

Republic of the Philippines
MUNICIPALITY OF MAGALANG
Province of Pampanga
OFFICE OF THE BUILDING OFFICIAL

C E R T I F I C A T E O F C O M P L E T I O N

DATE

This is to certify that the construction of the building/structure covered by Building Permit No. _____ issued on _____ has been constructed and completed under our supervision, conforms with the approved plans and specifications submitted and on file with the Office of the Building Official and complies with the provisions of the National Building Code (P.D.1096) and Accessibility Law (BP Blg. 344):

Name of Owner _____
(Last Name) (Given Name) (Middle Initial)

Address of Owner _____ Zip Code _____ Tel. No.: _____

Location of Construction: LOT. No. _____ BLK. No. _____ STREET _____ BARANGAY _____,
MAGALANG, PAMPANGA

Use or Character of Occupancy _____ Group _____

	PLANNED	ACTUAL
DATE OF START OF CONSTRUCTION		
DATE OF COMPLETION		
TOTAL FLOOR AREA (Square Meters)		
NUMBER OF STOREYS		
NUMBER OF UNITS		

SUMMARY OF ACTUAL COSTS

1. TOTAL COST OF MATERIALS: Php _____
 - 1.1 Cement (Bags) : _____
 - 1.2 Lumber (Bd. Ft.) : _____
 - 1.3 Reinforcing Bars (kg.) : _____
 - 1.4 G.I. Sheets (Ln. Ft.) : _____
 - 1.5 Pre-Fab. Structural Steel (kg.): _____
 - 1.6 Other Materials : _____
 2. TOTAL COST OF DIRECT LABOR: Php _____
This includes compensation whether by salary or contract for project architect/engineer down to laborers.
 3. TOTAL COST OF EQUIPMENT UTILIZATION Php _____
 4. OTHER COST Php _____
This includes professional services fees, permits and other fees.
- TOTAL COST OF BUILDING/STRUCTURE** Php _____

FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION			IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT		
_____ ARCHITECT OR CIVIL ENGINEER (Signed and Sealed over Printed Name) Date: _____			Name of Contractor:		PCAB License No.:
					Validity:
					TIN
			Address:		Tel. No.:
PRC No.:	Validity:		_____ AUTHORIZED MANAGING OFFICER (Signature over Printed Name)		
PTR No.	Date Issued:				
Issued At:	TIN				
CTC NO.	Date Issued	Issued at	CTC NO.	Date Issued	Issued at
CONFORME: _____ DATE _____ OWNER/APPLICANT (Signature Over Printed Name)				CTC No.	
				Date Issued	Issued at

REPUBLIC OF THE PHILIPPINES)
City/Municipality of _____)

BEFORE ME, at the City/Municipality of _____ on _____ personally appeared the persons whose signatures appear herein at the front and at the back of this page, known to me 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 place and date above written.

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

Notary Public (Until December _____)

Name of Owner/Applicant: _____
 Location of Construction: _____, MAGALANG, PAMPANGA
 Use or Character of Occupancy _____ Group _____

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

SUPERVISORS 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)	
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PLUMBING WORKS	
_____ Date _____ (Signature Over Printed Name)	
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PRC NO.	Validity
PTR NO.	Date issued
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ELECTRONICS WORKS	
_____ Date _____ (Signature Over Printed Name)	
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PTR NO.	Date issued
Issued at:	TIN

INTERIOR DESIGN WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC NO.	Validity
PTR NO.	Date issued
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