



CITY BUILDINGS AND ARCHITECTURE OFFICE

DPS-COMPOUND, BAGUIO CITY

PERMIT NO. : _____

DATE ISSUED: _____



BY AUTHORITY OF THE
CITY BUILDING OFFICIAL

OR. No.: _____

DATE: _____

Name of the Project: _____

Owner: _____

Location: _____

DESIGN PROFESSIONALS

PRC No.

Architect: _____

Civil Engineer: _____

Prof. Elect'l Engr.: _____

Prof. Mech'l Engr.: _____

Sanitary Engineer: _____

Master Plumber: _____

Electronics Engr.: _____

PROFESSIONALS INCHARGE OF FULL TIME INSPECTION AND SUPERVISION WORKS:

Architect/ Engineer: _____