



Republic of the Philippines
Municipality of BARAS
Province of RIZAL
OFFICE OF THE BUILDING OFFICIAL



UNIFIED APPLICATION FOR BUILDING PERMIT

☐ SIMPLE ☐ COMPLEX
☐ NEW ☐ RENEW ☐ AMENDATORY
☐ LOCATIONAL CLEARANCE ☐ FIRE S

THIS APPLIES ALSO FOR :

[] FIRE SAFETY EVALUATION CLEARANCE

APPLICATION NO.

AREA NO.

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

DO NOT FILL UP (NSO USE ONLY)

OWNER/APPLICANT:	LAST NAME:	FIRST NAME:	M.I.:	TIN:
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FOR CONSTRUCTION OWNED BY AN ENTERPRISE	FORM OF OWNERSHIP:
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ADDRESS NO.:	STREET:	BARANGAY:	MUNICIPALITY OF:	ZIP CODE:	CONTACT NO.:
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LOCATION OF CONSTRUCTION:

TAX DEC NO.:

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	

USE OR CHARACTER OF OCCUPANCY:		
<input type="checkbox"/> GROUP A: RESIDENTIAL DWELLINGS <input type="checkbox"/> SINGLE <input type="checkbox"/> DUPLEX <input type="checkbox"/> RESIDENTIAL R-1, R-2 <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP E: COMMERCIAL <input type="checkbox"/> BANK <input type="checkbox"/> STORE <input type="checkbox"/> SHOPPING CENTER/MALL <input type="checkbox"/> DRINKING/DINING ESTABLISHMENT <input type="checkbox"/> SHOP (i.e. DRESS SHOP, TAILORING, BARBERSHOP, ETC) <input type="checkbox"/> <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP H: ASSEMBLY (OCCUPANT LOAD LESS THAN 1,000) <input type="checkbox"/> THEATER, AUDITORIUM CONVENTION HALL, GRAND STAND/BLEACHER <input type="checkbox"/> OTHERS _____
<input type="checkbox"/> GROUP B: RESIDENTIAL <input type="checkbox"/> HOTEL <input type="checkbox"/> MOTEL <input type="checkbox"/> TOWN HOUSE <input type="checkbox"/> DORMITORY <input type="checkbox"/> BOARDING HOUSE/LODGING HOUSE <input type="checkbox"/> RESIDENTIAL R-3, R-4, R-5 <input type="checkbox"/> <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP F: LIGHT INDUSTRIAL <input type="checkbox"/> FACTORY/PLANT (USING INCOMBUSTIBLE/NON EXPLOSIVE MATERIAL) <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP I: ASSEMBLY (OCCUPANT LOAD 1,000 OR MORE) <input type="checkbox"/> COLISEUM SPORTS COMPLEX CONVENTION CENTER AND SIMILAR STRUCTURE <input type="checkbox"/> OTHERS _____
<input type="checkbox"/> GROUP C: EDUCATIONAL RECREATIONAL <input type="checkbox"/> SCHOOL BUILDING <input type="checkbox"/> SCHOOL AUDITORIUM, GYMNASIUM <input type="checkbox"/> CIVIC CENTER <input type="checkbox"/> CHURCH, MOSQUE, TEMPLE, CHAPEL <input type="checkbox"/> CLUB HOUSE <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP G: MEDIUM INDUSTRIAL <input type="checkbox"/> STORAGE / WAREHOUSE (FOR HAZARDOUS/HIGHLY FLAMMABLE MATERIALS) <input type="checkbox"/> FACTORY (FOR HAZARDOUS/ HIGHLY FLAMMABLE MATERIALS) <input type="checkbox"/> OTHERS _____	<input type="checkbox"/> GROUP J: (J-1) AGRICULTURAL <input type="checkbox"/> BARN, GRANARY, POULTRY HOUSE, PIGGERY, GRAIN MILL, GRAIN SILO <input type="checkbox"/> OTHERS _____
<input type="checkbox"/> GROUP D: INSTITUTIONAL <input type="checkbox"/> HOSPITAL OR SIMILAR STRUCTURE <input type="checkbox"/> HOME FOR THE AGED <input type="checkbox"/> GOVERNMENT OFFICE <input type="checkbox"/> OTHERS _____		<input type="checkbox"/> GROUP J: (J-2) ACCESSORIES <input type="checkbox"/> PRIVATE CARPORT/ GARAGE, TOWER, SWIMMING POOL, FENCE OVER 1.80m, STEEL / CONCRETE TANK <input type="checkbox"/> OTHERS _____

