

OFFICE OF THE BUILDING OFFICIAL
CERTIFICATE OF COMPLETION

This is to certify that the construction of 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).

That the said building/structure is ready for final inspection for issuance of the "Certificate of Occupancy".

NAME OF OWNER: _____
 (Last Name) (Given Name) (Middle Name)

ADDRESS OF OWNER: _____

LOCATION OF CONSTRUCTION: _____

USE OR CHARACTER OF OCCUPANCY: _____ GROUP _____

	PLANNED	ACTUAL
DATE OF START OF CONSTRUCTION		
DATE OF COMPLETION		
TOTAL FLOOR AREA (square meters):		
NO. OF STOREYS:		
NO. OF UNITS:		

SUMMARY OF ACTUAL COST

1. TOTAL COST OF MATERIALS: Php _____

 1.1 CEMENT (bags) _____

 1.2 LUMBER (bdft) _____

 1.3 REINFORCING BARS (kgs.) _____

 1.4 NO. OF G.I. SHEETS _____

 1.5 PRE-FABRICATED STEEL (kgs.) _____

 1.6 Other Materials _____

2. TOTAL COST OF DIRECT LABOR
 This includes compensation whether by salary/contract for proj.arch./enr. down to laborers.

3. TOTAL COST OF EQUIPMENT UTILIZATION _____

4. OTHER COSTS _____
 This includes professional service fees, permits, and other fees.

TOTAL COST OF BUILDING/STRUCTURE: Php _____

FULL-TIME INSPECTOR/SUPERVISOR OF CONST PROJ.	IF CONSTRUCTION IS UNDERTAKEN BY CONTRACT	
		PCAB Lic.
		Class
	CONTRACTOR	TIN
ARCHITECT OR CIVIL ENGINEER Sign And Seal Over Printed Name Date _____	Address	
PRC No. _____ Validity _____		
PTR No. _____ Date Issued _____	NAME	
Issued at _____ TIN _____	Signature Over Printed Name	
CTC _____ Date _____ Place _____	CTC _____	Date _____ Place _____

CONFORME:

_____ Date _____ CTC No. _____
 OWNER/APPLICANT Date Issued: _____
 Signature Over Printed Name Place Issued: _____

REPUBLIC OF THE PHILIPPINES) S.S
 MUNICIPALITY OF DINGRAS)
 BEFORE ME, at the Municipality of DINGRAS, 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 No. _____

 NOTARY PUBLIC (Until _____)

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS

ARCHITECTURAL		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date:	Place:

CIVIL / STRUCTURAL		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

ELECTRICAL		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

MECHANICAL		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

SANITARY		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

PLUMBING		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

ELECTRONICS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

INTERIOR DESIGN		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

SUPERVISORS OF SPECIALTY WORKS

ELECTRICAL WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

MECHANICAL WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

SANITARY WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

PLUMBING WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

ELECTRONICS WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place

INTERIOR DESIGN WORKS		
Signature Over Printed Name		
Address		
PRC No.	Validity:	
CTC	Date	Place