

**TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION**

**BOX 7**

|   |   |
|---|---|
| RECEIVED BY _____   | DATE _____  |
| <b>FIVE (5) SETS OF ARCHITECTURAL DOCUMENTS</b>   |   |
| <input type="checkbox"/> 1. VICINITY MAP/LOCATION PLAN WITHIN A TWO-KILOMETER RADIUS<br><input type="checkbox"/> 2. SITE DEVELOPMENT PLAN<br><input type="checkbox"/> 3. PERSPECTIVE<br><input type="checkbox"/> 4. FLOOR PLANS<br><input type="checkbox"/> 5. ELEVATIONS, AT LEAST FOUR (4)<br><input type="checkbox"/> 6. SECTIONS, AT LEAST TWO (2)<br><input type="checkbox"/> 7. CEILING PLANS SHOWING LIGHTING FIXTURES AND DIFFUSERS | <input type="checkbox"/> 8. DETAILS OF RAMPS, PARKING FOR THE DISABLED, STAIRS, FIRE ESCAPES, CABINETS AND PARTITIONS<br><input type="checkbox"/> 9. SCHEDULE OF DOORS AND WINDOWS<br><input type="checkbox"/> 10. SCHEDULE OF FINISHES FOR FLOORS, CEILINGS AND WALLS<br><input type="checkbox"/> 11. ARCHITECTURAL INTERIOR<br><input type="checkbox"/> 12. SPECIFICATIONS<br><input type="checkbox"/> 13. COST ESTIMATE<br><input type="checkbox"/> 14. OTHERS (Specify)<br>_____<br>_____ |

**BOX 8**

| <b>PROGRESS FLOW</b>   |      |      |      |      |               |
|------------------------|------|------|------|------|---------------|
|                        | IN   |      | OUT  |      | PROCESSED BY: |
|                        | DATE | TIME | DATE | TIME |               |
| ARCHITECTURAL DRAWINGS |      |      |      |      |               |
| SPECIFICATIONS         |      |      |      |      |               |
| OTHERS (Specify)       |      |      |      |      |               |
|                        |      |      |      |      |               |

**BOX 9**

**ACTION TAKEN:**

**PERMIT IS HEREBY ISSUED SUBJECT TO THE FOLLOWING:**

1. That under Article 1723 of the Civil Code of the Philippines, the architect (and engineer) who drew up the plans and specifications for the building/structure is responsible for damages if within fifteen (15) years from the completion of the building/structure, the same should collapse due to defect in the plans or specifications or defects in the ground. The engineer or architect who supervises the construction shall be solidarily liable with the contractor should the edifice collapse due to defect in the construction or the use of inferior materials.
2. That the proposed architectural works shall be in accordance with the architectural plans filed with this Office and in conformity with the latest Architectural Code of the Philippines, the National Building Code and its IRR.
3. That prior to any construction activity, a duly accomplished prescribed **“Notice of Construction”** shall be submitted to the Office of the Building Official.
4. That upon completion of the construction, the licensed full-time inspector and supervisor/in-charge of construction works 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 architectural works conform to the provision of the Architectural Code, the National Building Code and its IRR.
5. That this permit is null and void unless accompanied by the building permit.

**PERMIT ISSUED BY:**

**ENGR. ROLLY E. TAGALICUD**

---

BUILDING OFFICIAL/OIC-Municipal Engineer  
 (Signature Over Printed Name)  
 Date \_\_\_\_\_



Republic of the Philippines  
Municipality of **ROSALES**  
Province of PANGASINAN  
**OFFICE OF THE BUILDING OFFICIAL**

# ARCHITECTURAL PERMIT

APPLICATION NO.

|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|

AP NO

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

BUILDING PERMIT NO.

|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|

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

|  |   |   |                   |                             |  |                               |              |
|--|---|---|-------------------|-----------------------------|--|-------------------------------|--------------|
| OWNER/APPLICANT                            |   | LAST NAME   |                   | FIRST NAME                  |  | M.I.                          | TIN          |
| FOR CONSTRUCTION OWNED<br>BY AN ENTERPRISE |   |   | FORM OF OWNERSHIP |                             |  | USE OR CHARACTER OF OCCUPANCY |              |
| 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 _____ |  |                               |              |
| <b>SCOPE OF WORK</b>                       |   |   |                   |                             |  |                               |              |
| <input type="checkbox"/> NEW CONSTRUCTION  | <input type="checkbox"/> RENOVATION _____ | <input type="checkbox"/> RAISING _____                      |                   |                             |  |                               |              |
| <input type="checkbox"/> ERECTION          | <input type="checkbox"/> CONVERSION _____ | <input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE _____ |                   |                             |  |                               |              |
| <input type="checkbox"/> ADDITION          | <input type="checkbox"/> REPAIR _____     | <input type="checkbox"/> OTHERS (Specify) _____             |                   |                             |  |                               |              |
| <input type="checkbox"/> ALTERATION        | <input type="checkbox"/> MOVING _____     |   |                   |                             |  |                               |              |

**BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)**

**1. ARCHITECTURAL FACILITIES AND OTHER FEATURES PURSUANT TO BATAS PAMBANSA BILANG 344, REQUIRING CERTAIN BUILDINGS, INSTITUTIONS, ESTABLISHMENTS AND PUBLIC UTILITIES TO INSTALL FACILITIES AND OTHER DEVICES.**

|  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> STAIRS                        | <input type="checkbox"/> WASH ROOMS AND TOILETS | <input type="checkbox"/> SWITCHES, CONTROLS, BUZZERS | <input type="checkbox"/> DRINKING FOUNTAINS     |
| <input type="checkbox"/> WALKWAYS                      | <input type="checkbox"/> LIFTS/ELEVATORS        | <input type="checkbox"/> HANDRAILS                   | <input type="checkbox"/> PUBLIC TELEPHONES      |
| <input type="checkbox"/> CORRIDORS                     | <input type="checkbox"/> RAMPS                  | <input type="checkbox"/> THRESHOLDS                  | <input type="checkbox"/> SEATING ACCOMMODATIONS |
| <input type="checkbox"/> DOORS, ENTRANCES & THRESHOLDS | <input type="checkbox"/> PARKING AREAS          | <input type="checkbox"/> FLOOR FINISHES              | <input type="checkbox"/> OTHERS (Specify) _____ |

**2. PERCENTAGE OF SITE OCCUPANCY**

PERCENTAGE OF BUILDING FOOTPRINT \_\_\_\_\_ %

PERCENTAGE OF IMPERVIOUS SURFACE AREA \_\_\_\_\_ %

PERCENTAGE OF UNPAVED SURFACE AREA \_\_\_\_\_ %

OTHERS (Specify) \_\_\_\_\_

**3. CONFORMANCE TO FIRE CODE OF THE PHILIPPINES (P.D. 1185)**

|   |  |   |
|---|--|---|
| <input type="checkbox"/> NUMBER AND WIDTH OF EXIT DOORS | <input type="checkbox"/> FIRE WALLS                          | <input type="checkbox"/> OTHERS (Specify) _____ |
| <input type="checkbox"/> WIDTH OF CORRIDORS             | <input type="checkbox"/> FIRE FIGHTING AND SAFETY FACILITIES |   |
| <input type="checkbox"/> DISTANCE TO FIRE EXITS         | <input type="checkbox"/> SMOKE DETECTORS                     |   |
| <input type="checkbox"/> ACCESS TO PUBLIC STREET        | <input type="checkbox"/> EMERGENCY LIGHTS                    |   |

**BOX 3**

**DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS**

\_\_\_\_\_ Date \_\_\_\_\_

**ARCHITECT**  
(Signed and Sealed Over Printed Name)

Address \_\_\_\_\_

|           |             |
|-----------|-------------|
| IAPOA No. | Validity    |
| PRC No.   | Validity    |
| PTR. No   | Date Issued |
| Issued at | TIN         |

**BOX 4**

**SUPERVISOR / IN-CHARGE OF ARCHITECTURAL WORKS**

\_\_\_\_\_ Date \_\_\_\_\_

**ARCHITECT**  
(Signed and Sealed Over Printed Name)

Address \_\_\_\_\_

|           |             |
|-----------|-------------|
| IAPOA No. | Validity    |
| PRC No.   | Validity    |
| PTR. No   | Date Issued |
| Issued at | TIN         |

**BOX 5**

**BUILDING OWNER**

\_\_\_\_\_

(Signature Over Printed Name)  
Date \_\_\_\_\_

Address \_\_\_\_\_

|            |             |              |
|------------|-------------|--------------|
| C.T.C. No. | Date Issued | Place Issued |
|------------|-------------|--------------|

**BOX 6**

**WITH MY CONSENT: LOT OWNER**

\_\_\_\_\_

(Signature Over Printed Name)  
Date \_\_\_\_\_

Address \_\_\_\_\_

|            |             |              |
|------------|-------------|--------------|
| C.T.C. No. | Date Issued | Place Issued |
|------------|-------------|--------------|