## OFFICE OF THE BUILDING OFFICIAL

## **SANITARY PERMIT**

APPLICATION NO.		_		SP NO.				BU	ILDING F	PERMIT	NO.	
DOX 4 (TO DE 40	DOMBLIGHED.	ــــــــــــــــــــــــــــــــــــ		\				<u> </u>				
BOX 1 (TO BE AC OWNER/APPLICANT	COMPLISHED	LAST N		VI)	FIRST NAME		M.I.	IT I	١			
FOR CONSTRUCTION		USE OR CHARACTER OF OCCUPANCY										
BY AN ENTERPRISE												
ADDRESS: NO., ST	ARANGAY, CITY/MU		CITY/MUI	NICIPALITY		ZIPCODE TELEPHONE NUMBER						
LOCATION OF CONST	LOCATION OF CONSTRUCTI LOT NO.		BLK NO.		TCT NO.		TAX DEC. NO.					
STREET							EIPALITY O					
SCOPE OF WOR												
SCOPE OF WOR	A.K.											
NEW CONS	TRUCTION		RENOVATION_				RAISING					
ERECTION	ERECTION		CONVERSION				DEMOLITION					
ADDITION	ADDITION		REPAIR					ACCESSORY BUILDING/STRUCTURE			RE	
ALTERATIO	N		MOVING				OTHERS (Sp	ecify) _				
BOX 2 (TO BE AC				IONAL)								
INSTALLATION AND OPERATION OF:												
WATER SURDI V												
WATER SUPPLY:												
SHALLOW WELL WASTE WATER TREATMENT PLANT SUBFACE DRAINAGE												
DEEP WEL	DEEP WELL & PUMP SET IMHOFF TANK STREET CANAL											
CITY/MUNICIPALITY WATER SYSTEM SANITARY SEWER CONNECTION WATER COURSE												
OTHERS (S	SPECIFY)		SUB-	- SURFA	CE SAND FIL	TER	OTH	ERS (S	oecify)_			
PREPARED BY:												
TREFARED DT.												
BOX 3					BOX 4							
DESIGN PROFE	SSIONAL, PL	DESIGN SUPERVISOR / IN-CAHRGE OF SANITARY WORKS										
		Date										
SANITARY ENGINEER				SANITARY ENGINEER (Signed and Sealed Over Printed Name)								
(Signed and Sealed Over Printed Name)												
Address:		1			Address:							
PRC No.	PRC No.		Validity		PRC No.			Validity				
PTR No.	PTR No.		Date Issued		PTR No.			Date Issued				
Issued at		TIN	TIN		Issued at			TIN				
BOX 5		1			BOX 6							
	BUILDING OWNER						LOT OWNER					
EOI OWNER												
	1											
(Signature Over Printed Name)					-		(Signature Over I	Printed N	lame)			
Date					Date							
Address					Address							
		Place Issued			C.T.C. No		Date Issued		Place Issued			
C.T.C. No	Date Issued		Place Issued		C.1.C. No		Date Issued		riace is	suea		

## TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION

TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUAT	ION DIVISION										
RECEIVED BY:	D	DATE									
FIVE (5) S	ETS OF SANI	FARY DOC	UMENTS								
SANITARY PLANS AND SPECIFICATIONS	SANITARY PLANS AND SPECIFICATIONS COST ESTIMATES										
BILL OF MATERIALS	BILL OF MATERIALS  OTHERS (Specify)										
BOX 8											
PROGRESS FLOW											
		IN		UT	PROCESSED BY						
	DATE	TIME	DATE	TIME							
SANITARY											
OTHERS (Specify)											
BOX 9											
ACTION TAKEN:											
PERMIT IS HEREBY ISSUED SUBJECT TO THE F	OLLOWING:										
<ol> <li>That the proposed sanitary works shall be in accordance with the plumbing plans field with this Office and in conformity with the lates Code on Sanitation of the Philippines the National Building Code and its IRR.</li> </ol>											
<ol> <li>That prior to any commencement of sanitary works, a duly accomplished prescribed "Notice of Construction" sha submitted to the Office of the Building Official.</li> </ol>											
3. That upon completion of the sanitary works, the licensed supervisor/in-charge shall submit the entry to the logbook duly signed and sealed to the Building Official including as-built plans and other documents and shall also accomplish Certificate of Completion starting that the sanitary works conform to the provision of the Code on Sanitation, the National Building Code and its IRR.											
4. That this permit is null and void unless accompanied by the building permit.											
PERMIT ISSUED BY:											
ENC	GR. MARIEL	LE MEN	OR								
BUILDING OFFICIAL (Signature Over Printed Name)											
Date:											
Date											