



**CERTIFICATE OF INSPECTION
MECHANICAL INSTALLATION**

THIS IS TO CERTIFY THAT THE FOLLOWING MECHANICAL EQUIPMENT/INSTALLATION HAS BEEN INSPECTED BY THE UNDERSIGNED AND THAT THE EQUIPMENT/INSTAALLATION IS IN ORDER.

NAME OF OWNER: _____

LOCATION (NAME OF BLDG., No., Street/Road, BRGY): _____

MECHANICAL PERMIT #: _____

DATE ISSUED: _____

QTY	DESCRIPTION OF MECHANICAL EQUIPMENT/ MECHANICAL INSTALLATION	EQUIPMENT MANUFACTURER	RATED POWER/ CAPACITY

INSPECTED BY:

PROFESSIONAL MECHANICAL ENGINEER OF THE OWNER/LESSEE
(Signature over printed name)

DATE INSPECTED: _____

PRC REG. NO. _____ VALIDITY _____
PTR No. _____ ISSUED ON _____ AT _____
TIN _____

CONFORME:

OWNER / LESSEE
(Signature over printed name)
DATE: _____

NOTE: 1.) Accomplish in TRIPLICATE COPIES; 2.) Use separate sheet if necessary