHITECT / CIVIL ENGINEER IN PRINT)

NAME OF OWNER APPLICANT

LAST NAME, FIRST NAME , M.I.

TAX ACCT.NO.

FOR CONSTRUCTION OWNED BY AN ENTERPRISE	FORM OF OWNERSHIP	MAIN ECONOMIC ACTIVITY / KIND OF BUSINESS	
ADDRESS	NO.STREET, BARANGAY,CITY / MUNICIPALITY		TELEPHONE NO.
LOCATION OF CONSTRUCTION <input type="checkbox"/> RIDGE <input type="checkbox"/> NON-RIDGE		NO. STREET, BARANGAY,CITY/ MUNICIPALITY	
SCOPE OF WORK			
1 <input type="checkbox"/> NEW CONSTRUCTION	2 <input type="checkbox"/> ADDITION OF	OTHER SPECIFY	
	3 <input type="checkbox"/> REPAIR OF		
	4 <input type="checkbox"/> RENOVATION OF	6 _____ OF _____	
	5 <input type="checkbox"/> DEMOLITION OF	7 _____ OF _____	
USE OR TYPE OF OCCUPANCY (SPECIFY – Please refer to Box 10)			
<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> INDUSTRIAL	
<input type="checkbox"/> COMMERCIAL		<input type="checkbox"/> INSTITUTIONAL	
<input type="checkbox"/> AGRICULTURAL			

BOX 2 (TO BE ACCOMPLISHED BY THE RECEIVING & RECORDING SECTION)

BUILDING DOCUMENTS (5 SETS)

- | | |
|--|--|
| <input type="checkbox"/> SITE DEVELOPMENT & LOCATIONAL PLAN | <input type="checkbox"/> MECHANICAL PLANS & SPECIFICATIONS |
| <input type="checkbox"/> ARCHITECTURAL PLAN & SPECIFICATION | <input type="checkbox"/> LOGBOOK (1 COPY) |
| <input type="checkbox"/> STRUCTURAL DESIGNS & COMPUTATIONS | <input type="checkbox"/> LANDSCAPING PLAN |
| <input type="checkbox"/> SANITARY / PLUMBING PLANS & SPECIFICATION | <input type="checkbox"/> OTHERS (SPECIFY) _____ |
| <input type="checkbox"/> ELECTRICAL PLANS & SPECIFICATIONS | _____ |

BOX 3 (TO BE ACCOMPLISHED BY THE BUILDING OFFICIAL)

ACTION TAKEN:

APPROVED / DISAPPROVED

PERMIT IS HEREBY GRANTED SUBJECT TO THE FOLLOWING CONDITIONS

1. THAT THE PROPOSED CONSTRUCTION / ADDITION / REPAIR / RENOVATION / DEMOLITION INSTALLATION, ETC. SHALL BE IN CONFORMITY WITH THE "NATIONAL BUILDING CODE" (P.D. 1096) AND ITS CORRESPONDING IMPLEMENTING RULES AND REGULATIONS AND THE MASTER PLAN OF TAGAYTAY CITY.
2. THAT A DULY LICENSED ARCHITECT / CIVIL ENGINEER (DULY ACCREDITED WITH THE CITY GOVERNMENT OF TAGAYTAY) HAS BEEN ENGAGED TO PREPARE PLANS & SPECIFICATION AND TO UNDERTAKE THE SUPERVISION INSPECTION OF THE CONSTRUCTION OF THE PROJECT.
3. THAT A CERTIFICATE OF COMPLETION DULY SIGNED BY THE ARCHITECT / CIVIL ENGINEER IN-CHARGE OF CONSTRUCTION IS UNDERTAKEN BY CONTRACT TO BE CONFORMED BY THE OWNER SHALL BE SUBMITTED NOT LATER THAN SEVEN (7) DAYS AFTER COMPLETION OF THE CONSTRUCTION OF THE PROJECT.
4. THAT A "CERTIFICATE OF OCCUPANCY" SHALL BE SECURED PRIOR TO ACTUAL OCCUPANCY OF THE BUILDING.
5. THAT THE PROPONENT IS ATTACHING A LANDSCAPPING PLAN (WHICH SPECIFY AREAS TO BE PLANTED OF NARRA TREES & OTHER ORNAMENTAL PLANTS) DULY APPROVED BY TAGAYTAY'S TASK FORCE 2004.

