

Republic of the Philippines  
 City of ORMOC  
 Province of LEYTE  
 OFFICE OF THE BUILDING OFFICIAL

**CIVIL / STRUCTURAL PERMIT**

APPLICATION NO. <input style="width: 100%;" type="text"/>	C/SP NO. <input style="width: 100%;" type="text"/>	BUILDING PERMIT NO. <input style="width: 100%;" type="text"/>
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**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/MUNICIPALITY
			TELEPHONE NO.
LOCATION OF CONSTRUCTION STREET	LOT NO.	BLK NO.	TCT NO.
		TAX DEC. NO.	
		CITY/MUNICIPALITY OF	
<b>SCOPE OF WORK</b>			
<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)**

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

<input type="checkbox"/> STAIRS	<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 PROFESSIONAL, PLANS AND SPECIFICATIONS

\_\_\_\_\_ Date \_\_\_\_\_  
 CIVIL/STRUCTURAL ENGINEER  
 (Signed and Sealed Over Printed Name)  
 Date \_\_\_\_\_

Address \_\_\_\_\_

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

**BOX 4**

SUPERVISOR, IN-CHARGE OF ARCHITECTURAL WORKS

\_\_\_\_\_ Date \_\_\_\_\_  
 CIVIL/STRUCTURAL ENGINEER  
 (Signed and Sealed Over Printed Name)  
 Date \_\_\_\_\_

Address \_\_\_\_\_

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
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WITH MY CONSENT LOT OWNER

\_\_\_\_\_  
 (Signature Over Printed Name)  
 Date \_\_\_\_\_

Address \_\_\_\_\_

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