

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
OFFICE OF THE BUILDING OFFICIAL
CITY OF ESCALANTE
AREA CODE: 06095

CERTIFICATE OF FINAL ELECTRICAL INSPECTION/COMPLETION

THIS IS TO CERTIFY THAT FINAL INSPECTION OF THE ELECTRICAL INSTALLATION HAD BEEN CONDUCTED ON THE BUILDING AND/OR PREMISES COVERED BY THE BUILDING PERMIT NO. _____ ISSUED ON _____ AND THE SAME WERE FOUND COMPLETED IN ACCORDANCE WITH THE APPROVED PLANS AND SPECIFICATION ON FILE WITH THE OFFICE OF THE BUILDING OFFICIAL AND IN ACCORDANCE WITH PHILIPPINE ELECTRICAL CODE PROVISIONS.

NAME OF OWNER/APPLICANT:	LAST NAME,	FIRST NAME,	MIDDLE INITIALS
ADDRESS:	NO,	STREET,	BARANGAY, CITY/MUNICIPALITY
LOCATION OF INSTALLATION:	NO,	STREET,	BARANGAY CITY/MUNICIPALITY
TYPE OF OCCUPANCY OR USE:			
<input type="checkbox"/> RESIDENTIAL DWELLING	<input type="checkbox"/> BUSINESS & MERCHANT	<input type="checkbox"/> ASSEMBLY OCCUPANT LOAD 1000 OR MORE	
<input type="checkbox"/> RESIDENTIAL, HOTEL, APARTMENT	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> ACCESSORY	
<input type="checkbox"/> EDUCATION & RECREATION	<input type="checkbox"/> STORAGE & HAZARDOUS	<input type="checkbox"/> OTHER (SPECIFY) _____	
<input type="checkbox"/> INSTITUTIONAL	<input type="checkbox"/> ASSEMBLY OTHER THAN GROUP		
START OF INSTALLATION _____ DATE OF INSTALLATION _____			

OUTLET/DEVICES/EQUIPMENT

NO. OF OUTLETS:	NUMBER OF EQUIPMENT/WIRING DEVICES:
_____ LIGHTING _____ CONVENIENCE OUTLET _____ S.P.O. AIRCON _____ S.P.O. COOKING UNIT _____ S.P.O. WATER HEATER _____ S.P.O. WATER _____	_____ TOGGLE _____ BELLS/BUZZER _____ PUSH BUTTONS _____ F/A DETECTOR _____ OTHERS (see attached list)

PERSON INCHARGE OF INSTALLATION

<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED MASTER ELECTRICIAN		
NAME:		
SIGNATURE:		
ADDRESS:		
P.T.R. NO.	DATE ISSUED	PLACE ISSUED
C.T.C. NO.	DATE ISSUED	T.I.N.

ELECTRICAL CONTRACTOR (200 AMPERE MAIN AND ABOVE)

NAME:	PCAB LICENCE NO.:
ADDRESS:	TEL/FAX NO.

TYPE OF INSTALLATION:

TEMPORARY
 NEW
 RENOVATIONAL TERATION

TYPE OF WIRING:

OPEN WIRING
 CONDUIT
 ARMORED CABLE
 RACEWAY
 OTHERS _____

INSPECTED BY:

RECOMMENDING APPROVAL:

APPROVE BY:

ELECTRICAL INSPECTOR
PRC NO. _____

ARVIN F. CRISME, REE
ELECTRICAL ENGINEER OF THE BUILDING OFFICE
PRC NO. 31398

FREDDIE P. SERRADOR
BUILDING OFFICIAL

NO. OF STOREYS: _____

ESTIMATED COST: _____

ACTUAL COST: _____

(a) Materials (Total Cost), PhP. _____

1. Electrical Wires _____

2. Lighting Outlet _____

3. Convenience Outlet _____

4. Switches _____

5. Others (Specify) _____

(b) Other Costs _____

(This includes professional fees, permits and other fees)

1. Loads to be Connected:

____ LIGHT ____ S.P.O., COOKING UNIT ____ TOGGLE SWITCH ____ F/A DETECTORS

____ CONVENIENCE/RECEPTACLE ____ S.P.O., WATER HEATER ____ BELLS/BUZZER ____ OTHERS (see attached list)

2. Nature of Works: _____

3. Type of Service: Voltage _____ Size of Wire _____ Phone _____

4. Remarks: _____

ELECTRICAL FEES	<input type="checkbox"/> PEE	<input type="checkbox"/> REE	<input type="checkbox"/> RME
Fee _____	Name _____		
Surcharge _____	Address _____		
Total _____	PRC Reg. No. _____		Validity _____
	PTR No. _____		
	Date Issued _____		Place Issued _____
	CTC No. _____		
	Date Issued _____		Place Issued _____
Computed by: _____	T.I.N. _____		
<i>(Signature Over Printed Name)</i>			

LOAD

Nature of Work:

Inspector _____ Contractor _____

Fee: PhP _____

Paid under Official Receipt No. _____ Owner/Occupant _____

RECOMMENDING APPROVAL:

APPROVED BY:

ARVIN F. CRISME, REE
 ELECTRICAL ENGINEER OF THE BUILDING OFFICE
 PRC Reg. No. 31398

FREDDIE P. SERRADOR
 BUILDING OFFICIAL

NOTE: *Renewal or Extension of this permit and/or final certification of the electrical installation are subject to inspection and payment of corresponding fees in conformity with pertinent of the National Building Code (PD 1096) and its implementing rules and regulations.*