

Republic of the Philippines  
 Department of Public Works and Highways  
**OFFICE OF THE LOCAL BUILDING OFFICIAL**  
**ITOGON, BENGUET**  
 AREA CODE 01007

**CERTIFICATION OF FINAL ELECTRICAL INSPECTION/COMPLETION**

THIS IS TO CERTIFY THAT FINAL INSPECTION OF THE ELECTRICAL INSTALLATION HAD BEEN CONDUCTED ON THE BUILDING AND/OR PREMISES COVERED BY BUILDING PERMIT NO: \_\_\_\_\_ ISSUED ON \_\_\_\_\_ AND THE SAME WERE FOUND COMPLETED IN ACCORDANCE WITH THE APPROVED PLANS AND SPECIFICATIONS ON FILE WITH THE OFFICE OF THE BUILDING OFFICIAL AND IN ACCORDANCE WITH THE PHILIPPINE ELECTRICAL CODE PROVISIONS.

NAME OF OWNER/APPLICANT:		LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS:	NO.	STREET	BARANGAY	CITY/MUNICIPALITY ITOGON
LOCATION OF INSTALLATION:	NO.	STREET	BARANGAY	CITY/MUNICIPALITY ITOGON
Type of Occupancy or Use:				
<input type="checkbox"/> A. RESIDENTIAL DWELLING		<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 & 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		
START OF INSTALLATION: _____			DATE OF COMPLETION: _____	

OUTLET/DEVICES/EQUIPMENT			
Number of Outlets:		Number of Equipment/Writing Devices:	
_____ Light	_____ SPO, Cooking Unit	_____ Toggle Switch	_____ FA Detectors
_____ Convenience/Receptacle	_____ SPO, Water Heater	_____ Bells/Buzzers	_____ Others (see attached list)
_____ SPO, Air con	_____ SPO, Water Pump	_____ Push Buttons	

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.:
SIGNATURE:		VALIDITY:
ADDRESS:		
PTR NO.	DATE ISSUED:	TIN NO.
CTC NO.	DATE ISSUED:	PLACE ISSUED:

ELECTRICAL CONTRACTOR (200 AMPERE MAIN AND ABOVE)	
NAME:	PCAB LIC NO. _____ (Specialty – Electrical) VALIDITY:
ADDRESS:	TEL/FAX NO.

TYPE OF INSTALLATION			
<input type="checkbox"/> Temporary	<input type="checkbox"/> New	<input type="checkbox"/> Remodel/Alteration	
TYPE OF WIRING			
<input type="checkbox"/> Open wiring	<input type="checkbox"/> Conduits	<input type="checkbox"/> Cable	<input type="checkbox"/> Raceways
<input type="checkbox"/> Others _____			

CONFORME:	INSPECTED AND RECOMMENDED BY:	APPROVED BY:
_____ NAME AND SIGNATURE OF OWNER	_____ ELECTRICAL ENGINEER	<b>ENGR. CHARLIE M. GAYASCO</b> BUILDING OFFICIAL
	_____ PRC REG. NO. & VALIDITY	_____ PRC REG. NO. & VALIDITY

AMOUNT PAID: \_\_\_\_\_ OR NO.: \_\_\_\_\_ DATE: \_\_\_\_\_

NUMBER OF STOREYS _____
ESTIMATED COST _____
ACTUAL COST _____
a) Materials (Total Cost) P _____ 1. Electrical Wire _____ 2. Lighting Outlets _____ 3. Convenience Outlets _____ 4. Switches _____ Others (specify) _____ b) Other Costs _____ <div style="text-align: right; font-size: small;">(this includes professional fees, permits and other fees)</div>

1. Tools to be connected _____ LIGHT _____ SPO, COOKING UNIT _____ CONV./RECEPTACLE _____ SPO, WATER HEATER _____ SPO, AIRCON _____ SPO, WATER PUMP	_____ TOGGLE SWITCH _____ FA DETECTORS _____ BELLS/BUZZERS _____ OTHERS <small>(SEE ATTCHED LIST)</small> _____ PUSH BUTTONS _____
2. Nature of Works: _____	
3. Type of Service: Voltage _____ Size of Wire _____ Phone _____	
4. Remarks: _____ _____	

I hereby certify that the above data and information are true and correct to the best of my knowledge and belief.

ELECTRICAL FEES Fee P _____ Surcharge _____ Total _____  Computed by: _____ <div style="text-align: center; font-size: small;">Signature Over Printed Name</div>	PEE/REE/ME ADDRESS PRC. REG. NO. _____ VALIDITY _____ PTR NO. _____ TIN: _____ CTC NO. _____ DATE ISSUED _____ PLACED ISSUED _____
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LOAD	

Nature of Work: _____	
Inspector: _____ Fee: _____	Contractor: _____
Paid under Official Receipt No.: _____ Date: _____	Owner/Occupant _____

APPROVED BY:  _____ ELECTRICAL ENGINEER  _____ PRC REG. NO. & VALID	NOTED:  <b>ENGR. CHARLIE M. GAYASCO</b> _____ BUILDING OFFICIAL
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