NBC FORM NO. A - 01

Republic of the Philippines
City of ___CALAPAN_____
Province of ___ORIENTAL MINDORO
OFFICE OF THE BUILDING OFFICIAL

ARCHITECTURAL PERMIT

APPLICATION NO. ☐☐☐☐☐☐☐☐☐☐

AP NO ☐☐☐☐☐☐☐☐☐☐

BUILDING PERMIT NO. ☐☐☐☐☐☐☐☐☐☐

BOX 1 (TO BE ACCOMPLISHED IN PRINT BY THE OWNER/APPLICANT)

OWNER/APPLICANT	LAST NAME	FIRST NAME	M.I.	TIN

FOR CONSTRUCTION OWNED BY AN ENTERPRISE	FORM OF OWNERSHIP	**USE OR CHARACTER OF OCCUPANCY**

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 OF _____CALAPAN_____

SCOPE OF WORK

- ☐ NEW CONSTRUCTION
- ☐ ERECTION
- ☐ ADDITION
- ☐ ALTERATION
- ☐ RENOVATION _____
- ☐ CONVERSION _____
- ☐ REPAIR _____
- ☐ MOVING _____
- ☐ RAISING _____
- ☐ ACCESSORY BUILDING/STRUCTURE_____
- ☐ OTHERS (Specify) _____

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

1. ARCHITECTURAL FACILITIES AND OTHER FEATURES PURSUANT TO BATAS PAMBANSA BILANG 344 , REQUIRING CERTAIN BUILDINGS, INSTITUTIONS, ESTABLISHMENTS AND PUBLIC UTILITIES TO INSTALL FACILITIES AND OTHER DEVICES.

- ☐ STAIRS
- ☐ WALKWAYS
- ☐ CORRIDORS
- ☐ DOORS, ENTRANCES & THRESHOLDS
- ☐ WASH ROOMS AND TOILETS
- ☐ LIFTS/ELEVATORS
- ☐ RAMPS
- ☐ PARKING AREAS
- ☐ SWITCHES, CONTROLS, BUZZERS
- ☐ HANDRAILS
- ☐ THRESHOLDS
- ☐ FLOOR FINISHES
- ☐ DRINKING FOUNTAINS
- ☐ PUBLIC TELEPHONES
- ☐ SEATING ACCOMMODATIONS
- ☐ OTHERS (Specify) _____

2. PERCENTAGE OF SITE OCCUPANCY

PERCENTAGE OF BUILDING FOOTPRINT _____%
PERCENTAGE OF IMPERVIOUS SURFACE AREA _____%
PERCENTAGE OF UNPAVED SURFACE AREA _____%
OTHERS (Specify) _____

3. CONFORMANCE TO FIRE CODE OF THE PHILIPPINES (P.D. 1185)

- ☐ NUMBER AND WIDTH OF EXIT DOORS
- ☐ WIDTH OF CORRIDORS
- ☐ DISTANCE TO FIRE EXITS
- ☐ ACCESS TO PUBLIC STREET
- ☐ FIRE WALLS
- ☐ FIRE FIGHTING AND SAFETY FACILITIES
- ☐ SMOKE DETECTORS
- ☐ EMERGENCY LIGHTS
- ☐ OTHERS (Specify) _____

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATION

_____ Date:_____
ARCHITECT
(Signed and Sealed Over Printed name)

Address	
IAPOA No.	Validity
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

SUPERVISOR / IN-CHARGE OF ARCHITECTURAL WORKS

_____ Date:_____
ARCHITECT
(Signed and Sealed Over Printed name)

Address	
IAPOA No.	Validity
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER

_____
(Signature over Printed name)
Date:_____

Address		
C.T.C. No.	Date Issued	Place Issued

BOX 6

WITH MY CONSENT: LOT OWNER

_____
(Signature over Printed name)
Date:_____

Address		
C.T.C. No.	Date Issued	Place Issued

NOTE: THIS PERMIT MAY BE CANCELLED OR REVOKED PURSUANT TO SECTIONS 305 AND 306 OF THE "NATIONAL BUILDING CODE".