## Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS OFFICE OF THE BUILDING OFFICIAL

## ITOGON, BENGUET DISTRICT/CITY/MUNICIPALITY

AREA CODE \_\_\_

APPLICATION NO.		AREA CODE				DATE OF APPLICATION FILED			
	_	APPLICAT	ION F						
		LECTRICA							
Date of Proposed Start of Installation  (Accomplish in print and in duplicate)  Expected Date of Completic									
BOX 1 (To be accomplished by a duly	•					T			
NAME OF OWNER/APPLICANT	LAST NAME	FIRST NAM	AME MIDDLE NAME			TAX IDENTIFICATION NO.			
ADDRESS NO.	SITIO B/	ARANGAY	CITY/	MUNICIPALITY		TEL/FAX NO.			
LOCATION OF INSTALLATION	NO.	SITIO	BAR	ANGAY		MUNICIPALITY ITOGON			
SCOPE OF WORK  NEW INSTALLATION ANNUAL INSPECTION	☐ AI ☐ RE	DDITION OF PAIR OF EMOVAL OF			□ ОТНЕ	ERS (Specify)			
TYPE OF OCCUPANCY OR USE  A. RESIDENTIAL DWELLING MCRE  B. RESIDENTIAL, HOTEL, AF  C. EDUCATION AND RECRE  D. INSTITUTIONAL	PARTMENT   F	BUSINESS AN T. INDUSTRIAL G. STORAGE & H H. ASSEMBLY O	HAZARDO	us 🗆	J. ACCES	BLY OCCUPANT LOAD 1000 OR SORY RS (Specify)			
NUMBER OF OUTLETS LIGHT CONVENIENCE/RECEPTAGE HEATERSPO/AIRCON	PTACLE SPO, COOKING UNIT SPO, WATER SPO, WATER PUMP  NUMBER OF EQUIPMENT/W TOGGLE SWITCH BELLS/BUZZER PUSH BUTTONS					VIRING DEVICES:  FA DETECTORS  OTHERS (Specify)			
BOX 2 (Professional Electrical Engine	er who signed and	sealed plans and	specification	ons)					
NAME		<u> </u>	<u>.                                      </u>	,	PRC REG.	NO. VALIDITY			
ADDRESS			TEL/FAX NO.						
PTR NO.	DATE ISSUED					PLACE ISSUED			
SIGNATURE					TIN				
SIGNATURE	DATE ISSUED				TIN				
BOX 3 (Electrical Contractor – 200 An	nere Main and Ahr	ive)							
NAME	.poro mam ana / too		PCAB LIC.	NO.	(SPECIA	ALTY ELECTRICAL)			
ADDRESS			VALIDITY TEL/FAX NO.			).			
BOX 4 (Person In-Charge of Installatio	n)								
PROFESSIONAL ELECTRICAL ENGINEER	•								
NAME						(Not exceeding 600 Volts & 500 kva) PRC REG. NO. VALIDITY			
ADDRESS					TEL/FAX N	0.			
PTR NO. DATE SIGNED						PLACE ISSUED			
SIGNATURE	DATE S	IGNED		TIN					
BOX 5 (Owner/Authorized Representat	tive)								
NAME SIGNA			JRE TIN			CTC NO.  DATE ISSUED			
						ACE ISSUED			
BOX 6 (To be received by Receiving/R	ecording Section)				·				
☐ ELECTRICAL PLANS 8		RECEIVED BY:							
						Signature Over Printed Name			
	DATE RECEIVED:								

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## ITOGON, BENGUET DISTRICT/CITY/MUNICIPALITY

PERMIT NO.	_	AREA CODE		_	APPLICATION NO.			
	TT							
DATE ISSUED	(To bo oo	CTRICA		DATE FILED:				
PAID UNDER O.R. NOAMOUNT_	(10 be accomplished by the Office Concerned)							
DATE	_							
BOX 1								
NAME OF OWNER/APPLICANT	LAST NAME	FIRST NAME	MIDDLE N	IAME T	AX IDENTIFICATION NO.			
NAME OF OWNERVALLEDAM	E (C) TV (WIE	THOTHAME	WIIDDEE IV	1	AX IDENTIFICATION NO.			
ADDRESS	CITIO	DADANCAY	MUNICIDALI	rv <del>-</del>	EL/EAVAIO			
ADDRESS NO.	SITIO E	BARANGAY	MUNICIPALI	IY I	EL/FAX NO.			
LOCATION OF INSTALLATION	NO.	SITIO	BARANGA	<b>(</b>	MUNICIPALITY ITOGON			
					HOGON			
BOX 2								
		ASSESSE	D FEES					
AMOUNT DUE	ASSESSED BY		O.R. NUMBE	ER.	DATE PAID			
					REVIEWED			
					CHIEF, PROCESSING DIVISION/SECTION			
	1							
BOX 3								
		ELECTRICAL WIF	RING, DEVICES A	ND EQUIPMENT EN	JMERATED IN THE APPLICATION			
SUBJECT TO THE FOLLOWING	GCONDITIONS:							
1. THAT THE PROPOS	ED INSTALLATION BE	IN ACCORDANCE	WITH THE APPR	OVED PLANS FILED	WITH THIS OFFICE			
	TY WITH THE PROVISI							
2. THAT A DULY LICENSED ELECTRICAL PRACTITIONER BE IN CHARGE OF THE INSTALLATION/CONSTRUCTION.								
<ol> <li>THAT A CERTIFICATE OF COMPLETION DULY SIGNED BY THE ELECTRICAL PRACTITIONER IN CHARGE OF THE INSTALLATION BE SUBMITTED NOT LATER THAN SEVEN (7) DAYS AFTER COMPLETION OF THE INSTALLATION.</li> </ol>								
THE BUILDING.								
5. THIS PERMIT SHALL BE POSTED AT THE DOOR OR SITE OF WORK.								
APPROVED:								
<del></del>		<u></u>						
ELECTRICAL ENGINEER OF THE BUILDING OFFICE DATE								
PRC REG. NO. & '	VALIDITY							
NOTED:								
MICHELLE A. BU	ISACAV							
DESIGNATED BUILDIN		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 ARE NOT ALLOWED.