



Republic of the Philippines
City of San Juan, Metro Manila
OFFICE OF THE BUILDING OFFICIAL



UNIFIED APPLICATION FORM FOR BUILDING PERMIT

☐ SIMPLE ☐ COMPLEX* ☐ HIGHLY TECHNICAL ☐ AMENDATORY

THIS APPLIES ALSO FOR: ☐ LOCATIONAL CLEARANCE ☐ FIRE SAFETY EVALUATION CLEARANCE

APPLICATION NUMBER:

BUILDING PERMIT NO.

DATE ISSUED:

BOX 1 (TO BE ACCOMPLISHED IN PRINT BY THE APPLICANT)

| | | | | | | | | | | | | | |
|---|--|-------------------|--|-------------------------------|--|------------------------------------|--|------------------------------------|--|-------------------------------|--|-------------|--|
| OWNER / APPLICANT | | LAST NAME | | FIRST NAME | | M.I. | | TIN | | DO NOT FILL-UP (PSA USE ONLY) | | | |
| FOR CONSTRUCTION OWNED BY AN ENTERPRISE | | FORM OF OWNERSHIP | | | | | | | | | | | |
| ADDRESS: NO., | | STREET, | | BARANGAY, | | CITY / MUNICIPALITY | | ZIP CODE | | | | CONTACT NO. | |
| LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ TCT NO. _____ CURRENT TAX DEC. NO. _____ | | | | | | | | | | | | | |
| STREET _____ BARANGAY _____ CITY / MUNICIPALITY OF _____ | | | | | | | | | | | | | |
| SCOPE OF WORK | | | | | | | | | | | | | |
| <div><input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> RENOVATION <input type="checkbox"/> RAISING</div> <div><input type="checkbox"/> ERECTION <input type="checkbox"/> CONVERSION <input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE</div> <div><input type="checkbox"/> ADDITION <input type="checkbox"/> REPAIR <input type="checkbox"/> LEGALIZATION OF EXISTING BUILDING</div> <div><input type="checkbox"/> ALTERATION <input type="checkbox"/> MOVING <input type="checkbox"/> OTHERS (Specify) _____</div> | | | | | | | | | | | | | |
| USE OR CHARACTER OF OCCUPANCY | | | | | | | | | | | | | |
| <div><input type="checkbox"/> GROUP A : RESIDENTIAL (DWELLINGS) <input type="checkbox"/> SINGLE <input type="checkbox"/> DUPLEX <input type="checkbox"/> RESIDENTIAL R-1, R-2 <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP B : RESIDENTIAL <input type="checkbox"/> HOTEL <input type="checkbox"/> MOTEL <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> DORMITORY <input type="checkbox"/> BOARDINGHOUSE, LODGING HOUSE <input type="checkbox"/> RESIDENTIAL R-3, R-4, R-5 <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP C : EDUCATIONAL & RECREATIONAL <input type="checkbox"/> SCHOOL BUILDING <input type="checkbox"/> SCHOOL AUDITORIUM, GYMNASIUM <input type="checkbox"/> CIVIC CENTER <input type="checkbox"/> CHURCH, MOSQUE, TEMPLE, CHAPEL <input type="checkbox"/> CLUBHOUSE <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP D : INSTITUTIONAL <input type="checkbox"/> HOSPITAL OR SIMILAR STRUCTURE <input type="checkbox"/> HOME FOR THE AGED <input type="checkbox"/> GOVERNMENT OFFICE <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP E : COMMERCIAL <input type="checkbox"/> BANK <input type="checkbox"/> STORE <input type="checkbox"/> SHOPPING CENTER / MALL <input type="checkbox"/> DRINKING / DINING ESTABLISHMENT <input type="checkbox"/> SHOP (i.e. DRESS SHOP, TAILORING, BARBERSHOP, etc.) <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP F : LIGHT INDUSTRIAL <input type="checkbox"/> FACTORY / PLANT (USING INCOMBUSTIBLE/ NON-EXPLOSIVE MATERIALS) <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP G : MEDIUM INDUSTRIAL <input type="checkbox"/> STORAGE / WAREHOUSE (FOR HAZARDOUS/ HIGHLY FLAMMABLE MATERIALS) <input type="checkbox"/> FACTORY (FOR HAZARDOUS/ HIGHLY FLAMMABLE MATERIALS) <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP H : ASSEMBLY (OCCUPANT LOAD LESS THAN 1,000) <input type="checkbox"/> THEATER, AUDITORIUM, CONVENTION HALL, GRANDSTAND/ BLEACHER <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP I : ASSEMBLY (OCCUPANT LOAD 1,000 OR MORE) <input type="checkbox"/> COLISEUM, SPORTS COMPLEX, CONVENTION CENTER AND SIMILAR STRUCTURE <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP J : (J-1) AGRICULTURAL <input type="checkbox"/> BARN, GRANARY, POULTRY HOUSE, PIGGERY, GRAIN MILL, GRAIN SILO <input type="checkbox"/> OTHERS _____</div> <div><input type="checkbox"/> GROUP J : (J-2) ACCESSORIES <input type="checkbox"/> PRIVATE CARPORT / GARAGE, TOWER, SWIMMING POOL, FENCE OVER 1.80m, STEEL / CONCRETE TANK <input type="checkbox"/> OTHERS _____</div> | | | | | | | | | | | | | |
| OCCUPANCY CLASSIFIED _____ | | | | TOTAL ESTIMATED COST: P _____ | | | | COST OF EQUIPMENT INSTALLED: _____ | | | | | |
| NUMBER OF UNITS _____ | | | | BUILDING _____ | | | | ELECTRICAL _____ | | | | | |
| NUMBER OF STOREY _____ | | | | ELECTRICAL _____ | | | | MECHANICAL _____ | | | | | |
| TOTAL FLOOR AREA _____ SQ. M. | | | | ELECTRONICS _____ | | | | P _____ | | | | | |
| LOT AREA _____ SQ. M. | | | | PLUMBING _____ | | | | P _____ | | | | | |
| PROPOSED DATE OF CONSTRUCTION: _____ | | | | | | EXPECTED DATE OF COMPLETION: _____ | | | | | | | |