ENGR. LEONARDO F. OLEGARIO
OIC- CITY ENGINEER

HON. ABRAHAM N. TOLENTINO
CITY MAYOR

_____ DATE

NOTE:
THIS PERMIT MAYBE CANCELLED OR REVOKED PURSUANT TO SECTION 305 & 306 OF THE "NATIONAL BUILDING CODE" AND FOR VIOLATION OF LAWS, RULES,ORDINANCES OF THE CITY GOVERNMENT OF TAGAYTAY

BOX 3 (TO BE ACCOMPLISHED BY DESIGNING ARCHITECT CIVIL ENGINEER IN PRINT)

TOTAL ESTIMATED COST	COST OF EQUIPMENT INSTALLED	NUMBER OF STOREYS _____
BUILDING Php. _____		TOTAL FLOOR AREA _____
ELECTRICAL Php. _____		PROPOSED DATE OF CONSTRUCTION _____
MECHANICAL Php. _____		EXPECTED DATE OF COMPLETION _____
PLUMBING Php. _____		MATERIAL OF CONSTRUCTION (Wooden, Concrete, Steel, Mixed) _____
OTHERS Php. _____		
TOTAL CONSTRUCTION COST Php. _____		

BOX 4 (TO BE ACCOMPLISHED BY THE DIVISION / SECTION CONCERNED)

ASSESSED FEES				
	AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID
<input type="checkbox"/> LAND USE / ZONING				
<input type="checkbox"/> LINE & GRADE				
<input type="checkbox"/> BUILDING				
<input type="checkbox"/> PLUMBING				
<input type="checkbox"/> ELECTRICAL				
<input type="checkbox"/> CLFS				
<input type="checkbox"/> MAYOR'S PERMIT				
<input type="checkbox"/> CERT. OF OCCUPANCY				
TOTAL:	_____	NOEL C. BAYBAY <i>REVIEWED: CHIEF, PROCESSING DIVISION SECTION</i>		

BOX 5 (TO BE ACCOMPLISHED BY THE DIVISION / SECTION CONCERNED)

PROGRESS FLOW					
NOTED: LEONARDO B. OLEGARIO <i>CHIEF PROCESSING DIV. /SECTION</i>	IN	OUT	ACTION / REMARKS	PROCESSED BY	
RECEIVING & RECORDING					
LANDUSE / ZONING					
GEODETIC (LINE & GRADE)					
ARCHITECTURAL					
STRUCTURAL					
SANITARY					
ELECTRICAL					
MECHANICAL					
LANDSCAPING PLAN					

WE HEREBY AFFIX OUR HANDS SIGNIFYING OUR CONFORMITY TO THE INFORMATION HEREIN ABOUT SET FORTH

BOX 6

ARCHITECT / CIVIL ENGINEER SIGNED & SEALED PLANS & SPECIFICATION		PRC . REG. NO.
PRINT NAME		
ADDRESS		
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 8

SIGNATURE		
APPLICANT		
ADDRESS		
RES. CERT. NO	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 7

ARCHITECT / CIVIL ENGINEER IN CHARGE OF CONSTRUCTION		PRC . REG. NO.
PRINT NAME		
ADDRESS		
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

WITH MY CONSENT BOX 9 (TO BE ACCOMPLISHED BY LOT OWNER)

TCT / OCT. NO.	TAX DECLARATION NO..	
PRINT NAME OF LOT OWNER		
ADDRESS		
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 10

