

Republic of the Philippines
Municipality of Mambajao
OFFICE OF THE BUILDING OFFICIAL

DISTRICT/CITY/MUNICIPALITY

CERTIFICATE OF FINAL ELECTRICAL INSPECTION/COMPLETION

THIS IS TO CERTIFY THAT FINAL INSPECTION OF THE ELECTRICAL INSTALLATION HAD BEEN CONDUCTED ON THE BUILDING AND/OR PREMISES COVERED BY BUILDING PERMIT NO. _____ ISSUED ON _____ AND THE SAME WERE FOUND COMPLETED IN ACCORDANCE WITH THE APPROVED PLANS & SPECIFICATION ON FILE THE OFFICE OF THE BUILDING OFFICIALS AND IN ACCORDANCE WITH THE PHILIPPINE ELECTRICAL CODE PROVISIONS.

NAME OF OWNER/APPLICANT	LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS:	STREET	BARANGAY	CITY/MUNICIPALITY
LOCATION OF INSTALLATION :	STREET	BARANGAY	CITY/MUNICIPALITY
TYPE OF OCCUPANCY OR USE:			
<input type="checkbox"/> A. RESIDENTIAL DWELLING	<input type="checkbox"/> E. BUSINESS & MERCANTILE	<input type="checkbox"/> I. ASSEMBLY OCCUPANT LOAD 1000 OR MORE	
<input type="checkbox"/> B. RESIDENTIAL, HOTEL APARTMENT	<input type="checkbox"/> F. INDUSTRIAL	<input type="checkbox"/> J. ACCESSORY	
<input type="checkbox"/> C. EDUCATION & RECREATION	<input type="checkbox"/> G. STORAGE & HAZARDOUS	<input type="checkbox"/> K. OTHER (SPECIFY)	
<input type="checkbox"/> D. INSTITUTIONAL	<input type="checkbox"/> H. ASSEMBLY OTHER THAN GROUP I		
START OF INSTALLATIONS: _____		DATE OF COMPLETION: _____	
OUTLETS/DEVICES/EQUIPMENT			
NUMBER OF OUTLETS :		NUMBER OF EQUIPMENT/WIRING DEVICES	
<input type="checkbox"/> LIGHT	<input type="checkbox"/> SPO, COOKING UNIT	<input type="checkbox"/> TOGGLE SWITCH	<input type="checkbox"/> FA DETECTORS
<input type="checkbox"/> CONVENIENCE/RECEPTACLE	<input type="checkbox"/> SPO, WATER HEATER	<input type="checkbox"/> BELLS/BUZZERS	<input type="checkbox"/> OTHERS
<input type="checkbox"/> SPO, AIRCON	<input type="checkbox"/> SPO, WATER PUMP	<input type="checkbox"/> PUSH BUTTONS	(See Attached List)
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER	
		<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN (Not Exceeding 600 Volts & 500 KVA)	
NAME			
SIGNATURE		PRC REG. NO.	
ADDRESS		VALIDITY	
P.T.R. NO.	DATE ISSUED	PLACE ISSUED	
C.T.C. NO.	DATE ISSUED	TIN	
ELECTRICIAN CONTRACTOR (200-AMMPERE MAIN AND ABOVE)			
NAME		PCAB LICENSE. NO. (SPECIAL ELECTRICAL)	
		VALIDITY	
ADDRESS		TEL./FAX NO.	
TYPES OF INSTALLATION:			
<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> NEW	<input type="checkbox"/> REMODEL/ALTERATION	
TYPES OF WIRING :			
<input type="checkbox"/> OPEN WIRING	<input type="checkbox"/> CONDUITS	<input type="checkbox"/> CABLE	<input type="checkbox"/> ARMORED CABLE
<input type="checkbox"/> OTHERS _____			<input type="checkbox"/> RACEWAYS

INSPECTED BY :

RECOMMENDING APPROVAL :

APPROVED BY :

ELECTRICAL INSPECTORS
(Signature Over Printed Name)

ELECTRICAL ENGR. OF THE BLDG. OFFICE
(Signature Over Printed Name)

ENGR. REGALADO B. AGUILAR JR.
BUILDING OFFICIAL, OIC
(Signature Over Printed Name)

PRC REG. NO. & VALIDITY

PRC REG. NO. & VALIDITY

AMOUNT PAID _____

OFFICIAL RECEIPT NO. _____

DATE : _____

NUMBER OF STORIES _____	
ESTIMATED COST P _____	
ACTUAL COST :	
A) Materials (Total Cost) P	
1. Electrical wires	_____
2. Lighting outlets	_____
3. Convenience Outlets	_____
4. Switches	_____
Others (Specify)	_____
B) Other Cost _____	
This includes professional fees, permits and other fees.	
1. Load to be Connected:	
___ LIGHT	___ SPO, COOKING UNIT
___ CONVENIENCE/RECEPTACLE	___ SPO, WATER HEATER
___ SPO, AIRCON	___ SPO, WATER PUMP
___ TOGGLE SWITCH	___ FA DETECTORS
___ BELLS/BUZZERS	___ OTHER
___ PUSH BUTTON	(See Attached List)
2. Nature of Works :	
3. Type of Service :	
Voltage _____	Size of Wire _____ Phone _____
4. Remarks :	

I hereby certify that the above data and information are true and correct to the best of my knowledge and belief.

ELECTRICAL FEES	PEE/REE/RME _____
Fee P _____	ADDRESS _____
Surcharge P _____	PRC REG. NO. _____ VALIDITY _____
Total P _____	PTR NO. _____ TIN _____
Computed by :	CTC NO. _____
	DATE ISSUED _____
	PLACE ISSUED _____
_____ (Signature Over Printed Name)	
	LOAD _____
Nature of Work :	
Inspector _____	Contractor _____
Fee P _____	
Paid under Official Receipt No. _____	
Date : _____	Owner/Occupant _____

RECOMMENDING APPROVAL :

APPROVED BY :

ENGR. REGALADO B. AGUILAR JR.

ELECTRICAL ENGINEER OF THE BUILDING OFFICE

BUILDING OFFICIAL, OIC

(Signature Over Printed Name)

(Signature Over Printed Name)

PRC REG. NO. & VALIDITY

Note: Renewals or extension of this permit and/or final certificate of the electrical installation are subject to inspection and payment of corresponding fees in conformity with pertinent provisions of the "National Building Code" (P.D. 1096) and its implementing rules and regulations.