



Republic of the Philippines
City/Municipality of _____
Province of _____

OFFICE OF THE BUILDING OFFICIAL

CERTIFICATE OF COMPLETION

DATE _____

This is to certify that the building/structure covered by Building Permit No. _____ issued on _____ has been constructed and completed under our supervision, conforms with the plans and specifications submitted and on file with the Office of the Building Official, and complies with the provisions of the National Building Code and Accessibility Law (BP Blg. 344).

NAME OF OWNER _____ (Last Name) _____ (Given) _____ (M.I.) _____

ADDRESS OF OWNER _____ ZIP CODE _____ TEL. NO. _____

LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ STREET _____ BARANGAY _____ CITY/MUNICIPALITY OF _____

USE OR CHARACTER OF OCCUPANCY _____ GROUP _____

	PLANNED	ACTUAL
DATE OF START OF CONSTRUCTION		
DATE OF COMPLETION		
TOTAL FLOOR AREA (Square Meters)		
NO. OF STOREY(S)		
NO. OF UNITS		

SUMMARY OF ACTUAL COSTS

- | | |
|---|---------|
| 1. TOTAL COST OF MATERIALS: | P _____ |
| 1.1. CEMENT (bags) _____ | |
| 1.2. LUMBER (bd. ft.) _____ | |
| 1.3. REINFORCING BARS (kg.) _____ | |
| 1.4. G.I. SHEETS (sheets) _____ | |
| 1.5. PREFAB STRUCTURAL STEEL (kg.) _____ | |
| 1.6. Other materials _____ | |
| 2. TOTAL COST OF DIRECT LABOR: | P _____ |
| This includes compensation whether by salary or contract for project architect/engineer down to laborers. | |
| 3. TOTAL COST OF EQUIPMENT UTILIZATION: | P _____ |
| 4. OTHER COSTS: | P _____ |
| This includes professional services fees, permits and other fees | |
| TOTAL COST OF BUILDING/STRUCTURE P _____ | |

FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION		IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT		
ARCHITECT OR CIVIL ENGINEER (Signed And Sealed Over Printed Name) Date _____		Contractor: PCAB Lic. No. _____ Validity _____ TIN _____		
PRC No. _____ PTR No. _____ Issued at _____ CTC No. _____		Address _____ Tel. No. _____ Date _____ AUTHORIZED MANAGING OFFICER (Signature Over Printed Name)		
Validity _____ Date Issued _____ TIN _____ Date Issued _____		CTC No. _____ Date Issued _____ Place Issued _____		
Date _____ OWNER/APPLICANT (Signature Over Printed Name)		CTC No _____ Date Issued _____ Place Issued _____		

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

BEFORE ME, at the City/Municipality of _____, on _____ personally appeared the persons whose signatures appear herein at the front and back of this page, 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 _____)

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS:

ARCHITECTURAL

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
IAPOA No.	O.R. No.	Date Issued:
PTR. No	Date Issued	
Issued at	TIN	

CIVIL / STRUCTURAL

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

ELECTRICAL

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

MECHANICAL

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

SANITARY

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

PLUMBING

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

ELECTRONICS

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

INTERIOR DESIGN

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

SUPERVISORS OF SPECIALTY WORKS:

ELECTRICAL WORKS

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

MECHANICAL WORKS

_____ (Signature Over Printed Name)		
Address		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	

SANITARY WORKS

_____ (Signature Over Printed Name)		
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PLUMBING WORKS

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ELECTRONICS WORKS

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INTERIOR DESIGN WORKS

_____ (Signature Over Printed Name)		
Address		
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Issued at	TIN	