



Republic of the Philippines
City of Cagayan de Oro
OFFICE OF THE BUILDING OFFICIAL

cagayan
deOro
city of golden friendship

APPLICATION NO.

DATE APPLICATION FILED

Date of Proposed Start of Installation.

Expected Date of Completion

APPLICATION FOR ELECTRICAL PERMIT

(Accomplish in print and in duplicate)

BOX 1 (TO BE ACCOMPLISHED BY A DULY QUALIFIED ELECTRICAL 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"/> ADDITION OF _____		<input type="checkbox"/> OTHERS (SPECIFY) _____	
<input type="checkbox"/> NEW INSTALLATION		<input type="checkbox"/> REPAIR OF _____		_____	
<input type="checkbox"/> ANNUAL INSPECTION		<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. EDUCATION & RECREATION		<input type="checkbox"/> G. STORAGE & HAZARDOUS		<input type="checkbox"/> K. OTHERS (SPECIFY) _____	
<input type="checkbox"/> D. INSTITUTIONAL		H. ASSEMBLY OTHER THAN GROUP1			
NUMBER OF OUTLETS:			NUMBER OF EQUIPMENT / WRITING DEVICES:		
____ LIGHT			____ TOGGLE SWITCH		
____ CONVENIENCE /			____ BELLS/BUZZERS		
RECEPTACLE			____ FA DETECTORS		
____ SPO, COOKING UNIT			OTHERS (see attached list)		
____ SPO, WATER HEATER			____ PUSH BUTTONS		
____ SPO, AIRCON			____ SPO, WATER PUMP		

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

NAME		PRC REG. NO.	VALIDITY
ADDRESS		TEL./FAX NO.	
PTR NO.	DATE ISSUED	PLACED ISSUED	
SIGNATURE	DATE SIGNED	TIN	

BOX 3: (ELECTRICAL CONTRACTOR – 200 – AMPERE MAIN AND ABOVE)

NAME		PCAB L.I.C. NO.	(SPECIALTY ELECTRICAL)
ADDRESS		VALIDITY	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 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 OR 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: _____
	Signature Over Printed Name
	DATE RECEIVED: _____



Republic of the Philippines
 City of Cagayan de Oro
OFFICE OF THE BUILDING OFFICIAL



PERMIT NO.

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

APPLICATION NO.

DATE FILLED _____

ELECTRICAL PERMIT

BOX 1

NAME OF OWNER/APPLICANT:		LAST NAME,	FIRST NAME,	MIDDLE NAME	TIN
ADRESS	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

BOX 3

PERMIT IS HEREBY GRANTED TO INSTALL THE ELECTRICAL WIRING, DEVICES AND EQUIPMENT ENUMERATED IN THE APPLIICATION SUBJECT TO THE FOLLOWING CONDITIONS:

1. THAT THE PROPOSED INSTALLATION BE IN ACCORDANCE WITH THE APPROVED PLANS FILLED 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 INCHARGE OF THE INSTALLATION / CONSTRUCTION.
3. THAT A CERTIFICATE OF COMPLETION DULY SIGNED BY THE ELECTRICAL PRACTITIONER INCHARGE OF THE INSTALLATION BE SUBMITTED NOT LATTER THAN SEVEN (7) DAYS AFTER COMPLETION OF THE INSTALLATION.
4. THAT THIS 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:

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

 DATE

 PRC REG. NO. & VALIDITY

NOTED:

 CITY BUILDING OFFICIAL-OIC
 (Signature Over Printed Name)

 DATE

Note: 1. This permit may be cancelled or revoked pursuant to Sections 305 and 306 of the National Building Code.
 Note: 2. Alterations of this form are not allowed.