

Republic of the Philippines
 Province of Cagayan
 Municipality of Santa Teresita

OFFICE OF THE BUILDING OFFICIAL

SCAFFOLDING PERMIT

APPLICATION NO.

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SP NO

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BUILDING PERMIT NO.

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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 OF BAGUIO.					
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"/> DEMOLITION _____			
<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR _____	<input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE _____			
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> MOVING _____	<input type="checkbox"/> OTHERS (Specify) _____			

BOX 2

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

BOX 3

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

BOX 4

BUILDING OWNER		

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

BOX 5

WITH MY CONSENT: LOT OWNER		

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

BOX 6

APPLICANT (Signature Over Printed Name) Date _____		
CTC NO.	DATE ISSUED	PLACE ISSUED
TIN		

BOX 7 (TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION)

FEE PAID _____	OFFICIAL RECEIPT NO. _____
DATE PAID _____	DATE ISSUED _____

BOX 8 (TO BE ACCOMPLISHED BY THE BUILDING OFFICIAL)

ACTION TAKEN:

Permit is hereby issued/granted to _____
with postal address at _____ to
erect a SCAFFOLDING for _____
with a frontage of _____ () lineal meters at the premises of _____ for
the period of _____ () days inclusive from _____, ____ to _____, pursuant
to pertinent provisions of the "National Building Code" (PD 1096) and its Implementing Rules and Regulations and to the
following conditions:

1. That the owner and contractor shall be jointly responsible for the safety, protection, security and convenience of the general public and his/her personnel, third parties, the works, equipment and the like.
2. That the scaffolding shall not be erected on the roadway area nor shall it obstruct the free passage of pedestrians.
3. That surface drains and other utility fixtures or lines shall not be obstructed.
4. That this permit shall not serve as exemption from securing permits/written clearances from various government authorities exercising regulatory function affecting buildings and other related structures.

PERMIT ISSUED BY:

ENGR. LIEZEL S. UDAUNDO

BUILDING OFFICIAL

DATE: _____