



Republic of the Philippines
Municipality of Pantabangan
Province of Nueva Ecija



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 **3124** TEL. NO. _____

LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ STREET _____ BARANGAY _____ CITY/MUNICIPALITY OF **PANTABANGAN**

USE OR CHARACTER OF OCCUPANCY _____ GROUP _____

	PLANNED	ACTUAL
DATE OF START OF CONSTRUCTION		
DATE OF COMPLETION		
TOTAL FLOOR AREA (Square 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
					TIN
			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:			
_____		CTC No	
_____		Date Issued	
_____		Place Issued	

REPUBLIC OF THE PHILIPPINES

CITY/MUNICIPALITY OF _____) S.S

BEFORE ME, at the City/Municipality of _____, on _____ personally appeared the persons whose signatures appear herein at the front and back of this page, known to me to be the same persons who executed this standard prescribed form and acknowledged to me that the same is 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 _____

NOTE: COPY TO BE FURNISHED THE NSO

NOTARY PUBLIC (Until December _____)

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS:

ARCHITECTURAL	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
IAPOA No.	O.R. No. Date Issued:
PTR. No	Date Issued
Issued at	TIN

ELECTRICAL	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

SANITARY	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

ELECTRONICS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

CIVIL / STRUCTURAL	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

MECHANICAL	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

PLUMBING	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

INTERIOR DESIGN	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

SUPERVISORS OF SPECIALTY WORKS:

ELECTRICAL WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

SANITARY WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

ELECTRONICS WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

MECHANICAL WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

PLUMBING WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

INTERIOR DESIGN WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN