



Republic of the Philippines
CITY GOVERNMENT OF PASIG
OFFICE OF THE BUILDING OFFICIAL

Name of Owner : _____
Project : _____
Location : _____

CERTIFICATION

THIS IS TO CERTIFY that the above-stated project was constructed based on the conforming plans as reviewed and approved by the Office of the Building Official, this city.

To certify further that all corrections/alterations particularly with regards to setback/easement requirements, right-of-ways and sidewalk regulations as specified in the conforming plans were accordingly observed and complied with.

Further more, any improvement/s done by the owner after the issuance of Certificate of Occupancy/Use for the project inconsistent with the submitted As-Built Plans will be summarily demolished by the City Government without the need of going thru legal proceedings as authorized by the consent/conformity given by the owner after affixing his/her signature herein.

Issued this ____ day of _____, 20__ to attest to the veracity of the foregoing statements.

Inspected by:

Concurred by:

Building Inspector

Supervising Inspector

Noted by:

ARCH. RAUL S. SILVA
City Building Official

Conforme:

Owner



Republic of the Philippines
City / Municipality of _____

Province of _____

OFFICE OF THE BUILDING OFFICIAL

CERTIFICATE OF COMPLETION

DATE _____

This is to certify that 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).

NAME OF OWNER _____
(Last Name) (Given) (M.I.)

ADDRESS OF OWNER _____ ZIP CODE _____ TEL. NO. _____

LOCATION OF CONSTRUCTION: T.D. NO. _____ LOT NO. _____ BLK. NO. _____ STREET _____ BARANGAY _____ CITY OF PASIG

USE OR CHARACTER OF OCCUPANCY _____ GROUP _____

	PLANNED	ACTUAL
DATE OF START OF CONSTRUCTION		
DATE OF COMPLETION		
TOTAL FLOOR AREA (SQ. METERS)		
NO. OF STOREY(S)		
NO. OF UNITS		

SUMMARY OF ACTUAL COSTS:

1. TOTAL COST OF MATERIALS: P _____
 - 1.1 CEMENT (bags) _____
 - 1.2 LUMBER (bd. ft.) _____
 - 1.3 REINFORCING BARS (Kg.) _____
 - 1.4 G.I. SHEETS (sheets) _____
 - 1.5 PREFAB STRUCTURAL STEEL (Kg.) _____
 - 1.6 Other materials _____
 2. TOTAL COST OF DIRECT LABOR: P _____
This includes compensation whether by salary or contract for project architect / engineer down to laborers
 3. TOTAL COST OF EQUIPMENT UTILIZATION: P _____
 4. OTHER COSTS: P _____
This includes professional services fees, permits and other fees
- TOTAL COST OF BUILDING / STRUCTURE' P _____**

FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION				IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT		
_____ ARCHITECT OR CIVIL ENGINEER (Signed And Sealed Over Printed Name) Date _____				Contractor:		PCAB Lic. No.
						Validity
				Address		Tel. No.
PRC No.		Validity		_____ Date _____ AUTHORIZED MANAGING OFFICER (Signature Over Printed Name)		
PTR No.		Date Issued				
Issued at		TIN				
CTC No.	Date Issued	Issued at	CTC No.	Date Issued	Place Issued	
CONFORME: _____ Date _____ OWNER / APPLICANT (Signature Over Printed Name)				CTC No.		
				Date Issued		
				Place Issued		