BOX 2

| | | |
|---|-----------------|-------------------|
| FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS (REPRESENTING THE OWNER) | | |
| <div>ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name) Date _____</div> | Address _____ | |
| | PRC No. _____ | Validity _____ |
| | PTR No. _____ | Date Issued _____ |
| | Issued at _____ | TIN _____ |

BOX 3

| | | | |
|--|-------------------|--|---------------------------|
| APPLICANT: | | WITH MY CONSENT: LOT OWNER / AUTHORIZED REPRESENTATIVE | |
| <div>_____ (Signature Over Printed Name) Date _____</div> | | <div>_____ (Signature Over Printed Name) Date _____</div> | |
| Address _____ | | Address _____ | |
| Gov't Issued ID No. _____ | Date Issued _____ | Place Issued _____ | Gov't Issued ID No. _____ |
| Date Issued _____ | | Place Issued _____ | |

BOX 5

| | | | | | |
|---|--|--------------------------------------|--|--------------------|--|
| REPUBLIC OF THE PHILIPPINES) | | CITY/MUNICIPALITY OF _____) | | S.S | |
| BEFORE ME, at the City/Municipality of _____, on _____ personally appeared the following: | | | | | |
| APPLICANT | | Gov't Issued ID No. _____ | | Date Issued _____ | |
| LICENSED ARCHITECT OR CIVIL ENGINEER (Full-Time Inspector and Supervisor of Construction Works) | | Gov't Issued ID No. _____ | | Date Issued _____ | |
| Place Issued _____ | | Place Issued _____ | | Place Issued _____ | |
| whose signatures appear hereinabove, 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 _____) | | | |

| | BASIS OF ASSESSMENT | AMOUNT DUE | ASSESSED BY | OFFICIAL RECEIPT | |
|--|---------------------|------------|-------------|------------------|------|
| | | | | NUMBER | DATE |
| <input type="checkbox"/> FILING FEE | | | | | |
| <input type="checkbox"/> TREASURY | | | | | |
| <input type="checkbox"/> ASSESSOR | | | | | |
| <input type="checkbox"/> LOCATIONAL / ZONING OF LAND USE | | | | | |
| <input type="checkbox"/> LINE AND GRADE (Geodetic) | | | | | |
| <input type="checkbox"/> FENCING | | | | | |
| <input type="checkbox"/> EXCAVATION | | | | | |
| <input type="checkbox"/> BUILDING / ARCHITECTURAL | | | | | |
| <input type="checkbox"/> ELECTRICAL | | | | | |
| <input type="checkbox"/> MECHANICAL | | | | | |
| <input type="checkbox"/> PLUMBING AND SANITARY | | | | | |
| <input type="checkbox"/> ELECTRONICS | | | | | |
| <input type="checkbox"/> CENRO | | | | | |
| <input type="checkbox"/> SIGNAGES / BILLBOARD | | | | | |
| <input type="checkbox"/> CONTRACTOR'S PERMIT | | | | | |
| <input type="checkbox"/> FIRE CODE CONSTRUCTION TAX | | | | | |
| <input type="checkbox"/> SURCHARGES / ADMINISTRATIVE | | | | | |
| <input type="checkbox"/> PENALTIES | | | | | |
| <input type="checkbox"/> PROCESSING FEE | | | | | |
| <input type="checkbox"/> INSPECTION FEE | | | | | |
| <input type="checkbox"/> CERTIFICATE FEE | | | | | |
| TOTAL | | | | | |

TERMS AND CONDITIONS

1. The Owner/Permittee shall accomplish the prescribed Unified Application Form, with the assistance of the concerned design professional(s) and/or the Architect/Civil Engineer, hired/commissioned by the Owner/Permittee as full-time inspector/supervisor of the construction works, by filling up the necessary data/information required thereat.
2. The fully-accomplished prescribed Unified Application Form, duly notarized, shall be submitted to the concerned Office of the Building Official accompanied by the various applicable ancillary and accessory permits, plans and specifications signed and sealed by the corresponding design professionals who shall be responsible for the comprehensive and correctness of the plans in compliance to the National Building Code (PD 1096), its IRR and to all applicable referral codes and professional regulatory laws, together with the other documentary requirements pursuant to Section 302 of PD 1096 and its IRR.

ARCH. ALFREDO G. GARCIA

ACTING CITY BUILDING OFFICIAL