USE OR TYPE OF OCCUPANCY RESIDENTIAL SINGLE DUPLEX CONDOMINIUM TOWNHOUSE ROWHOUSE / ACCESORIA OTHERS / SPECIFY _____ COMMERCIAL BANK STORE RESORT / RESTAURANT APARTELLE HOTEL / MOTEL, ETC. SHOP (e.g. Dress shop, Tailoring, Barbershop, etc.) GASOLINE STATION DORMITORY OR OTHER LODGING HOUSE OTHERS (SPECIFY) OTHER CONSTRUCTION (SPECIFY) _____	STREET FURNITURE, LANDSCAPING & SIGNBOARDS PARKS, PLAZAS, MONUMENTS, POOL, PLANT BOXES ETC. SIDEWALKS, PROMINADES, TERRACE, LAMPOSTS ELECTRIC POLES, TELEPHONE POLES, ETC. INSTITUTIONAL SCHOOLS CHURCH & OTHER RELIGIOUS STRUCTURES HOSPITAL OR SIMILAR STRUCTURES WELFARE & CHARITABLE STRUCTURES THEATER, AUDITORIUM, GYMNASIUM, COURT OTHERS (SPECIFY) _____ AGRICULTURAL BARNS (S), POULTRY, HOUSE(S), ETC. OTHERS (SPECIFY) _____
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REPUBLIC OF THE PHILIPPINES
 MINISTRY OF PUBLIC WORKS AND HIGHWAYS
 OFFICE OF THE BUILDING OFFICIAL

DISTRICT / CITY / MUNICIPALITY _____

AREA CODE _____

APPLICATION NO.

□ □ □ □ □ □ □ □ □ □ □ □

SANITARY / PLUMBING PERMIT

PERMIT NO.

□ □ □ □ □ □ □ □ □ □ □ □

DATE OF APPLICATION

BOX 1 (TO BE ACCOMPLISHED BY SANITARY ENGINEER / MASTER PLUMBER IN PRINT)

DATE ISSUED

NAME OF OWNER / APPLICANT	LAST NAME,	FIRST NAME	M.I.	TAX ACCT. NO.
LOCATION OF INSTALLATION	NO.,STREET, BARANGAY, CITY / MUNICIPALITY			TELEPHONE NO.

SCOPE OF WORK

NEW INSTALLATION ADDITION OF _____ OTHERS (SPECIFY) _____
 REPAIR OF _____ _____ OF _____
 REMOVAL OF _____ _____ OF _____

USE OR TYPE OF OCCUPANCY

RESIDENTIAL _____ AGRICULTURAL _____
 COMMERCIAL _____ PARKS, PLAZAS, MONUMENTS _____
 INDUSTRIAL _____ RECREATIONAL _____
 INSTITUTIONAL _____ OTHERS (SPECIFY) _____

FIXTURES TO BE INSTALLED

QTY	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES	QTY	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES
_____	<input type="checkbox"/>	<input type="checkbox"/>	WATER CLOSET	_____	<input type="checkbox"/>	<input type="checkbox"/>	BIDETTE
_____	<input type="checkbox"/>	<input type="checkbox"/>	FLOOR DRAIN	_____	<input type="checkbox"/>	<input type="checkbox"/>	LAUNDRY TRAYS
_____	<input type="checkbox"/>	<input type="checkbox"/>	LAVATORIES	_____	<input type="checkbox"/>	<input type="checkbox"/>	DENTAL CUSPIFORM
_____	<input type="checkbox"/>	<input type="checkbox"/>	KITCHEN SINK	_____	<input type="checkbox"/>	<input type="checkbox"/>	GAS HEATER
_____	<input type="checkbox"/>	<input type="checkbox"/>	FAUCET	_____	<input type="checkbox"/>	<input type="checkbox"/>	ELECTRIC HEATER
_____	<input type="checkbox"/>	<input type="checkbox"/>	SHOWER HEAD	_____	<input type="checkbox"/>	<input type="checkbox"/>	WATER BOILER
_____	<input type="checkbox"/>	<input type="checkbox"/>	WATER METER	_____	<input type="checkbox"/>	<input type="checkbox"/>	DRINKING FOUNTAIN
_____	<input type="checkbox"/>	<input type="checkbox"/>	GREASE TRAP	_____	<input type="checkbox"/>	<input type="checkbox"/>	BAR SINK
_____	<input type="checkbox"/>	<input type="checkbox"/>	BATH TUBS	_____	<input type="checkbox"/>	<input type="checkbox"/>	SODA FOUNTAIN SINK
_____	<input type="checkbox"/>	<input type="checkbox"/>	SLOP SINK	_____	<input type="checkbox"/>	<input type="checkbox"/>	LABORATORY SINK
_____	<input type="checkbox"/>	<input type="checkbox"/>	URINAL	_____	<input type="checkbox"/>	<input type="checkbox"/>	STERILIZER
_____	<input type="checkbox"/>	<input type="checkbox"/>	AIR CONDITIONING UNIT	_____	<input type="checkbox"/>	<input type="checkbox"/>	SWIMMING POOL
_____	<input type="checkbox"/>	<input type="checkbox"/>	WATER TANK / RESERVOIR	_____	<input type="checkbox"/>	<input type="checkbox"/>	OTHERS (SPECIFY) _____
TOTAL				TOTAL			

