

Republic of the Philippines
City/Municipality of Pagbilao
Province of Quezon

OFFICE OF THE BUILDING OFFICIAL

PLUMBING PERMIT

APPLICATION NO.

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PP NO

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BUILDING PERMIT NO.

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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		USE OR CHARACTER OF OCCUPANCY			
ADDRESS: NO., STREET,		BARANGAY,		CITY/MUNICIPALITY		ZIP CODE	TELEPHONE NO
LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ TCT NO. _____ TAX DEC. NO. _____ STREET _____ BARANGAY _____ CITY/ MUNICIPALITY OF _____							
SCOPE OF WORK ☒ NEW CONSTRUCTION ☐ ERECTION ☐ ADDITION ☐ ALTERATION ☐ RENOVATION _____ ☐ CONVERSION _____ ☐ REPAIR _____ ☐ MOVING _____ ☐ RAISING _____ ☐ DEMOLITION _____ ☐ ACCESSORY BUILDING/STRUCTURE _____ ☐ OTHERS (Specify) _____							

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

FIXTURES TO BE INSTALLED							
QTY.	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES	QTY.	NEW FIXTURES	EXISTING FIXTURES	KIND OF FIXTURES
_____	☐	☐	☐ WATER CLOSET	_____	☐	☐	☐ BIDETTE
_____	☐	☐	☐ FLOOR DRAIN	_____	☐	☐	☐ LAUNDRY TRAYS
_____	☐	☐	☐ LAVATORY	_____	☐	☐	☐ DENTAL CUSPIDOR
_____	☐	☐	☐ KITCHEN SINK	_____	☐	☐	☐ DRINKING FOUNTAIN
_____	☐	☐	☐ FAUCET	_____	☐	☐	☐ BAR SINK
_____	☐	☐	☐ SHOWER HEAD	_____	☐	☐	☐ SODA FOUNTAIN SINK
_____	☐	☐	☐ WATER METER	_____	☐	☐	☐ LABORATORY SINK
_____	☐	☐	☐ GREASE TRAP	_____	☐	☐	☐ STERILIZER
_____	☐	☐	☐ BATH TUB	_____	☐	☐	☐ OTHERS (Specify) _____
_____	☐	☐	☐ SLOP SINK	_____	☐	☐	_____
_____	☐	☐	☐ URINAL	_____	☐	☐	_____
_____	☐	☐	☐ AIR CONDITIONING UNIT	_____	☐	☐	_____
_____	☐	☐	☐ WATER TANK/RESERVOIR	_____	☐	☐	_____
_____ TOTAL				_____ TOTAL			
☐ WATER DISTRIBUTION SYSTEM		☐ SEWAGE SYSTEM		☐ SEPTIC TANK		☐ STORM DRAINAGE SYSTEM	
PREPARED BY: _____							

BOX 3

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

BOX 5

BUILDING OWNER		
_____ (Signature Over Printed Name) Date _____		
Address		
C.T.C. No.	Date Issued	Place Issued

BOX 4

SUPERVISOR / IN-CHARGE OF PLUMBING WORKS	
_____ Date _____ MASTER PLUMBER (Signed and Sealed Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 6

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

TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION

BOX 7

RECEIVED BY:	DATE:
FIVE (5) SETS OF PLUMBING DOCUMENTS	
☐ PLUMBING PLANS AND SPECIFICATIONS	☐ COST ESTIMATES
☐ BILL OF MATERIALS	☐ OTHERS (Specify) _____

BOX 8

PROGRESS FLOW					
	IN		OUT		PROCESSED BY
	DATE	TIME	DATE	TIME	
RECEIVING AND RECORDING					
PLUMBING					
OTHERS (Specify)					

BOX 9

ACTION TAKEN:

PERMIT IS HEREBY ISSUED SUBJECT TO THE FOLLOWING:

1. That the proposed plumbing works shall be in accordance with the plumbing plans filed with this Office and in conformity with the Revised Plumbing Code of the Philippines, the National Building Code and its IRR.
2. That prior to any commencement of plumbing works, a duly accomplished prescribed **“Notice of Construction”** shall be submitted to the Office of the Building Official.
3. That upon completion of the plumbing 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 the Certificate of Completion stating that the plumbing works of the building conform to the provision of the Revised Plumbing Code, the National Building Code and its IRR.
4. That this permit is null and void unless accompanied by the building permit.

PERMIT ISSUED BY:

ENGR. RYAM J. TOLENTINO
BUILDING OFFICIAL
(Signature Over Printed Name)
Date _____