

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

DISTRICT/CITY/MUNICIPALITY

AREA CODE 2600

APPLICATION NO.

DATE OF APPLICATION FILED

**APPLICATION OF ELECTRICAL PERMIT**

(To be accomplished in print and in duplicate)

Date Of Proposed Start Of Installation

Expected Date of Completion

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

NAME OF OWNER/APPLICANT:	LAST NAME	FIRST NAME	MIDDLE NAME	TIN
ADDRESS NO.,	STREET,	BARANGAY,	CITY <b>BAGUIO</b>	CONTACT NO./EMAIL ADDRESS
LOCATION OF INSTALLTION:	NO.,	STREET,	BARANGAY,	CITY <b>BAGUIO</b>
SCOPE OF WORK				
<input type="checkbox"/> NEW INSTALLATION <input type="checkbox"/> ADDITION OF _____ <input type="checkbox"/> OTHERS (SPECIFY) _____ <input type="checkbox"/> ANNUAL INSPECTION <input type="checkbox"/> REPAIR OF _____ <input type="checkbox"/> SPO, AIRCON <input type="checkbox"/> REMOVAL OF _____				
TYPE OF OCCUPANCY OR USE:				
<input type="checkbox"/> A. RESIDENTIAL DWELLING <input type="checkbox"/> E. BUSINESS & MERCANTILE <input type="checkbox"/> I. ASSEMBLY OCUPANT LOAD 10000 OR MORE <input type="checkbox"/> B. RESIDENTIAL, HOTEL, APARTMENT <input type="checkbox"/> F. INDUSTRIAL <input type="checkbox"/> J. ACCESSORY <input type="checkbox"/> C. EDUCATION & RECREATION <input type="checkbox"/> G. STORAGE & HAZARDOUS <input type="checkbox"/> K. OTHERS (SPECIFY) _____ <input type="checkbox"/> D. INSTITUTIONAL <input type="checkbox"/> H. ASSEMBLY OTHER THAN GROUP 1				
NUMBER OF OUTLETS:			NUMBER OF EQUIPMENT/WIRING DEVICES:	
_____ LIGHT      _____ SPO, COOKING UNIT _____ CONVENIENCE/RECEPTACLE      _____ SPO, WATER HEATER _____ SPO, AIRCON      _____ SPO, WATER PUMP			_____ TOGGLE SWITCH      _____ FA DETECTORS _____ BELLS/BUZZERS      _____ OTHERS (See Attached list) _____ PUSH BUTTONS	

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

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 AND ABOVE)**

NAME	(SPECIALTY ELECTRICAL)
	PCAB LIC. NO.
	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 <i>(Not Exceeding 600 Volts &amp; 500kVa)</i>
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 _____

**BOX 6 (TO BE RECEIVED BY RECEIVING/RECORDING SECTION)**

ELECTRICAL PLANS & SPECIFICATIONS (5 SETS)	RECEIVED BY: _____ (SIGNATURE OVER PRINTED NAME)  DATE RECEIVED: _____
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AREA CODE 2600

APPLICATION NO.

DATE APPLICATION FILED

DATE ISSUED \_\_\_\_\_

PAID UNDER O.R. NO. \_\_\_\_\_

AMOUNT \_\_\_\_\_

DATE \_\_\_\_\_

**ELECTRICAL PERMIT**

(To be Accomplished by the Office Concerned)

DATE FILED \_\_\_\_\_

**BOX 1**

NAME OF OWNER/APPLICANT:	LAST NAME	FIRST NAME	MIDDLE NAME	TIN
ADDRESS NO.,	STREET,	BARANGAY,	CITY <b>BAGUIO</b>	CONTACT NO./EMAIL ADDRESS
LOCATION OF INSTALLTION:	NO.,	STREET,	BARANGAY,	CITY <b>BAGUIO</b>

**BOX 2**

ASSESSED FEES			
AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID
			REVIEWED
			ENGR. SAMUEL P. SALVADOR CHIEF, PROCESSING AND ENFORCEMENT

**BOX 3**

PERMIT IS HEREBY GRANTED TO INSTALL THE ELECTRICAL WIRING, DEVICES AND EQUIPMENT ENUMERATED IN THE APPLICATION SUBJECT TO THE FOLLOWING CONDITIONS:

1. THAT THE PROPOSED INSTALLETION BE IN ACCOEDANCE WITH THE APPROVED PLANS FILED WITH THIS OFFICE AND IN CONFORMITY WITH THE PROVISIONS OF THE LATEST EDITION OF THE PHILIPPINE ELECTRICAL CODE.
2. THAT THE DULY LICENSED ELECTRICAL PRACTITIONER BE IN CHARGE OF THE INSTALLATION/CONSTRUCTION.
3. THAT A CERTIFICATE OF COMPLETION DULY SIGNED BY THE ELECTRICAL PRACTITIONER IN CHARGE OF THE INSTALLATION BE SUBMITTED NOT LATER THAN SEVEM (7) DAYS AFTER COMPLETION OF 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.

APPROVED:

\_\_\_\_\_ DATE \_\_\_\_\_  
 ELECTRICAL ENGINEER OF THE BUILDING OFFICE  
*Signature Over Printed Name*

\_\_\_\_\_ PRC REG. NO. & VALIDITY \_\_\_\_\_

NOTED:

\_\_\_\_\_ DATE \_\_\_\_\_  
 ENGR. NAZITA F. BAÑEZ  
 City Government Department Head II  
**CITY BUILDING OFFICIAL**  
 Date \_\_\_\_\_

Note 1: This permit may be cancelled or revoked pursuant to Section 305 and 306 of the National Building Code.  
 Note 2: Alterations on this form is not allowed.