



REPUBLIC OF THE PHILIPPINES
City/Municipality of Santa Rosa
Province of Nueva Ecija
OFFICE OF THE BUILDING OFFICIAL

SANITARY PERMIT

APPLICATION NO.

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SP NO.

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BUILDING PERMIT

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

OWNER/APPLICANT		LAST NAME		FIRST NAME		M.I.		TIN	
FOR CONSTRUCTION OWNED 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					
SCOPE OF WORK									
<input type="checkbox"/> NEW CONSTRUCTION		<input type="checkbox"/> RENOVATION		<input type="checkbox"/> RAISING					
<input type="checkbox"/> ERECTION		<input type="checkbox"/> CONVERSION		<input type="checkbox"/> DEMOLITION					
<input type="checkbox"/> ADDITION		<input type="checkbox"/> REPAIR		<input type="checkbox"/> ACCESSORY BUILDING/STRUCTURE					
<input type="checkbox"/> ALTERATION		<input type="checkbox"/> MOVING		<input type="checkbox"/> OTHER(SPECIFY)					

BOX 2 (TO BE ACCOMPLISHED IN PRINT BY THE DESIGN PROFESSIONAL)

INSTALLATION AND OPERATION OF:		
WATER SUPPLY:		
<input type="checkbox"/> SHALLOW WELL	<input type="checkbox"/> SYSTEM OF DISPOSAL:	
<input type="checkbox"/> DEEP WELL & PUMP SET	<input type="checkbox"/> WASTE WATER TREATMENT PLANT	
<input type="checkbox"/> CITY/MUNICIPAL WATER SYSTEM	<input type="checkbox"/> IMHOFF TANK	
<input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> SANITARY SEWER CONNECTION	
	<input type="checkbox"/> SUB-SURFACE SAND FILTER	
	<input type="checkbox"/> SURFACE DRAINAGE	
	<input type="checkbox"/> STREET CANAL	
	<input type="checkbox"/> WATER COURSE	
	<input type="checkbox"/> OTHER(SPECIFY) _____	

BOX 3

DESIGN PROFESSIONAL PLAN AND SPECIFICATIONS	
SANITARY ENGINEER (Sign and Sealed Over Printed Name) Date _____	
Address _____	
PRC No.	Validity
PTR. No.	Date Issued
Issued at	TIN

BOX 4

SUPERIOR/ IN-CHARGE OF SANITARY	
SANITARY ENGINEER (Sign and Sealed Over Printed Name) Date _____	
Address _____	
PRC No.	Validity
PTR. No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER		
(Sign and Sealed Over Printed Name) Date _____		
Address _____		
C.T.C. No.	Date Issued	Place Issued

BOX 6

WITH MY CONSENT: LOT OWNER		
(Sign and Sealed Over Printed Name) Date _____		
Address _____		
C.T.C. No.	Date Issued	Place Issued

RECEIVED BY	DATE
FIVE (5) SETS OF SANITARY DOCUMENTS	
<input type="checkbox"/> SANITARY PLANS AND SPECIFICATIONS	<input type="checkbox"/> COST ESTIMATES
<input type="checkbox"/> BILL OF MATERIALS	<input type="checkbox"/> OTHERS (Specify) _____

BOX 7

BOX 8

BOX 9

PROGRESS FLOW					
ACTION TAKEN	IN		OUT		PROCESSED BY:
	DATE	TIME	DATE	TIME	
PERMIT IS HEREBY ISSUED SUBJECT TO THE FOLLOWING:					
OTHERS (Specify)					
1. That the proposed sanitary works shall be in accordance with the sanitary plans filled with this office and in conformity with the latest Code on Sanitation of the Philippines, the National Building Code and its IRR.					
2. That prior to any commencement of sanitary works, a duly accomplished prescribed "NOTICE OF CONSTRUCTION" shall be submitted to the Office of the Building Official.					
3. That upon completion of the sanitary works, the licensed supervisor / in-charge 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 accomplished the Certificate of Completion stating that the sanitary works conform to the provision of the Code on Sanitation, National Building Code and its IRR.					
4. That this permit is null and void unless accompanied by the building permit..					
PERMIT ISSUED BY:					
ENGR. IRENEO C. SARMIENTO JR.					
BUILDING OFFICIAL					
Date _____					