

Republic of the Philippines
 City OF Imus
 Province of Cavite

OFFICE OF THE BUILDING OFFICIAL

FENCING PERMIT

APPLICATION NO.

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FP NO.

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BUILDING PERMIT NO.

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

OWNER/APPLICANT	LAST NAME	FIRST NAME	M.I.	TIN	
FOR CONSTRUCTION OWNED BY AN ENTERPRISE		FORM OF OWNERSHIP			
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"/> REPAIR _____	<input type="checkbox"/> OTHERS (Specify) _____			
<input type="checkbox"/> ERECTION	<input type="checkbox"/> DEMOLITION _____	_____			
<input type="checkbox"/> ADDITION	_____				

BOX 2

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS	
_____ Date _____	
ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name)	
Address _____	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 3

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS	
_____ Date _____	
ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name)	
Address _____	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 4 (TO BE ACCOMPLISHED BY THE APPLICANT)

APPLICANT:	WITH MY CONSENT: LOT OWNER	
_____	_____	
(Signature Over Printed Name)	(Signature Over Printed Name)	
Date _____	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) S.S
 CITY/MUNICIPALITY OF _____)
 BEFORE ME, at the City/Municipality of _____, on _____ personally
 appeared the following:

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

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 is their free and voluntary act and deed.
 WITHNESS MY HAND AND SEAL on the date and place above written.

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

NOTARY PUBLIC (Until December _____)