OCCUPANCY CLASSIFIED:	TOTAL ESTIMATED COST:	COST OF EQUIPMENT INSTALLED:
NUMBER OF UNITS:	BUILDING:	P
NUMBER OF STOREY:	ELECTRICAL:	P
TOTAL FLOOR AREA (SQ.M.):	MECHANICAL:	P
LOT AREA:	ELECTRONICS:	P
PROPOSED DATE OF CONSTRUCTION:	PLUMBING:	P

BOX 2

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS (REPRESENTING THE OWNER)

<div>ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name) Date: _____</div>	Address	
	PRC. No.:	Validity:
	PTR. No.:	Date Issued:
	Issued at:	TIN:

BOX 3

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

BOX 5

REPUBLIC OF THE PHILIPPINES)
MUNICIPALITY OF JALA JALA, RIZAL)S.S

BEFORE ME, at the Municipality of _____ on _____ personally appeared the following:

APPLICANT	C.T.C No.	Date Issued	Place Issued
LICENSED ARCHITECT OR CIVIL ENGINEER (Full-Time Inspector and Supervisor of Fencing Works)	C.T.C No.	Date Issued	Place Issued

whose signatures appear herein above known to me to be the same persons who executed this standard prescribed form and acknowledged to me that the same their free and voluntary act and deed.

WITNESS MY HAND AND SEAL on the date and place above written.

Doc. No. _____
Page No. _____
Book No. _____
Series Of. _____

NOTARY PUBLIC (Until
December)

Copy 1: Owner

Copy 2: OBO

Copy 3: BFP

Copy 4: Philippine Statistics Authority

ASSESSED FEES	ACCOUNT	BASIS OF ASSESSMENT	AMOUNT DUE	ASSESSED BY
FOR ZONING (ZONING ADMINISTRATOR):				
<input type="checkbox"/> LOCATIONAL / ZONING OF LAND				
FOR BUILDING / STRUCTURE (OBO):				
<input type="checkbox"/> FILING FEE				
<input type="checkbox"/> LINE AND GRADE (Geodetic)				
<input type="checkbox"/> FENCING				
<input type="checkbox"/> ARCHITECTURAL				
<input type="checkbox"/> CIVIL / STRUCTURAL				
<input type="checkbox"/> ELECTRICAL				
<input type="checkbox"/> MECHANICAL				
<input type="checkbox"/> SANITARY				
<input type="checkbox"/> PLUMBING				
<input type="checkbox"/> ELECTRONICS				
<input type="checkbox"/> INTERIOR				
<input type="checkbox"/> SURCHARGES				
<input type="checkbox"/> PENALTIES				
FOR FIRE SAFETY (BFP):				
<input type="checkbox"/> FIRE CODE CONSTRUCTION TAX				
<input type="checkbox"/> HOTWORKS				
TOTAL				

1. The Owner/Applicant shall accomplish the prescribed Application Form, with the assistance of the concerned design professional/s and/or the Architect/Civil Engineer, hired/commissioned by him/her as full-time inspector/supervisor of the construction works, by filling up the necessary data / information required thereat.
2. The fully accomplished prescribed Application Form, duly notarized, shall be submitted to the concerned Office of the Building Official, accompanied by the various applicable ancillary and accessory permits, plans and specifications signed and sealed by the corresponding design professionals who shall be responsible for the comprehensive and correctness of the plans in compliance to the National Building Code of the Philippines (PD 1096), its Revised IRR and all applicable referral codes and professional regulatory laws, together with the other documentary requirements pursuant to Section 302 of PD 1096 and its Revised IRR.

I have read this form, understood its contents and consent to the processing of my personal data. I understand that my consent does not preclude the existence of other criteria for lawful processing of personal data, and does not waive any of my rights under the Data Privacy Act of 2012 and other applicable laws.

SIGNATURE OVER PRINTED NAME OF OWNER/APPLICANT