Republic of the Philippines
Province of Albay
City of Tabaco

OFFICE OF THE LOCAL 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__**4511**_____TEL NO._____

LOCATION OF CONSTRUCTION:LOT NO._____BLK. NO._____STREET_____BARANGAY _____**CITY OF TABACO**

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 wether by salary or contract by 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	
_____			Contractor:	PCAB Lic. No.
ARCHITECT OR CIVIL ENGINEER				Validity
(Signed And Sealed Over Printed Name)				TIN
Date_____			Address	Tel No.
PRC No.	Validity		_____Date_____	
PTR No.	Date Issued		**AUTHORIZED MANAGING OFFICER**	
Issued at	TIN		(Signature Over Printed Name)	
CTC no.	Date Issued	Issued at	CTC No.	Date Issued / Place Issued

CONFORME:

_____ Date_____
OWNER/APPLICANT
(Signature Over Printed Name)

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 _____

_____
NOTARY PUBLIC (Until December_____)

BUILDING ARCHITECT'S OFFICE
TABACO CITY
PHILIPPINES

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS:

ARCHITECTURAL	
_____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

ELECTRICAL	
_____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

SANITARY	
_____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

ELECTRONICS	
_____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

SUPERVISOR OF SPECIALTY WORKS:

ELECTRICAL 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

SANITARY 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
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INTERIOR DESIGN WORKS	
_____Date_____ (Signature Over Printed Name)	
Address	
PRC No.	Validity
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TABACO CITY PHILIPPINES