



Republic of the Philippines
Municipality of **SAN VICENTE**
Province of **CAMRINES NORTE**



OFFICE OF THE BUILDING OFFICIAL

ELECTRICAL PERMIT

APPLICATION NO.

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EP 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 SAN VICENTE	ZIP CODE 4609	TELEPHONE NO
LOCATION OF CONSTRUCTION: STREET	LOT NO. BARANGAY	BLK NO. TCT NO.	TAX DEC. NO.	
CITY/ MUNICIPALITY OF SAN VICENTE				
SCOPE OF WORK				
<input type="checkbox"/> NEW INSTALLATION	<input type="checkbox"/> RECONNECTION OF SERVICE ENTRANCE	<input type="checkbox"/> RELOCATION OF SERVICE ENTRANCE		
<input type="checkbox"/> ANNUAL INSPECTION	<input type="checkbox"/> SEPARATION OF SERVICE ENTRANCE	<input type="checkbox"/> OTHERS (Specify) _____		
<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> UPGRADING OF SERVICE ENTRANCE			
SUMMARY OF ELECTRICAL LOADS/CAPACITIES APPLIED FOR				
TOTAL CONNECTED LOAD _____ kVA	TOTAL TRANSFORMER CAPACITY _____ kVA	TOTAL GENERATOR/UPS CAPACITY _____ kVA		

BOX 2 (TO BE ACCOMPLISHED IN PRINT BY THE DESIGN PROFESSIONAL)

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

BOX 3

SUPERVISOR / IN-CHARGE OF ELECTRICAL WORKS		
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER	<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER	<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN
Date _____ (Signed and Sealed Over Printed Name)		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	
Address		

BOX 4

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

BOX 5

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