

Republic of the Philippines
Province of Oriental Mindoro
CITY OF CALAPAN
TANGGAPAN NG PINUNONG PANGGUSALI
(Office of the Building Official)

CIVIL/STRUCTURAL PERMIT

APPLICATION NO.

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C/SP NO.

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BUILDING PERMIT NO.

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

OWNER/APPLICANT:		LAST NAME		FIRST NAME		MI	TIN
FOR CONSTRUCTION OWNED BY AN ENTERPRISE:			FORM OF OWNERSHIP			USE OR CHARACTER OF OCCUPANCY	
ADDRESS	NO.	STREET	BARANGAY	CITY/MUNICIPALITY	ZIP CODE	TELEPHONE NO.	
LOCATION OF CONSTRUCTION		LOT NO. _____	BLK. NO. _____	TCT. NO. _____	TAX DEC. NO. _____		
STREET _____		BARANGAY _____		CITY/MUNICIPALITY		CALAPAN	
SCOPE OF WORK:							
<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> RENOVATION _____		<input type="checkbox"/> RAISING _____				
<input type="checkbox"/> ERECTION	<input type="checkbox"/> CONVERSION _____		<input type="checkbox"/> DEMOLITION _____				
<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR _____		<input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE _____				
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> MOVING _____		<input type="checkbox"/> OTHERS (Specify) _____				

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

NATURE OF CIVIL/STRUCTURAL WORKS		
<input type="checkbox"/> STAKING	<input type="checkbox"/> ERECTION/LIFTING	<input type="checkbox"/> PRESTRESS WORKS
<input type="checkbox"/> EXCAVATION	<input type="checkbox"/> CONCRETE FRAMING	<input type="checkbox"/> MATERIAL TESTING
<input type="checkbox"/> SOIL STABILIZATION	<input type="checkbox"/> STRUCTURAL STEEL FRAMING	<input type="checkbox"/> STEEL TOWERS
<input type="checkbox"/> PILING WORKS	<input type="checkbox"/> SLABS	<input type="checkbox"/> TANKS
<input type="checkbox"/> FOUNDATION	<input type="checkbox"/> WALLS	<input type="checkbox"/> OTHERS (Specify) _____
PREPARED BY _____		

BOX 3

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS	
_____ CIVIL/STRUCTURAL ENGINEER <small>(Signed & Sealed Over Printed Name)</small>	
Address	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

SUPERVISOR /IN -CHARGE OF CIVIL/STRUCTURAL WORKS	
_____ CIVIL/STRUCTURAL ENGINEER <small>(Signed & Sealed Over Printed Name)</small>	
Address	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER		
_____ <small>(Signature Over Printed Name)</small>		
Address		
CTC No.	Date Issued	Place Issued

BOX 6

WITH MY CONSENT: LOT OWNER		
_____ <small>(Signature Over Printed Name)</small>		
Address		
CTC No.	Date Issued	Place Issued

Original-Applicants Copy, Pink-Assessor's Copy, Yellow-NCSO Copy, Blue-Building Official's Copy, Green-Acid Copy