



OFFICE OF THE BUILDING OFFICIAL

# MECHANICAL PERMIT

Application No.

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MP 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			FORM OF OWNERSHIP		USE OR CHARACTER OF OCCUPANCY			
BY AN ENTERPRISE								
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 CONSTRUCTION		<input type="checkbox"/>	RENOVATION		<input type="checkbox"/>	RAISING	
<input type="checkbox"/>	ERECTION		<input type="checkbox"/>	CONVERSION		<input type="checkbox"/>	DEMOLITION	
<input type="checkbox"/>	ADDITION		<input type="checkbox"/>	REPAIR		<input type="checkbox"/>	ACCESSORY BUILDING/ STRUCTURE	
<input type="checkbox"/>	ALTERATION		<input type="checkbox"/>	MOVING		<input type="checkbox"/>	OTHERS (Specify) _____	

Box 2 (To be accomplished by the Design Professional)

INSTALLATION AND OPERATION OF:					
<input type="checkbox"/>	BOILER	<input type="checkbox"/>	CENTRAL AIRCONDITIONING	<input type="checkbox"/>	DUMB WAITER
<input type="checkbox"/>	PRESSURE VESSEL	<input type="checkbox"/>	MECHANICAL VENTILLATION	<input type="checkbox"/>	PUMPS
<input type="checkbox"/>	INTERNAL COMBUSTION ENGINE	<input type="checkbox"/>	ESCALATOR	<input type="checkbox"/>	COMPRESSED AIR, VACUUM, INSTITUTIONAL AND/ INDUSTRIAL GAS
<input type="checkbox"/>	REFRIGERATION MAKING	<input type="checkbox"/>	MOVING SIDEWALK	<input type="checkbox"/>	PNEUMATIC TUBES, CONVEYORS AND/OR MONORAILS
<input type="checkbox"/>	WINDOW TYPE AIRCONDITIONING	<input type="checkbox"/>	FREIGHT ELEVATOR	<input type="checkbox"/>	FUNICULAR
<input type="checkbox"/>	PACKAGED/SPLIT TYPE AIRCONDITIONING	<input type="checkbox"/>	PASSENGER ELEVATOR		
<input type="checkbox"/>	OTHERS (Specify) _____	<input type="checkbox"/>	CABLE CAR		
PREPARED BY _____					

Box 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS	
_____ <b>PROFESSIONAL MECHANICAL ENGINEER</b> (Signed and Sealed over Printed Name) Date _____	
Address	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

Box 4

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

Box 5

Building Owner		
_____ (Signature Over Printed Name) Date _____		
Address		
CTC No.	Date Issued	Place Issued

Box 6

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

TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION

Box 6

RECEIVED BY	DATE
<b>FIVE (5) SETS OF MECHANICAL DOCUMENTS</b>	
<input type="checkbox"/> MECHANICAL PLANS AND SPECIFICATIONS	<input type="checkbox"/> COST ESTIMATES
<input type="checkbox"/> BILL OF MATERIAL	<input type="checkbox"/> OTHERS (Specify) _____

Box 7

PROGRESS FLOW					
	IN		OUT		PROCESSED BY:
	DATE	TIME	DATE	TIME	
MECHANICAL					<b>CARIDAD J. MANIPON</b> Chief, Building Code Section
OTHERS (Specify)					

Box 9

**ACTION TAKEN**

PERMIT IS HEREBY ISSUED SUBJECT TO THE FOLLOWING:

1. That the proposed mechanical works shall be in accordance with the mechanical plans filed with this Office and in conformity with the provisions of the latest Philippine Mechanical Codes, the National Building Code and its IRR.
2. That prior to any mechanical installation, a duly accomplished prescribed "Notice of Construction" shall be submitted to the Office of the Building Official.
3. That upon completion of the mechanical works, the licensed supervisor/in-charge shall submit the entry to the logbook duly signed and sealed to the Building Official, including as-built plans and other documents and shall also accomplish the Certificate of Completion stating that the mechanical works conform to the provisions of the Philippine Mechanical Code, the National Building Code and its IRR.
4. That this permit is null and void unless accompanied by the building permit.
5. That a Certificate of Operation shall be issued for the continuous use of mechanical installations.

PERMIT ISSUED BY:

**MACARIO A. SEGUNDO JR.**  
 City Engineer/Building Official  
 Date \_\_\_\_\_