Republic of the Philippines
Department of Public Works & Highways
Pamahalaang Lungsod/Bayan ng Naga
Lalawigan ng Zamboanga Sibugay

TANGGAPAN NG PUNONG PANGGUSALI

(Office of the Building Official)

PROCESSING AND EVALUATION DIVISION

Mechanical Section

MECHANICAL PERMIT

APPLICATION NO. | MP 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 ZIPCODE | TELEPHONE NO.

LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ TCT NO. _____ TAX DEC. NO. _____

STREET _____ BARANGAY _____ CITY/MUNICIPALITY OF _____

SCOPE OF WORK

- ☐ NEW CONSTRUCTION
- ☐ ERECTION
- ☐ ADDITION
- ☐ ALTERATION
- ☐ RENOVATION _____
- ☐ CONVERSION _____
- ☐ REPAIR _____
- ☐ MOVING
- ☐ DEMOLITION _____
- ☐ ACCESSORY BUILDING/STRUCTURE _____
- ☐ OTHERS (Specify) _____

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

INSTALLATION AND OPERATION OF:

- ☐ BOILER
- ☐ PRESSURE VESSEL
- ☐ INTERNAL COMBUSTION ENGINE
- ☐ REFRIGERATION AND ICE MAKING
- ☐ WINDOW TYPE AIRCONDITIONING
- ☐ PACKAGED/SPLIT TYPE AIRCONDITIONING
- ☐ OTHERS (Specify) _____
- ☐ CENTRAL AIRCONDITIONING
- ☐ MECHANICAL VENTILLATION
- ☐ ESCALATOR
- ☐ MOVING SIDEWALK
- ☐ FREIGHT ELEVATOR
- ☐ PASSENGER ELEVATOR
- ☐ CABLE CAR
- ☐ DUMBWAITER
- ☐ PUMPS
- ☐ COMPRESSED AIR, VACUUM, INSTITUTIONAL and/or INDUSTRIAL GAS
- ☐ PNEUMATIC TUBES, CONVEYORS and/or MONORAILS
- ☐ FUNICULAR

PREPARED BY _____

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS

_____

PROFESSIONAL MECHANICAL ENGINEER

(Signed and Sealed Over Printed Name)

Address	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

SUPERVISOR OF MECHANICAL WORKS

☐ PROFESSIONAL MECHANICAL ENGINEER ☐ MECHANICAL ENGINEER

_____

(Signed and Sealed Over Printed Name)

Address	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER

_____

(Signature Over Printed Name)

Address		
C.T.C. No.	Date Issued	Place Issued

BOX 6

WITH MY CONSENT : **LOT OWNER**

_____

(Signature Over Printed Name)

Address		
C.T.C. No.	Date Issued	Place Issued