



UNIFIED APPLICATION FORM FOR BUILDING PERMIT
(FM-CSFP-QMS-36; Revision No. 00; 02/08/2021)

APPENDIX B

DO NOT FILL-UP (PSA USE ONLY)

APPLICATION NO.

PERMIT NO.

DATE OF APPLICATION

DATE ISSUED

 SIMPLE

 COMPLEX

 NEW

 RENEWAL

 AMENDATORY

THIS APPLIES ALSO FOR:

 LOCALATIONAL CLEARANCE

 FIRE SAFETY EVALUATION CLEARANCE

BOX 1 (TO BE ACCOMPLISHED BY DESIGNING ARCHITECT/CIVIL ENGINEER)

OWNER	LAST NAME	FIRST NAME	M.I.	TIN					
FOR CONSTRUCTION OWNED BY AN ENTERPRISE	FORM OF OWNERSHIP		MAIN ECONOMIC ACTIVITY/KIND OF BUSINESS						
ADDRESS				TELEPHONE NO.					
LOCATION OF CONSTRUCTION									
SCOPE OF WORK:	1. NEW CONSTRUCTION		OTHERS (SPECIFY)						
	2. ADDITION OF _____		6. _____ OF _____						
	3. REPAIR OF _____		7. _____ OF _____						
	4. RENOVATION OF _____		NUMBER OF UNITS _____						
	5. DEMOLITION OF _____								
USE OR TYPE OF OCCUPANCY	RESIDENTIAL		INDUSTRIAL		OTHER TYPE OF OCCUPANCY				
	11 SINGLE		31 FACTORY / PLANT		60 OTHERS (SPECIFY) _____				
	12 DUPLEX		32 REPAIR SHOP / MACHINE SHOP		STREET FURNITURE, LANDSCAPING & SIGNBOARD				
	13 ROWHOUSE/ACCESORIA		33 REFINERY		71 PARKS, PLAZAS, MONUMENTS, POOLS, PLANT BOXES, ETC.				
	10 OTHERS (SPECIFY) _____		34 PRINTING PRESS		72 SIDEWALKS, PROMENADES, TERRACES, LAMPOSTS				
COMMERCIAL	21 BANK		35 WAREHOUSE		73 OUTDOOR ADS, SIGNBOARDS, ETC.				
	22 STORE		30 OTHERS (SPECIFY) _____		74 FENCE ENCLOSURE				
	23 HOTEL/MOTEL, ETC.		INSTITUTIONAL						
	24 OFFICE CONDOMINIUM/BUSINESS OFFICE BUILDING		41 SCHOOL						
	25 RESTAURANT, ETC.		42 CHURCH AND OTHER RELIGIOUS STRUCTURES						
	26 SHOP (e.g Dress Shop, Tailoring Shop, Barbershop, etc.)		43 HOSPITAL OR SIMILAR STRUCTURES						
	27 GASOLINE STATION		44 WELFARE AND CHARITABLE						
	28 MARKET		45 THEATER, AUDITORIUM, GYMNASIUM, COURT						
	29 DORMITORY AND OTHER LODGING HOUSE		40 OTHERS (SPECIFY) _____						
	20 OTHERS (SPECIFY) _____		AGRICULTURAL						
			51 BARN(S), POULTRY HOUSE(S), ETC.						
			52 GRAIN MILL						
			50 OTHERS (SPECIFY) _____						

1. RIGHT OVER LAND	APPLICATION FOR LOCALATIONAL CLEARANCE / CERTIFICATE OF ZONING COMPLIANCE	
<input type="checkbox"/> OWNER	3. EXISTING LAND USES OF PROJECT SITE	4. IS THE PROJECT APPLIED FOR THE OR WRITTEN NOTICE(S) FROM THIS TO THE EFFECT REQUIRING FOR PRESENTATION OF LOCALATIONAL CLEARANCE/CERTIFICATE OF ZONING COMPLIANCE (LC/ZC) OR TO APPLY (LZ/CZ)
<input type="checkbox"/> LESSEE	<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> COMMERCIAL	IF YES, PLEASE ANSWER THE FOLLOWING:
2. PROJECT TENURE	<input type="checkbox"/> INSTITUTIONAL	A. NAME OF OFFICER OR ZONING ADMINISTRATOR WHO ISSUED THE NOTICE(S) _____
<input type="checkbox"/> PERMANENT	<input type="checkbox"/> INDUSTRIAL	B. DATE(S) OF NOTICE _____
<input type="checkbox"/> TEMPORARY (SPECIFY NO. OF YEARS) _____ years	<input type="checkbox"/> OTHER (SPECIFY) _____	
	<input type="checkbox"/> VACANT / IDLE	
	<input type="checkbox"/> AGRICULTURAL (SPECIFY CROPS) _____	
	<input type="checkbox"/> TENANTED <input type="checkbox"/> NOT TENANTED	

