Republic of the Philippines City/Municipality of Lasam Province of Cagayan

OFFICE OF THE BUILDING OFFICIAL

MECHANICAL PERMIT

APPLICATION NO.		MP NO			В	UILDING PERMIT NO.				
BOX 1 (TO BE ACCOMPLISHED IN PRINT BY THE OWNER/APPLICANT)										
OWNER/APPLICANT LA	,	FIRST NAME		M.I.	TIN					
FOR CONSTRUCTION OWNED		FORM OF OWNERS	:HIP	USE OR CH	USE OR CHARACTER OF OCCUPANCY					
BY AN ENTERPRISE		TORWOO OWNER	7 III	OOL OR OH	USE OR CHARACTER OF OCCUPANCE					
ADDRESS: NO., STREET,				ZIP CODE	TELEPHONE NO					
LOCATION OF CONSTRUCTION:	ATION OF CONSTRUCTION: LOT NO BLK NO.				TAX DEC. NO					
STREETBARAN										
SCOPE OF WORK NEW CONSTRUCTION RENOVATION CONVERSION REPAIR MOVING				DEMOLITION ACCESSORY BU	BUILDING/STRUCTURE					
BOX 2 (TO BE ACCOMPLISHED B	T THE DESIGN PRO	FESSIONAL)								
BOILER PRESSURE VESSEL INTERNAL COMBUSTION REFRIGERATION AND IC WINDOW TYPE AIRCON PACKAGED/ SPLIT TYPE OTHERS (Specify) PREPARED BY:	MECHANICA SCALATOR MOVING SID FREIGHT ES PASSENGER CABLE CAR	EWALK		 □ DUMBWAITER □ PUMPS □ COMPRESSED AIR, VACUUM, INSTITUTIONAL and/or INDUSTRIAL GAS □ PNEUMATIC TUBES, CONVEYORS and/or MONORAILS □ FUNICULAR 						
BOX 3			BOX 4							
DESIGN PROFESSIONAL, PLANS AND) SPECIFICATIONS		VISOR OF MECHANICAL WORKS ESSIONAL MECHANICAL ENGINEER MECHANICAL ENGINEER							
	CHANICAL ENGINEER Over Printed Name)	<u>-</u>		(Signed and Sealed C						
Address			Address							
PRC. No	C. No Validity		PRC. No		Validity					
PTR. No			PTR. No		Date Issued					
Issued at TIN			Issued at			TIN				
BOX 5			BOX 6	TAIT. LOT OMMED						
BUILDING OWNER (Signature O	ver Printed Name)		WITH MY CONSE	(Signature Ov	ver Printed N	ame)				
Address	Address									
C.T.C. No. Date Issued	d Place Is	ssued	C.T.C. No.	Date Issued	1	Place Issued				

BOX 7

RECEIVED BY:				DATE:	DATE:							
FIVE (5) SETS OF MECHANICAL DOCUMENTS												
☐ MECHANIC	AL PLANS AND SPECIF	CATIONS				☐ COST ESTIMATES						
☐ BILL OF MA	☐ BILL OF MATERIALS					OTHERS (Specify)						
BOX 8 (TO BE ACCOMPLISHED BY THE MECHANICAL SECTION OF THE OFFICE OF THE BUILDING OFFICIAL) To be shown to the applicant.												
PROGRESS FLOW												
			IN			0	UT	PROCESSED BY				
			DATE		TIME	DATE	TIME					
SANITARY												
OTHERS (Specify)	OTHERS (Specify)											
BOX 9 (TO BE ACCOMPLISHED BY THE MECHANICAL SECTION OF THE OFFICE OF THE BUILDING OFFICIAL).												
ASSESSED FEES												
	AMOUNT DUE	ASSESSE	ED BY	O.R.	. NUMBER	DATE PAID	REVIEWEI	O BY				
MECHANICAL							-					
OTHERS (Specify)	OTHERS (Specify)					CHIFF		PROCESSING AND EVALUATION DIVISION				
BOX 10 ACTION TA	KEN:											
PERMIT IS 1. THAT THE IDAMAGES DEFECT IN PERIODIC BUILDING/S 2. THAT THE AND IN COIDULY SIGN ACCOMPLISE PHILIPPINE	DESIGNER IS AWARE TO THE PLANS OR SPECTIONS OF TO STRUCTURE WAS DESPROPOSED MECHANION FORMITY WITH THE LING COMPLETION OF THE	THAT UNDER A SE WITHIN FIF ECIFICATIONS THE BUILDING IGNED ARE NO CAL WORKS SI ATEST PHILIPF E MECHANICAL THE BUILDING OF COMPLETIC , THE CODE AN	ARTICLE TEEN (15 OR DEF GS/ STR IT BEING HALL BE PINE MEC WORKS OFFICIA ON STAT	1723 OF 5) YEARS ECT IN UCTURE VIOLATI IN ACC CHANICA 5, THE L IN CLU ING THA	THE CIVIL C S FROM THE THE GROU ES TO EN: ED OR ABUS CORDANCE V AL CODE , TH ICENSED SU JDING AS-BU AT THE MEC	CODE OF THE PHE COMPLETION OF UND. HE/ SHE IS SURE THAT THE SED. WITH THE MECH. HE CODE AND ITS JPERVISOR SHALL UILT PLANS AND SHANICAL WORKS	F THE BUILDING THEREFORE HE CONDITION ANICAL PLANS S IRR. L SUBMIT THE OTHER DOCU	SHE IS RESPONSIBLE FOR G/STRUCTURE, IF DUE TO ENJOINED TO CONDUCT IS UNDER WHICH THE FILED WITH THIS OFFICE ENTRY OF THE LOGBOOK MENTS AND SHALL ALSO OTHE PROVISION OF THE				
PERMIT ISS	SUED BY:											
			_	_	OFFICIAL Printed Name		_					