Republic of the Philippines

OFFICE OF THE MUNICIPAL ENGINEER/BUILDING OFFICIAL

Sison, Pangasinan

APPLICATION NO. _____

SANITARY/PLUMBING PERMIT

PERMIT NO. 1437-____-____

DATE OF APPLICATION _____ DATE ISSUED _____

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

NAME OF OWNER/APPLICANT	LAST NAME	First Name	M.I.	TAX IDENTIFICATION NUMBER
ADDRESS	NO., STREET, BARANGAY, CITY/MUNICIPALITY			TELEPHONE NO.

LOCATION OF INSTALLATION NO., STREET, BARANGAY, CITY/MUNICIPALITY

SCOPE OF WORK ( ) NEW INSTALLATION ( ) REPAIR OF _____ OTHERS (SPECIFY)
( ) ADDITION _____ ( ) REMOVAL OF _____ _____ OF _____

USE OR TYPE OF OCCUPANCY

( ) RESIDENTIAL _____ ( ) AGRICULTURAL _____
( ) COMMERCIAL _____ ( ) PARKS, PLAZAS, MONUMENTS_____
( ) INDUSTRIAL _____ ( ) RECREATIONAL _____
( ) INSTITUTIONAL _____ ( ) OTHER (SPECIFY) _____

FIXTURES TO BE INSTALLED

QUANTITY	NEW FIXTURES	QUANTITY	FIXTURES
_____	( ) WATER CLOSET	_____	( ) BIDET
_____	( ) FLOOR DRAIN	_____	( ) LAUNDRY TRAYS
_____	( ) LAVATORIES	_____	( ) DENTAL CUSPIDOR
_____	( ) KITCHEN SINK	_____	( ) GAS HEATER
_____	( ) FAUCET	_____	( ) ELECTRIC HEATER
_____	( ) SHOWER HEAD	_____	( ) WATER BOILER
_____	( ) WATER METER	_____	( ) DRINKING FOUNTAIN
_____	( ) GREASE TRAP	_____	( ) BAR SINK
_____	( ) BATH TUBS	_____	( ) SODA FOUNTAIN SINK
_____	( ) SLOP SINK	_____	( ) LABORATORY SINK
_____	( ) URINAL AIR CONDITIONED UNIT	_____	( ) STERILIZER
_____	( ) WATER TANK/RESERVOIR	_____	( ) SWIMMING POOL
_____	( ) TOTAL	_____	( ) OTHERS (SPECIFY) _____
		_____	( ) TOTAL

( ) WATER DISTRIBUTION SYSTEM ( ) SANITARY SEWER SYS. ( ) STORM DRAINAGE SYSTEM

WATER SUPPLY

( ) SHALLOW WELL
( ) DEEP WELL & PUMP SET
( ) CITY/MUNICIPAL WATER SYSTEM
( ) OTHERS

SYSTEM DISPOSAL

( ) WATER SYSTEM TREATMENT PLANT
( ) SEPTIC VAULT
( ) SANITARY SEWER CONNECTION
( ) SUB-SURFACE SAND FILTER

( ) SURFACE DRAINAGE
( ) STREET CANAL
( ) WATER SOURCE

BOX 6

SANITARY ENG'R./MASTER PLUMBER SIGNED AND SEALED PLANS		P.R.C. NO.
PRINTED NAME		
ADDRESS		
P.T.R.	DATE ISSUED	PLACED ISSUED
SIGNATURE		TIN

BOX 7

SANITARY ENG'R./MASTER PLUMBER INCHARGED OF INSTALLATION		P.R.C. NO.
PRINTED NAME		
ADDRESS		
P.T.R.	DATE ISSUED	PLACE ISSUED
SIGNATURE		TIN

BOX 8

SIGNATURE _____ APPLICANT		
RES. CERT. NO.	DATE ISSUED	PLACE ISSUED

ROGELIO V. TORALBA JR.
Engineer II/OIC-MEO/Acting Local Building Official
Date _____