

OFFICE OF THE BUILDING OFFICIAL

ELECTRONICS PERMIT

APPLICATION NO.

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ELP No.

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BUILDING PERMIT NO.

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BOX 1 (TO BE ACCOMPLISHED IN PRINT BY THE APPLICANT)

OWNER/APPLICANT		LAST NAME		FIRST NAME		M.I	TIN
FOR CONSTRUCTION OWNED BY AN ENTERPRISE		FORM OF OWNERSHIP			USE OR CHARACTER OF OCCUPANCY		
ADDRESS: NO.	STREET	BARANGAY	CITY BAGUIO		ZIP CODE 2600	CONTACT NO./EMAIL ADDRESS	
LOCATION OF CONSTRUCTION: LOT NO. _____		BLK NO. _____	TCT NO. _____		TAX DEC. NO. _____		
STREET _____		BARANGAY _____		CITY BAGUIO.			
SCOPE OF WORK							
<input type="checkbox"/> NEW INSTALATION		<input type="checkbox"/> ANNUAL INSPECTION		<input type="checkbox"/> OTHERS (Specify) _____			

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

NATURE OF INSTALLATION WORKS/EQUIPMENT SYSTEM:		
<input type="checkbox"/> TELECOMMUNICATION SYSTEM	<input type="checkbox"/> ELECTRONICS FIRE ALARM SYSTEM	<input type="checkbox"/> ELECTRONICS COMPUTERIZED PROCESS CONTROLS AUTOMATION SYSTEM
<input type="checkbox"/> BROADCASTING SYSTEM	<input type="checkbox"/> SOUND COMMUNICATION SYSTEM	<input type="checkbox"/> BUILDING AUTOMATION MANAGEMENT AND CONTROL SYSTEM
<input type="checkbox"/> TELEVISION SYSTEM	<input type="checkbox"/> CENTRALIZED CLOCK SYSTEM	<input type="checkbox"/> BUILDING WIRING UTILIZING COPPER CABLE FIBER OPTIC CABLE OR OTHER MEDIAL ELECTRONICS SYSTEM
<input type="checkbox"/> INFORMATION TECHNOLOGY SYSTEM	<input type="checkbox"/> SOUND SYSTEM	
<input type="checkbox"/> SECURITY AND ALARM SYSTEM	<input type="checkbox"/> ELECTRONICS CONTROL AND CONVEYOR SYSTEM	
<input type="checkbox"/> ANY OTHER ELECTRONICS AND I.T SYSTEMS, EQUIPMENT, APPARATUS, DEVICE AND/OR COMPONENT (Specify) _____		
PREPARED BY: _____		

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATION	
<p>_____ Date: _____</p> <p>PROFESSIONAL ELECTRONICS ENGINEER (Signed and Sealed Over Printed name)</p>	
Address	
PRC. No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS	
<p>_____ Date: _____</p> <p>ELECTRONICS ENGINEER (Signed and Sealed Over Printed name)</p>	
Address	
PRC. No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER		
<p>_____</p> <p>(Signature over Printed name) Date: _____</p>		
Address		
C.T.C. No.	Date Issued	Place Issued

BOX 6

WITH MY CONSENT: LOT OWNER		
<p>_____</p> <p>(Signature over Printed name) Date: _____</p>		
Address		
C.T.C. No.	Date Issued	Place Issued

