

**REPUBLIC OF THE PHILIPPINES  
PROVINCE OF SURIGAO DEL SUR**

**OFFICE OF THE LOCAL BUILDING OFFICIAL**

APPLICATION NO. \_\_\_\_\_

DISTRICT/CITY/MUNICIPALITY  
AREA CODE \_\_\_\_\_

DATE APPLICATION FILED \_\_\_\_\_

**APPLICATION FOR ELECTRICAL PERMIT**  
(Accomplish in Print and Duplicate)

Date of Proposed Start of Installation \_\_\_\_\_

Expected Date of Completion \_\_\_\_\_

**BOX 1 (TO BE ACCOMPLISHED BY A DULY QUALIFIED PRACTITIONER)**

NAME OF OWNER/APPLICANT			Last Name		First Name		Middle Name		TIN	
ADDRESS		No.	Street		Barangay		City/Municipality		TEL/FAX NO.	
LOCATION OF INSTALLATION		No.	Street		Barangay		City/Municipality			
SCOPE OF WORK										
<input type="checkbox"/> NEW INSTALLATION			<input type="checkbox"/> ADDITION OF _____				<input type="checkbox"/> OTHER SPECIFY _____			
<input type="checkbox"/> ANNUAL INSPECTION			<input type="checkbox"/> REPAIR OF _____				<input type="checkbox"/> REMOVAL OF _____			
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. EDUCATIONAL & 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							
NUMBER OF OUTLETS					NUMBER OF EQUIPMENT/WIRING DEVICE					
_____ LIGHT		_____ SPO. COOKING UNIT		_____ TOGGLE SWITCH		_____ FA DETECTORS				
_____ CONVENIENCE/RECEPTACLE		_____ SPO. WATER HEATER		_____ BELLE/BUZZERS		_____ OTHERS (See Attached List)				
_____ SPO. AIRCON		_____ SPO. WATER PUMP		_____ PUSH BUTTONS						

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

NAME		PRC REG. NO.		VALIDITY	
ADDRESS		TEL. (FAX NO.)			
PTR. NO.		DATE ISSUED		PLACE ISSUED	
SIGNATURE		DATE SIGNED		TIN	

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

NAME		PCAB UC NO.		[SPECIALTY TV ELECTRICAL]	
ADDRESS		VALIDITY		TEL. (FAX NO.)	

**BOX 4 (PERSON IN-CHARGE ON INSTALLATION)**

<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN (Not Exceeding 500 Volts & 500 KVA)	
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 & SPECIFICATION (5 SETS)		RECEIVED BY: _____ (Signature Over Printed Name)	
		DATE RECEIVED: _____	

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PROVINCE OF SURIGAO DEL SUR**

**OFFICE OF THE LOCAL BUILDING OFFICIAL**

\_\_\_\_\_  
DISTRICT/CITY/MUNICIPALITY

AREA CODE \_\_\_\_\_

PERMIT NO.

\_\_\_\_\_

APPLICATION NO.

\_\_\_\_\_

DATE ISSUED \_\_\_\_\_

PAID UNDER O.R. NO. \_\_\_\_\_

AMOUNT \_\_\_\_\_

DATE \_\_\_\_\_

DATE FILED \_\_\_\_\_

**ELECTRICAL PERMIT**

(To be accomplish by the Office Concerned)

**BOX 1**

NAME OF OWNER/APPLICANT			Last Name	First Name	Middle Name	TIN
ADDRESS	No.	Street	Barangay	City/Municipality		TEL/FAX NO.
LOCATION OF INSTALLATION	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, DEVICE AND EQUIPMENT ENUMERATED IN THE APPLICATION SUBJECT TO THE FOLLOWING CONDITIONS:

1. 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 A DULY LICENSED ELECTRICAL PRACTITIONER BE IN-CHARGE OF THIS INSTALLATION/CONSTRUCTION.
3. THAT A CERTIFICATE OF COMPLETION 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 DOORSITE WORK.

APPROVED:

\_\_\_\_\_  
ELECTRICAL ENGINEER OF THE BUILDING OFFICE  
(Signature Over Printed Name)

DATE

\_\_\_\_\_  
PRC REG. NO. AND VALIDITY

NOTED:

\_\_\_\_\_  
BUILDING OFFICIAL  
(Signature Over Printed Name)

DATE

NOTE 1: This permit may be cancelled or revoked pursuant to Section 305 and 306 of the National Building Code.  
NOTE 2: Alteration on this form are not allowed.