BOX 2 (TO BE ACCOMPLISHED BY THE RECEIVING & RECORDS SECTION)

SITE DEVELOPMENT AND LOCATION PLANS ARCHITECTURAL PLAN AND SPECIFICATIONS STRUCTURAL DESIGN AND COMPUTATIONS SANITARY/PLUMBING PLANS AND SPECIFICATIONS ELECTRICAL PLANS AND SPECIFICATIONS	BUILDING DOCUMENTS	MECHANICAL PLANS AND SPECIFICATIONS LOGBOOK (1 COPY) OTHERS (SPECIFY) _____
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BOX 3 (NOTARY PUBLIC)

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S

BEFORE ME, at the City/Municipality of _____, on _____ personally appeared the following:

APPLICANT	C.T.C. No.	Date Issued	Place Issued
LICENSED ARCHITECT OR CIVIL ENGINEER (Full-Time Inspector and Supervisor of Construction Works)	C.T.C. No.	Date Issued	Place Issued

whose signatures appear herein above, known to me to be the same persons who executed this standard prescribed form and acknowledged to me 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 (Until December _____)

<http://www.cityofsanfernando.gov.ph>

BOX 4 (TO BE ACCOMPLISHED BY DESIGNING ARCHITECT/CIVIL ENGINEER, IN PRINT)

TOTAL ESTIMATED COST		COST OF EQUIPMENT INSTALLED		TOTAL LOT AREA _____	DO NOT FILL (PSA USE ONLY)															
BUILDING	P _____	P _____	P _____	NUMBER OF STOREYS _____																
ELECTRICAL	P _____	P _____	P _____	TOTAL FLOOR AREA _____																
MECHANICAL	P _____	P _____	P _____	PROPOSED DATE OF CONSTRUCTION _____																
PLUMBING	P _____	P _____	P _____	EXPECTED DATE OF COMPLETION _____																
OTHERS	P _____	P _____	P _____	MATERIALS OF CONSTRUCTION _____																
TOTAL COST	P _____	P _____	P _____	(WOOD, CONC., STEEL, MIXED)																

BOX 5 (TO BE ACCOMPLISHED BY THE DIVISION/SECTION CONCERNED)

ASSESSED FEES					DO NOT FILL (PSA USE ONLY)															
	AMOUNT DUE	ASSESSED BY	O.R. NUMBER	DATE PAID																
LAND USE/ZONING																				
LINE & GRADE																				
BUILDING																				
PLUMBING					■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
ELECTRICAL					■	■	■													
MECHANICAL					■	■	■	■	■	■	■									
FCF					■	■	■	■	■	■	■									
FSIF					■	■	■	■	■	■	■									
OTHERS					■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
TOTAL					■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
REVIEWED BY:	CHIEF PROCESSING DIVISION/SECTION				■	■	■	■	■	■	■									

BOX 6 (TO BE ACCOMPLISHED BY THE DIVISION/SECTION CONCERNED)

PROGRESS FLOW						
NOTED	IN		OUT		ACTIONS/ REMARKS	PROCESSED BY
	TIME	DATE	TIME	DATE		
CHIEF, PROCESSING DIVISION/SECTION						
RECEIVING AND RECORDING						
LAND USE AND ZONING						
GEODETTIC (LINE AND GRADE)						
ARCHITECTURAL						
STRUCTURAL						
SANITARY / PLUMBING						
ELECTRICAL						
MECHANICAL						
ELECTRONICS						

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

BOX 7

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

BOX 9

SIGNATURE		
APPLICANT		
COMMUNITY TAX CERTIFICATE	DATE ISSUED	PLACE ISSUED

WITH MY CONSENT:

BOX 8

ARCHITECT/CIVIL ENGINEER		PRC REG. NO.
IN-CHARGE OF CONSTRUCTION		
PRINT NAME		
ADDRESS		
P.T.R. NO.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 10 (TO BE ACCOMPLISHED BY THE OT OWNER)

TCT/OCT NO.
PRINT NAME OF LOT OWNER
ADDRESS
COMMUNITY TAX CERTIFICATE
SIGNATURE