



NBC FORM NO. A - 03

Municipality of Hagonoy
Province of Bulacan

OFFICE OF THE BUILDING OFFICIAL

ELECTRICAL PERMIT

APPLICATION NO.

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EP 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/ MUNICIPALITY OF _____			
SCOPE OF WORK							
<input type="checkbox"/> NEW INSTALLATION	<input type="checkbox"/> RECONNECTION OF SERVICE ENTRANCE		<input type="checkbox"/> RELOCATION OF SERVICE ENTRANCE				
<input type="checkbox"/> ANNUAL INSPECTION	<input type="checkbox"/> SEPARATION OF SERVICE ENTRANCE		<input type="checkbox"/> OTHERS (Specify) _____				
<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> UPGRADING OF SERVICE ENTRANCE		_____				
SUMMARY OF ELECTRICAL LOADS/CAPACITIES APPLIED FOR							
TOTAL CONNECTED LOAD		TOTAL TRANSFORMER CAPACITY		TOTAL GENERATOR/UPS CAPACITY			
_____ kVA		_____ kVA		_____ kVA			

BOX 2 (TO BE ACCOMPLISHED IN PRINT BY THE DESIGN PROFESSIONAL)

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

BOX 3

SUPERVISOR / IN-CHARGE OF ELECTRICAL WORKS		
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER	<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER	<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN
_____ Date _____ (Signed and Sealed Over Printed Name)		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	
Address		

BOX 4

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

BOX 5

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

