

**REPUBLIC OF THE PHILIPPINES
CITY OF ROXAS
PROVINCE OF CAPIZ
OFFICE OF THE BUILDING OFFICIAL**

APPLICATION NO. _____

Date of Proposed Start of Installation

AREA CODE _____

DATE APPLICATION FILED _____

Expected Date of Completion

APPLICATION FOR ELECTRICAL PERMIT
(Accomplish in print and in duplicate)

BOX 1 (TO BE ACCOMPLISHED BY DULY QUALIFIED ELECTRICAL PRACTICE)

NAME OF OWNER/ APPLICANT	LAST NAME,	FIRST NAME	MIDDLE NAME	TIN
ADDRESS	NO.	STREET	BARANGAY	CITY/ MUNICIPALITY
LOCATION OF INSTALLATION	NO.	STREET	BARANGAY	CITY/ MUNICIPAITY
SCOPE OF WORK <input type="checkbox"/> NEW INSTALLATION <input type="checkbox"/> ANNUAL INSPECTION <input type="checkbox"/> ADDITION OF <input type="checkbox"/> REPAIR OF <input type="checkbox"/> REMOVAL OF <input type="checkbox"/> OTHERS (SPECIFY)				
<input type="checkbox"/> A. RESIDENTIAL DWELLING <input type="checkbox"/> B. RESIDENTIAL, HOTEL, APARTMENT <input type="checkbox"/> C. EDUCATION AND RECREATION <input type="checkbox"/> D. INSTITUTIONAL <input type="checkbox"/> E. BUSINESS & MERCHANTILE <input type="checkbox"/> F. INDUSTRIAL <input type="checkbox"/> G. STORAGE & HAZARDOUS <input type="checkbox"/> H. ASSEMBLY OTHER THAN GROUP 1 <input type="checkbox"/> I. ASSEMBLY OCCUPANT LOAD 1000 OR MORE <input type="checkbox"/> J. ACCESSORY <input type="checkbox"/> K OTHERS (SPECIFY)				
NUMBER OF OUTLETS ___ LIGHT ___ CONVENIENCE/ RECEPTACLE ___ SPO; AIRCON		NUMBER OF EQUIPMENT/ WIRING DEVICES ___ SPO; COOKING UNIT ___ SPO; WATER HEATER ___ SPO; WATER PUMP ___ TOGGLE SWITCH ___ BELL/ BUZZERS ___ PUSH BUTTONS ___ FA DETECTORS ___ OTHERS (see Attached List)		

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

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	VALIDITY
ADDRESS	TEL./ FAX NO.

<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER	<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER	<input type="checkbox"/> (Not Exceeding 600 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	
			PLACE ISSUED

BOX 6 (TO BE RECEIVED BY RECEIVING/ RECORDING SECTION)

ELECTRICAL PLANS & SPECIFICATIONS	Signature Over Printed Name
	DATEC RECEIVED: _____

**REPUBLIC OF THE PHILIPPINES
CITY OF ROXAS
PROVINCE OF CAPIZ
OFFICE OF THE BUILDING OFFICIAL**

PERMIT NO. _____

APPLICATION NO. _____

DISTRICT/ CITY/ MUNICIPALITY
AREA CODE _____

DATE FILED _____

DATE ISSUED _____
PAID UNDER O.R. NO. _____
AMOUNT _____
DATE _____

ELECTRICAL PERMIT

(To be Accomplished by the Office Concerned)

BOX 1

NAME OF APPLICANT	LAST NAME	FIRST NAME	MIDDLE NAME	TIN
ADDRESS	NO.	STREET	BARANGAY	CITY/ MUNICIPALITY
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, 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 A 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 SIT OF WORK

APPROVED:

DELFIN B. BORDA

ELECTRICAL ENGINEER OF THE BUILDING OFFICE
(Signature Over printed Name)

DATE

PRC REG. NO. & VALIDITY

NOTED:

ENGR. ANTONIO V. AMOROSO, JR.

BUILDING OFFICIAL

DATE