



REPUBLIC OF THE PHILIPPINES
LUCENA CITY
 DEPARTMENT OF THE BUILDING OFFICIAL
APPLICATION FOR BUILDING PERMIT

NEW RENEWAL AMENDATORY

APPLICATION NO.

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DATE OF APPLICATION: _____

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		
ADDRESS	NO.	STREET,	BARANGAY,	CITY/MUNICIPALITY
			ZIP CODE	TEL. NO.
LOCATION OF CONSTRUCTION: LOT NO.: _____ BLK NO.: _____ TCT NO.: _____ TAX DEC. NO.: _____				
STREET: _____ BARANGAY: _____ CITY/MUNICIPALITY: _____				
SCOPE OF WORK:				
<input type="checkbox"/> NEW CONSTRUCTION		<input type="checkbox"/> RENOVATION		<input type="checkbox"/> RAISING
<input type="checkbox"/> ERECTION		<input type="checkbox"/> CONVERSION		<input type="checkbox"/> ACCESSORY BUILDINGS/STRUCTURE
<input type="checkbox"/> ADDITION		<input type="checkbox"/> REPAIR		<input type="checkbox"/> OTHERS (Specify) _____
<input type="checkbox"/> ALTERATION		<input type="checkbox"/> MOVING		
USE OR CHARACTER OF OCCUPANCY				
<input type="checkbox"/> GROUP A: RESIDENTIAL, DWELLINGS		<input type="checkbox"/> GROUP F: INDUSTRIAL		<input type="checkbox"/> OTHERS (Specify) _____
<input type="checkbox"/> GROUP B: RESIDENTIAL, HOTEL, APARTMENT		<input type="checkbox"/> GROUP G: INDUSTRIAL STORAGE AND HAZARDOUS		
<input type="checkbox"/> GROUP C: EDUCATIONAL, RECREATIONAL		<input type="checkbox"/> GROUP H: RECREATIONAL, ASSEMBLY OCCUPANT LOAD LESS THAN 1000		
<input type="checkbox"/> GROUP D: INSTITUTIONAL		<input type="checkbox"/> GROUP I: RECREATIONAL, ASSEMBLY OCCUPANT LOAD 1000 OR MORE		
<input type="checkbox"/> GROUP E: BUSINESS AND MERCANTILE		<input type="checkbox"/> GROUP J: AGRICULTURAL, ACCESSORY		
OCCUPANCY CLASSIFIED _____			TOTAL ESTIMATED COST P _____	
NUMBER OF UNITS _____			PROPOSED DATE OF CONSTRUCTION _____	
TOTAL FLOOR AREA _____ SQUARE METERS			EXPECTED DATE OF COMPLETION _____	

BOX 2

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS	
_____ ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name) Date _____	
Address _____	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 3

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTIVE WORKS	
_____ ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name) Date _____	
Address _____	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

APPLICANT:		
_____ (Signature Over Printed Name) Date _____		
Address _____		
CTC No.	Date Issued	Place Issued

BOX 5

WITH MY CONSENT: LOT OWNER		
_____ (Signature Over Printed Name) Date _____		
Address _____		
CTC No.	Date Issued	Place Issued

) S. S.

BOX 6

REPUBLIC OF THE PHILIPPINES			
CITY/MUNICIPALITY OF _____			
BEFORE ME, at the City/Municipality of _____, on _____ personally appeared			
the following:			
_____	C.T.C. No.	Date Issued	Place Issued
APPLICANT			
_____	C.T.C. No.	Date Issued	Place Issued
LICENSED ARCHITECT OR CIVIL ENGINEER (Full-Time Inspector and Supervisor of Construction Work)			
whose signatures appear hereinabove, known to me to be the same persons who executed this standard prescribed form and acknowledged to that the same is their free and voluntary act and deed.			
WITNESS MY HAND AND SEAL on the date and place above written.			
Doc. No. _____			
Page No. _____			
Book No. _____			
Series of _____			
_____ NOTARY PUBLIC			