WATER DISTRIBUTION SYSTEM SANITARY SEWER SYSTEM STORM DRAINAGE

WATER SUPPLY: **SYSTEM DISPOSAL:**

SHALLOW WELL WASTE WATER TREATMENT PLANT SURFACE DRAINAGE
 DEEP WELL & PUMP SET SEPTIC VAULT / IMHOFF TANK STREET CANAL
 CITY / MUNICIPAL WATER SYSTEM SANITARY SEWER CONNECTION WATER COURSE
 OTHERS _____ SUB-SURFACE SAND FILTER

NUMBER OF STOREYS OF BUILDING _____ **TOTAL AREA OF BUILDING / SUBDIVISION** _____ SQ.M.
 PROPOSED DATE _____ TOTAL COST OF INSTALLATION _____
 START OF INSTALLATION _____ Php. _____
 EXPECTED DATE OF COMPLETION _____ PREPARED BY: _____

BOX 2 (TO BE ACCOMPLISHED BY BUILDING OFFICIAL)

ACTION TAKEN

PERMIT IS HEREBY GRANTED TO INSTALL THE SANITARY / PLUMBING FIXTURE ENUMERATED HEREIN SUBJECT TO THE FOLLOWING CONDITIONS

1. THAT THE PROPOSED INSTALLATION SHALL BE IN ACCORDANCE WITH APPROVED PLANS FILED WITH THIS OFFICE AND IN CONFORMITY WITH THE NATIONAL BUILDING CODE.
2. THAT A DULY LICENSED SANITARY ENGINEER / MASTER PLUMBER BE ENGAGED TO UNDERTAKE THE INSTALLATION SHALL BE SUBMITTED NOT LATER THAN SEVEN (7) DAYS AFTER COMPLETION OF THE INSTALLATION
3. THAT A CERTIFICATE OF FINAL INSPECTION AND A CERTIFICATE OF OCCUPANCY BE SECURED PRIOR TO THE ACTUAL OCCUPANCY OF THE BUILDING.

ENGR. LEONARDO B. OLEGARIO
BUILDING OFFICIAL

DATE _____

NOTE: THIS PERMIT MAY BE CANCELLED OR REVOKED PURSUANT TO SECTION 305 & 306 OF THE "NATIONAL BUILDING CODE".

