

Republic of the Philippines
City of Baguio
Province of Benguet
OFFICE OF THE BUILDING OFFICIAL
APPLICATION FOR BUILDING PERMIT

NEW RENEWAL AMENDATORY

APPLICATION NO.

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AREA 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								
ADDRESS: NO.,		STREET,		BARANGAY,		CITY		ZIP CODE		CONTACT NO./EMAIL ADDRESS				
LOCATION OF CONSTRUCTION:				LOT NO. _____		BLK NO. _____		TCT NO. _____		TAX DEC. NO. _____				
STREET _____						BARANGAY _____			CITY <u>BAGUIO.</u>					
SCOPE OF WORK														
<input type="checkbox"/> NEW CONSTRUCTION			<input type="checkbox"/> RENOVATION _____			<input type="checkbox"/> RAISING _____								
<input type="checkbox"/> ERECTION _____			<input type="checkbox"/> CONVERSION _____			<input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE _____								
<input type="checkbox"/> ADDITION _____			<input type="checkbox"/> REPAIR _____			<input type="checkbox"/> OTHERS (Specify) _____								
<input type="checkbox"/> ALTERATION _____			<input type="checkbox"/> MOVING _____											
USE OR CHARACTER OF OCCUPANCY														
<input type="checkbox"/> GROUP A : RESIDENTIAL, DWELLINGS				<input type="checkbox"/> GROUP F : INDUSTRIAL				<input type="checkbox"/> OTHERS (Specify) _____						
<input type="checkbox"/> GROUP B : RESIDENTIAL, HOTEL, APARTMENT				<input type="checkbox"/> GROUP G : INDUSTRIAL STORAGE AND HAZARDOUS										
<input type="checkbox"/> GROUP C : EDUCATIONAL, RECREATIONAL				<input type="checkbox"/> GROUP H : RECREATIONAL, ASSEMBLY OCCUPANT LOAD LESS THAN 1000										
<input type="checkbox"/> GROUP D : INSTITUTIONAL				<input type="checkbox"/> GROUP I : RECREATIONAL, ASSEMBLY OCCUPANT LOAD 1000 OR MORE										
<input type="checkbox"/> GROUP E : BUSINESS AND MERCANTILE				<input type="checkbox"/> GROUP J : AGRICULTURAL, ACCESSORY										
OCCUPANCY CLASSIFIED _____						TOTAL ESTIMATED COST P _____								
NUMBER OF UNITS _____						PROPOSED DATE OF CONSTRUCTION _____								
TOTAL FLOOR AREA _____ SQUARE METERS						EXPECTED DATE OF COMPLETION _____								
OWNER / ENGINEER / ARCHITECT (Signature Over Printed Name)														
EXPECTED DATE OF COMPLETION: _____														

DO NOT FILL-UP (NSO USE ONLY)

BOX 2

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS (REPRESENTING THE OWNER)			
<p style="text-align: center;">_____ ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name)</p> <p>Date _____</p>		Address	
		PRC No.	Validity
		PTR No.	Date Issued
		Issued at	TIN

BOX 3

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

BOX 4

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

BOX 5

REPUBLIC OF THE PHILIPPINES) S.S		
CITY OF BAGUIO 0)		
BEFORE ME, at the City of Baguio, on _____ personally appeared the following:		
_____	C.T.C. No.	Date Issued
APPLICANT	_____	Place Issued
_____	C.T.C. No.	Date Issued
LICENSED ARCHITECT OR CIVIL ENGINEER (Full-Time Inspector and Supervisor of Construction Works)	_____	Place Issued
whose signatures appear herein above, known to me to be the same persons who executed this standard prescribed form and acknowledged to me that the same is their free and voluntary act and deed.		
WITNESS MY HAND AND SEAL on the date and place above written.		
Doc. No. _____	NOTARY PUBLIC (Until December _____)	
Page No. _____		
Book No. _____		
Series of _____		

BOX 6 (TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION)

ASSESSED FEES	BASIS OF ASSESSMENT	AMOUNT DUE	ASSESSED BY
FILING/INSPECTION FEE			
PROCESSING FEE (<i>per transaction</i>)	1.)		
	2.)		
	3.)		
LOCATIONAL/ZONING OF LAND USE			
LINE AND GRADE (Geodetic)			
FENCING			
ARCHITECTURAL			
CIVIL/STRUCTURAL			
ELECTRICAL			
MECHANICAL			
SANITARY			
PLUMBING			
ELECTRONICS			
INTERIOR			
FIRE CODE CONSTRUCTION TAX			
SURCHARGES			
PENALTIES			
OTHERS: (SPECIFY)			
TOTAL:			

TERMS AND CONDITIONS

1. The Owner/Permittee shall accomplish the prescribed Application Form, with the assistance of the concerned design professional/s and/or the Architect/Civil Engineer, hired/commissioned by the Owner/Permittee as full-time inspector/supervisor of the construction works, by filling up the necessary data/information required thereat.
2. The fully accomplished prescribed Application Form, duly notarized, shall be submitted to the concerned Office of the Building Official accompanied by the various applicable ancillary and accessory permit, plans and specifications signed and sealed by the corresponding design professionals who shall be responsible for the comprehensive and correctness of the plans in compliance to the National Building Code (PD 1096), its IRR and to all applicable referral codes and professional regulatory laws, together with the other documentary requirements pursuant to Section 302 of PD 1096 and its IRR.

ENGR. NAZITA F. BAÑEZ
 City Government Department Head II
City Building Official

Date: _____