

Republic of the Philippines  
**DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS**  
 OFFICE OF THE BUILDING OFFICIAL  
**CITY OF CALAMBA LAGUNA**  
 DISTRICT/CITY MUNICIPALITY  
 AREACODE

APPLICATION NO.

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PERMIT NO.

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**SANITARY/PLUMBING PERMIT**

DATE OF APPLICATION \_\_\_\_\_

**BOX 1 (TO BE ACCOMPLISHED BY SANITARY ENGINEER/MASTER PLANNER, IN PRINT)**

NAME OF OWNER/APPLICANT	LAST NAME	FIRST NAME	M.I	TIN NO.
ADDRESS				TELEPHONE NO.
LOCATION OF INSTALLATION NO., STREET, BARANGAY, CITY/MUNICIPALITY				

SCOPE OF WORK	<input type="radio"/> ADDITION OF _____ <input type="radio"/> REPAIR OF _____ <input type="radio"/> REMOVAL OF _____	OTHERS (SPECIFY) <input type="radio"/> _____ OF _____ <input type="radio"/> _____ OF _____
<input type="radio"/> NEW INSTALLATION		

USE OR TYPE OF OCCUPANCY	
<input type="radio"/> RESIDENTIAL _____ <input type="radio"/> COMMERCIAL _____ <input type="radio"/> INDUSTRIAL _____ <input type="radio"/> INSTITUTIONAL _____	<input type="radio"/> AGRICULTURAL _____ <input type="radio"/> PARKS, PLAZAS, MONUMENTS _____ <input type="radio"/> RECREATIONAL _____ <input type="radio"/> OTHERS (SPECIFY) _____

FIXTURES TO BE INSTALLED:							
QTY	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES	QTY	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> WATER CLOSET	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> BIDETTE
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> FLOOR DRAIN	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> LAUNDRY TRAYS
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> LAVATORIES	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> DENTAL CUSPIDOR
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> KITCHEN SINK	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> GAS HEATER
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> FAUCET	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> ELECTRIC HEATER
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> SHOWER HEAD	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> WATER BOILER
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> WATER METER	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> DRINKING FOUNTAIN
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> GREASE TRAP	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> BAR SINK
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> BATH TUBS	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> SODA FOUNTAIN SINK
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> SLOP SINK	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> LABORATORY SINK
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> URINAL	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> STERILIZER
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> AIR CONDITIONER UNIT	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> SWIMMING POOL
—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> WATER TANK RESERVIOR	—	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> OTHERS (SPECIFY)
TOTAL							
<input type="radio"/> WATER DISTRIBUTION SYSTEM			<input type="radio"/> SANITARY SEWER SYSTEM		<input type="radio"/> STORM DRAINAGE SYSTEM		

WATER SUPPLY <input type="radio"/> SHALLOW WELL <input type="radio"/> DEEP WELL & PUMP WELL <input type="radio"/> CITY/MUNICIPAL WATER SYSTEM <input type="radio"/> OTHERS	SYSTEM DISPOSAL <input type="radio"/> WASTE WATER TREATMENT PLANT <input type="radio"/> SEPTIC VAULT/IMHOFF TANK <input type="radio"/> SANITARY SEWER CONNECTION <input type="radio"/> SUB-SURFACE SAND FILTER	<input type="radio"/> SURFACE DRAINAGE <input type="radio"/> STREET CANAL <input type="radio"/> WATER COURSE
NUMBER OF STOREYS OF BUILDING _____	TOTAL AREA OF BUILDING/SUBDIVISION _____ SQ.M	
PROPOSED DATE _____	TOTAL COST _____	
START OF INSTALLATION _____	OF INSTALLATION P _____	
EXPECTED DATE _____	PREPARED BY _____	
OF COMPLETION _____		

**BOX 2 (TO BE ACCOMPLISHED BY BUILDING OFFICIAL)**

ACTION TAKEN PERMIT IS HEREBY GRANTED TO INSTALL THE SANITARY/PLUMBING FIXTURE ENUMERATE HEREIN SUBJECT TO THE FOLLOWING CONDITIONS:  1. THAT THE PROPOSED INSTALLATION SHALL BE IN ACCORDANCE WITH APPROVED PLANS FILED WITH THIS OFFICE AND IN CONFORMITY WITH THE NATIONAL BUILDING CODE. 2. THAT A DULY LICENSED SANITARY ENGINEER/MASTER PLUMBER BE ENGAGED TO UNDERTAKE THE INSTALLATION.CONSTRUCTION. 3. THAT A CERTIFICATE OF COMPLETION DULYSIGNED BY A SANITARY ENGINEER/MASTER PLUMBER IN-CHARGE OF INSTALLTION SHALL BE SUBMITTED NOT LATER THAN SEVEN (7) DAYS AFTER COMPLETION OF THE INSTALLATION. 4. THAT A CERTIFICATE OF FINAL INSPECTON AND A CERTIFICATE OF OCCUPANCY BE SECURED PRIOR TO THE ACTUAL OCCUPANCY OF THE BUILDING.  NOTE: THIS PERMIT MAY BE CANCELLED OR REVOKED PURSUANT TO SECTION 305 & 306 OF THE "NATIONAL BUILDING CODE".	<p><b><u>ENGR. JOSELITO M. GUEVARRA</u></b>                  BUILDING OFFICIAL</p> <p>_____</p> <p>DATE</p>
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**BOX 3 (TO BE ACCOMPLISHED BY THE RECEIVING & RECORDING SECTION)**

BUILDING DOCUMENTS

- SANITARY PLUMBING PLANS & SPECIFICATIONS  
 BILL OF MATERIALS

- COST ESTIMATES  
 OTHERS (SPECIFY) \_\_\_\_\_

**BOX 4 (ACCOMPLISHED BY DIVISION/SECTION CONCERNED)**

ASSESSED FEES

	AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID

**BOX 5 (ACCOMPLISHED BY DIVISION/SECTION CONCERNED)**

PROGRESS FLOW

NOTED: CHIEF, PROCESSING DIVISION/SECTION	IN		OUT		ACTION/REMARKS	PROCESSED BY
	TIME	DATE	TIME	DATE		
RECEIVING AND RECORDING						
GEODETC (LINE AND GRADE)						
SANITARY						

WE HEREBY AFFIX OUR HANDS SIGNIFYING OUR CONFORMITY TO THE INFORMATION HEREIN ABOVE SETFORTH

**BOX 6**

SANITARY ENGINEER/MASTER PLUMBER SIGNED AND SEALED PLANS & SPECIFICATIONS		PRC REG NO.
PRINT NAME		
ADDRESS		
P.T.R. NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

SIGNATURE _____		
APPLICANT		
RES. CERT NO.	DATE ISSUED	PLACE ISSUED

**BOX 7**

SANITARY ENGINEER/MASTER PLUMBER INCHARGE OF CONSTRUCTION		PRC REG NO.
PRINT NAME		
ADDRESS		
P.T.R. NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN