

Republic of the Philippines
City of Imus
Province of Cavite
OFFICE OF THE BUILDING OFFICIAL
ARCHITECTURAL PERMIT

APPLICATION NO.

AP NO

BUILDING PERMIT NO.

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

OWNER/APPLICANT		LAST NAME		FIRST NAME		M.I.		TIN
FOR CONSTRUCTION OWNED BY AN ENTERPRISE				FORM OF OWNERSHIP		USE OR CHARACTER OF OCCUPANCY		
ADDRESS: NO.,		STREET,		BARANGAY,		CITY/MUNICIPALITY		ZIP CODE TELEPHONE NO
LOCATION OF CONSTRUCTION:		LOT NO. _____		BLK NO. _____		TCT NO. _____		TAX DEC. NO. _____
STREET _____		BARANGAY _____		CITY/ MUNICIPALITY OF _____				
SCOPE OF WORK								
<input type="checkbox"/> NEW CONSTRUCTION			<input type="checkbox"/> RENOVATION _____			<input type="checkbox"/> RAISING _____		
<input type="checkbox"/> ERECTION			<input type="checkbox"/> CONVERSION _____			<input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE _____		
<input type="checkbox"/> ADDITION			<input type="checkbox"/> REPAIR _____			<input type="checkbox"/> OTHERS (Specify) _____		
<input type="checkbox"/> ALTERATION			<input type="checkbox"/> MOVING _____					

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

1. ARCHITECTURAL FACILITIES AND OTHER FEATURES PURSUANT TO BATAS PAMBANSA BILANG 344, REQUIRING CERTAIN BUILDINGS, INSTITUTIONS, ESTABLISHMENTS AND PUBLIC UTILITIES TO INSTALL FACILITIES AND OTHER DEVICES.			
<input type="checkbox"/> STAIRS	<input type="checkbox"/> WASH ROOMS AND TOILETS	<input type="checkbox"/> SWITCHES, CONTROLS, BUZZERS	<input type="checkbox"/> DRINKING FOUNTAINS
<input type="checkbox"/> WALKWAYS	<input type="checkbox"/> LIFTS/ELEVATORS	<input type="checkbox"/> HANDRAILS	<input type="checkbox"/> PUBLIC TELEPHONES
<input type="checkbox"/> CORRIDORS	<input type="checkbox"/> RAMPS	<input type="checkbox"/> THRESHOLDS	<input type="checkbox"/> SEATING ACCOMMODATIONS
<input type="checkbox"/> DOORS, ENTRANCES & THRESHOLDS	<input type="checkbox"/> PARKING AREAS	<input type="checkbox"/> FLOOR FINISHES	<input type="checkbox"/> OTHERS (Specify) _____
2. PERCENTAGE OF SITE OCCUPANCY		3. CONFORMANCE TO FIRE CODE OF THE PHILIPPINES (P.D. 1185)	
PERCENTAGE OF BUILDING FOOTPRINT _____%		<input type="checkbox"/> NUMBER AND WIDTH OF EXIT DOORS	
PERCENTAGE OF IMPERVIOUS SURFACE AREA _____%		<input type="checkbox"/> FIRE WALLS	
PERCENTAGE OF UNPAVED SURFACE AREA _____%		<input type="checkbox"/> OTHERS (Specify) _____	
OTHERS (Specify) _____		<input type="checkbox"/> WIDTH OF CORRIDORS	
		<input type="checkbox"/> FIRE FIGHTING AND SAFETY FACILITIES	
		<input type="checkbox"/> DISTANCE TO FIRE EXITS	
		<input type="checkbox"/> SMOKE DETECTORS	
		<input type="checkbox"/> ACCESS TO PUBLIC STREET	
		<input type="checkbox"/> EMERGENCY LIGHTS	

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS	
_____ Date _____ ARCHITECT (Signed and Sealed Over Printed Name)	
Address	
IAPOA No.	Validity
PRC No.	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER		
_____ (Signature Over Printed Name) Date _____		
Address		
C.T.C. No.	Date Issued	Place Issued

BOX 4

SUPERVISOR / IN-CHARGE OF ARCHITECTURAL WORKS	
_____ Date _____ ARCHITECT (Signed and Sealed Over Printed Name)	
Address	
IAPOA No.	Validity
PRC No.	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 6

WITH MY CONSENT: LOT OWNER		
_____ (Signature Over Printed Name) Date _____		
Address		
C.T.C. No.	Date Issued	Place Issued

**TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION
DIVISION BOX 7**

RECEIVED BY	DATE
FIVE (5) SETS OF ARCHITECTURAL DOCUMENTS	
<input type="checkbox"/> 1. VICINITY MAP/LOCATION PLAN WITHIN A TWO-KILOMETER RADIUS <input type="checkbox"/> 2. SITE DEVELOPMENT PLAN <input type="checkbox"/> 3. PERSPECTIVE <input type="checkbox"/> 4. FLOOR PLANS <input type="checkbox"/> 5. ELEVATIONS, AT LEAST FOUR (4) <input type="checkbox"/> 6. SECTIONS, AT LEAST TWO (2) <input type="checkbox"/> 7. CEILING PLANS SHOWING LIGHTING FIXTURES AND DIFFUSERS	<input type="checkbox"/> 8. DETAILS OF RAMPS, PARKING FOR THE DISABLED, STAIRS, FIRE ESCAPES, CABINETS AND PARTITIONS <input type="checkbox"/> 9. SCHEDULE OF DOORS AND WINDOWS <input type="checkbox"/> 10. SCHEDULE OF FINISHES FOR FLOORS, CEILINGS AND WALLS <input type="checkbox"/> 11. ARCHITECTURAL INTERIOR <input type="checkbox"/> 12. SPECIFICATIONS <input type="checkbox"/> 13. COST ESTIMATE <input type="checkbox"/> 14. OTHERS (Specify) _____ _____

BOX 8

PROGRESS FLOW					
	IN		OUT		PROCESSED BY:
	DATE	TIME	DATE	TIME	
ARCHITECTURAL DRAWINGS					
SPECIFICATIONS					
OTHERS (Specify)					

BOX 9

ACTION TAKEN:

PERMIT IS HEREBY ISSUED SUBJECT TO THE FOLLOWING:

1. That under Article 1723 of the Civil Code of the Philippines, the architect (and engineer) who drew up the plans and specifications for the building/structure is responsible for damages if within fifteen (15) years from the completion of the building/structure, the same should collapse due to defect in the plans or specifications or defects in the ground. The engineer or architect who supervises the construction shall be solidarily liable with the contractor should the edifice collapse due to defect in the construction or the use of inferior materials.
2. That the proposed architectural works shall be in accordance with the architectural plans filed with this Office and in conformity with the latest Architectural Code of the Philippines, the National Building Code and its IRR.
3. That prior to any construction activity, a duly accomplished prescribed **"Notice of Construction"** shall be submitted to the Office of the Building Official.
4. That upon completion of the construction, the licensed full-time inspector and supervisor/in-charge of construction works shall submit the entry to the logbook duly signed and sealed to the building official including as-built plans and other documents, and shall also accomplish the Certificate of Completion stating that the architectural works conform to the provision of the Architectural Code, the National Building Code and its IRR.
5. That this permit is null and void unless accompanied by the building permit.

PERMIT ISSUED BY:

ENGR. ALVIN S. SAITANAN

OIC - BUILDING OFFICIAL

(Signature Over Printed Name)

Date _____