



REPUBLIC OF THE PHILIPPINES  
**DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS**  
 OFFICE OF THE LOCAL BUILDING OFFICIAL  
**MUNICIPALITY OF ALAMINOS**  
 DISTRICT/CITY/MUNICIPALITY

APPLICATION NO.

AREACODE \_\_\_\_\_

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 / MUNICIPALITY	TEL/FAX NO.
LOCATION OF INSTALLTION:	NO.,	STREET,	BARANGAY,	CITY / MUNICIPALITY	
<b>SCOPE OF WORK</b>					
<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"/>		<input type="checkbox"/> REMOVAL OF _____			
<b>TYPE OF OCCUPANCY OR USE:</b>					
<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 (SPECIFY0	
<input type="checkbox"/> D. INSTITUTIONAL		<input type="checkbox"/> H. ASSEMBLY OTHER THAN GROUP 1			
<b>NUMBER OF OUTLETS:</b>			<b>NUMBER OF EQUIPMENT/WIRING DEVICES:</b>		
____ LIGHT		____ SPO, COOKING UNIT		____ TOGGLE SWITCH	
____ CONVE NIECE/RE CEPTACLE		____ SPO, WATER HEATER		____ BELLS/BUZZERS	
____ SPO, AIRCON		____ SPO, WATER PUMP		____ FA DETECTORS	
				____ OTHERS (See Attached list)	

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

NAME		PRC. REG. NO.	VALIDITY
ADDRESS		TE/FAX NO.	
PTR. NO.	DATE ISSUED	PLACE ISSUED	
SIGNATURE	DATE SIGNED	TIN	

**BOX 3 (ELECTRICAL CONTRACTOR-200-AMPERE MAIN AND ABOVE)**

NAME		PCAB LIC. NO.	(SPECIALTY ELECTRICAL)
		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 (Not Ex ceeding 600 Volts & 500kVa)	
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: _____ <i>Signature Over Printed Name</i>
	DATE RECEIVED: _____

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AREACODE \_\_\_\_\_

PERMIT NO.

APPLICATION NO.

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/MUNICIPALITY	TEL/FAX NO.
LOCATION OF INSTALLTION:	NO.,	STREET,	BARANGAY,	CITY/MUNICIPALITY

**BOX 2**

ASSESSED FEES			
AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID
			REVIEWED
			CHIEF, PROCESSING DIV./SEC.

**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 INSTALLATION BE IN ACCORDANCE 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 SEVEN (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:

**RICHARD B. ESCUETA**  
Municipal Technician

\_\_\_\_\_  
DATE

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

NOTED:

**FLORENTINO J. DESTACAMENTO**  
Municipal Engineer / Acting 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.