BOX 3 (TO BE ACCOMPLISHED BY THE RECEIVING & RECORDING SECTION)

BUILDING DOCUMENTS

- SANITARY PLUMBING PLANS & SPECIFICATIONS
- BILL OF MATERIALS

- COST ESTIMATES
- OTHER SPECIFY _____

BOX 4 (TO BE ACCOMPLISHED BY DIVISION / SECTION CONCERNED)

	AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID

BOX 5 (TO BE ACCOMPLISHED BY DIVISION / SECTION CONCERNED)

REVIEWED : **NOEL C. BAYBAY**
CHIEF, PROCESSING DIVISION/SECTION

NOTE: LEONARDO B. OLEGARIO CHIEF PROCESSING DIVISION / SECTION	PROGRESS FLOW					
	IN		OUT		ACTION REMARKS	PROCESSED BY
	TIME	DATE	TIME	DATE		
RECEIVING AND RECORDING						
GEODETIC (LINE & GRADE)						
SANITARY						

BOX 6

SANITARY ENGINEER / MASTER PLUMBER SIGNED AND SEALED PLANS & SPECIFICATIONS		PRC . REG. NO.
PRINT NAME		
ADDRESS		
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 8

SIGNATURE		
_____ APPLICANT		
ADDRESS		
RES. CERT. CO	DATE ISSUED	PLACE ISSUED

BOX 7

SANITARY ENGINEER / MASTER PLUMBER IN-CHARGE OF INSTALLATION		PRC . REG. NO.
PRINT NAME		
ADDRESS		
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
OFFICE OF THE BUILDING OFFICIAL
TAGAYTAY

DISTRICT / MUNICIPALITY
AREA CODE 4120

APPLICATION NO. _____

DATE APPLICATION FILED _____

DATE OF PROPOSED INSTALLATION _____

EXPECTED DATE OF COMPLETION _____

APPLICATION FOR ELECTRICAL PERMIT

(Accomplish in print and duplicate)

BOX 1 (TO BE ACCOMPLISHED BY A DULY QUALIFIED ELECTRICAL PRACTITIONER)

NAME OF OWNER / APPLICANT	LAST NAME,	FIRST NAME,	MIDDLE NAME	TIN.
ADDRESS: NO. STREET	BARANGAY	CITY / MUNICIPALITY		TEL / FAX NO.
LOCATION OF INSTALLATION	NO. STREET	BARANGAY	CITY / MUNICIPALITY	
SCOPE OF WORK				
<input type="checkbox"/> NEW INSTALLATION <input type="checkbox"/> ADDITION OF _____ OTHERS (SPECIFY) <input type="checkbox"/> ANNUAL INSPECTION <input type="checkbox"/> REPAIR OF _____ <input type="checkbox"/> REMOVAL OF _____				
TYPE OF OCCUPANCY OR USE				
<input type="checkbox"/> A. RESIDENTIAL DWELING <input type="checkbox"/> E. BUSINESS & MERCANTILE <input type="checkbox"/> I. ASSEMBLY OCCUPANT LOAD 1000 OR MORE <input type="checkbox"/> B. RESIDENTIAL HOTEL, APARTMENT <input type="checkbox"/> F. INDUSTRIAL <input type="checkbox"/> J. ACCESSORY <input type="checkbox"/> C. EDUCATION AND RECREATION <input type="checkbox"/> G. STORAGE AND HAZARDOUS <input type="checkbox"/> K. OTHERS (SPECIFY) _____ <input type="checkbox"/> D. INSTITUTIONAL <input type="checkbox"/> H. ASSEMBLY OTHER THAN GROUP				
NUMBER OF OUTLETS:				
_____ LIGHT _____ SPO, COOKING UNIT _____ TOGGLE SWITCH _____ FA DETECTORS _____ CONVINIENCE / RECEPTACLES _____ SPO, WATER HEATER _____ BELLS / BUZZER _____ OTHERS (SEE ATTACHED LIST) _____ SPO, AIRCON _____ SPO, WATER PUMP _____ PUSH BUTTONS				

BOX 2 (PROFESSIONAL ELECTRICAL ENGINEER WHO SIGNED AND SEALED PLANS & SPECIFICATION)

NAME	PRC REG NO.	VALIDITY
ADDRESS	TEL / FAX NO.	
PTR NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE	DATE SIGNED	TIN

BOX 3 (ELECTRICAL CONTRACTOR 200 AMPERE MAIN ANF ABOVE)

NAME	PCABLIC NO. (SPECIALT ELECTRICAL) VALIDITY
ADDRESS	TEL / FAX NO.

