

Republic of the Philippines
 City/ Municipality of _____
 Province of _____
OFFICE OF THE BUILDING OFFICIAL

CERTIFICATION OF COMPLETION

DATE _____	
<p>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 the file with the office of the Building Official, and complies with the provisions of the National Building Code and Accessibility Law (BP Blg.344).</p>	
NAME OF OWNER _____	
(Last Name)	(Given)
ADDRESS OF OWNER _____	
ZIP CODE	TEL..NO. _____
LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO: _____ STREET _____ BARANGAY _____ CITY/MUNICIPALITY OF _____	
USER OR CHARACTER OF OCCUPANCY _____ GROUP _____	
	PLANNED
	ACTUAL
DATE OF START OF CONSTRUCTION	
DATE OF COMPLETION	
TOTAL FLOOR AREA(Square Meters)	
NO. OF STORY (S)	
NO. OF UNITS	
<p>SUMMARY OF ACTUAL COSTS:</p> <p>1. TOTAL COST OF MATERIALS: P _____</p> <p>1.1 CEMENT (bags) _____</p> <p>1.2 LUMBER (bd. Ft.) _____</p> <p>1.3 REINFORCING BARS (kg.) _____</p> <p>1.4 G.I. SHEETS (sheets) _____</p> <p>1.5 PREFAB STRUCTURAL STEEL (kg) _____</p> <p>1.6 Other materials _____</p> <p>2. TOTAL COST OF DIRECT LABOR: P _____</p> <p>This includes compensation whether by salary or contract for project architect/engineer down to laborers.</p> <p>3. TOTAL COST OF EQUIPMENT UTILIZATION.</p> <p>4. OTHER COSTS:</p> <p>This includes professional services fees, permits and other fees</p> <p style="text-align: center;">TOTAL COST OF BUILDING/STRUCTURE P _____</p>	
FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION	
ARCHITECT OR CIVIL ENGINEER (Signed Sealed Over Printed Name) Date _____	
PRC No. _____	Validity _____
PTR No. _____	Date Issued _____
Issued at _____	TIN] _____
CTC No. _____	Date Issued _____
	Issued at _____
IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT	
Contractor _____	
PCAB Lic. No. _____	
Validity _____	
TIN _____	
Address _____	
Tel. No. _____	
AUTHORIZED MANAGING OFFICER (Signature Over Printed Name) Date _____	
CTC No. _____	Date Issued _____
	Place Issued _____
CONFORME:	
_____ Date _____ OWNER/APPLICANT (Signature Over Printed Name)	
REPUBLIC OF THE PHILIPPINES) S.S	
CITY/MUNICIPALITY OF _____)	
BEFORE ME, at the City/Municipality of _____, on _____ personally appeared	
The persons whose signature appear herein at the front and back of this page, known to be to be the same persons who executed this standard prescribed form and acknowledge 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 _____	
NOTARY PUBLIC (Until December _____)	

NOTE: COPY TO BE FURNISHED THE NSO

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS

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

CIVIL/STRUCTURAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

ELECTRICAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

MECHANICAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

SANITARY	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

PLUMBING	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

ELECTRONICS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

INTERIOR DESIGN	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

SUPERVISIONS OF SPECIALTY WORKS:

ELECTRICAL WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

MECHANICAL WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

SANITARY WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

PLUMBING WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
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ELECTRONICS WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN

INTERIOR DESIGN WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
IAPOA No.	O.R. No.
PTR No.	Date Issued
Issued at	TIN