BOX 4 (PERSON IN CHARGE OF INSTALLATION)

<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN (NOT EXCEEDING 600 VOLTS & 500 Kva)	
NAME		PRC REG NO.		VALIDITY	
ADDRESS		TEL/FAX NO.			
PTR NO.		DATE ISSUED		PLACE ISSUED	
SIGNATURE		DATE SIGNED		TIN	

BOX 5 (OWNER / AUTHORIZED REPRESENTATIVE)

NAME	SIGNATURE	TIN	CTC NO. _____ DATE ISSUED _____ PLACE ISSUED _____
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BOX 6 (TO BE RECEIVE BY RECEIVING / RECORDING SECTION)

ELECTRICAL PLANS & SPECIFICATIONS (5 SETS)	RECEIVED BY : _____ SIGNATURE OVER PRINTED NAME
	DATE RECEIVED: _____

REPUBLIC OF THE PHILIPPINES
 DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
 OFFICE OF THE LOCAL BUILDING OFFICIAL

 DISTRICT / MUNICIPALITY
 AREA CODE _____

PERMIT NO.

APPLICATION NO.

DATE ISSUED _____

DATE FILED _____

PAID UNDER O.R. NO. _____

AMOUNT _____

DATE _____

APPLICATION FOR ELECTRICAL PERMIT

(TO BE ACCOMPLISHED BY THE OFFICE CONCERNED)

BOX 1

NAME OF OWNER / APPLICANT	LAST NAME	FIRSTNAME	MIDDLE NAME	TIN
ADDRESS NO.	STREET	BARANGAY	CITY	MUNICIPALITY
LOCATION OF INSTALLATION	NO.	STREET	BARANGAY	CITY / MUNICIPALITY
TEL / FAX NO.				

BOX 2

ASSESSED FEES

AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID
			REVIEWED

 CHIEF, PROCESSING DIV. / SEC.

BOX 3

PERMIT IS GEREBY GRANTED TO INSTALL THE ELECTRICAL WIRING, DEDVICES AND EQUIPMENT ENUMERATED IN THE APPLICATION SUBJECT TO THE FOLLOWING CONDITIONS

1. THAT THE PROPOSED INSTALLATION BE IN ACCORDANCE WITH THE APPROVED PLANS FILED WITH THIS OFFICE AND INCONFORMITY WITH THE PROVISIONS OF THE LATEST EDITION OF THE PHILIPPINE ELECTRICAL CODE.
2. THAT A DULY LICENSED ELECTRICAL PRACTITIONER BE IN CHARGE OF THE INSTALLATIONS / CONSTRUCTION.
3. THAT A CERTIFICATE OF COMPLETION DULY SIGNED BY THE ELECTRICAL PRACTITIONER IN CHARGE OF THE INTALLATION BE SUBMITTED NOT LATER THAN SEVEN (7) DAYS AFTER COMPLETION FOR THE INSTALLATION.
4. THAT A CERTIFICATE OF FINAL ELECTRICAL INSPECTION BE SECURED PRIOR TO THE ACTUAL OCCUPANCY OF THE BUILDING.
5. THIS PERMIT SHALL BE POSTED AT THE DOOR OR SITE OF WORK

RECOMMENDING APPROVAL:

NOTED:

ALLAN PAUL A. MADRAZO
 ELECTRICAL ENGINEER OF THE BUILDING OFFICE
 (SIGNATURE OVER PRINTED NAME)

ENGR. GREGORIO MONREAL
 CITY ADMINISTRATOR

 PRC REG. NO. & VALIDITY

APPROVED:

ENGR. LEONARDO B. OLEGARIO
 BUILDING OFFICIAL
 (SIGNATURE OVER PRINTED NAME)

NOTE1: this permit maybe cancelled or revoked pursuant to Section 305 and 306 of the National Building Code

NOTE2: alteration on this form IS not allowed.

BACK