*Republic of the Philippines*

**OFFICE OF THE BUILDING OFFICIAL**

City of Zamboanga

**F E N C I N G P E R M I T**

Application No.

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Application

Permit Number

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Issued

**BOX 1 (TO BE ACCOMPLISHED BY APPLICANT IN PRINT);.9**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Applicant** | | | Last Name | | | | First Name | | | | M.I. | T.I.N. |
|  | | |  | | | |  | | | |  |  |
| For Construction Owned > | | | | | | Form of Ownership | | | | |  |  |
| By An Enterprise > | | | | | |  | | | | | | |
| **Address** | No. | | | | Street | | | Barangay | | City/Municipality | | Tel. No. |
|  |  | | | |  | | |  | |  | |  |
| **Location of Area** | | No. | | | Street | | | Barangay | | City/Municipality | |  |
| **to be Fenced** | |  | | |  | | |  | |  | |  |
| **Scope of Work** | | | | 🞏Addition | | | | | 🞏 Renovation | | | |
| 🞏 New Fence | | | | 🞏 Repair | | | | | 🞏 Others (Specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

**BOX 2 (TO BE ACCOMPLISHED BY RECEIVING & RECORDING SECTION)**

|  |
| --- |
| Accompanying Documents: |
| 🞏 Certify true copy of T.C.T. |
| 🞏 Xerox copy of Lot / Site Plan |
| 🞏 Certify true copy of Latest Land Tax Receipt |
| 🞏 Certify true copy of Tax Declaration |
| 🞏 Certify true copy of the Deed of Absolute Sale or Contract of Sale |
| 🞏 Certify true copy of Contract of Lease (if not owned by applicant) |
| 🞏 duly notarized copy of Authorization (if not owned by applicant) |
| 🞏 other clearances (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**BOX 3 (TO BE ACCOMPLISHED BY DESIGNING ARCHITECT/CIVIL ENGINEER IN PRINT)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Measurements:** | **Length in Meters** | | **Height in Meters** |
| [ ] | | [ ] |
| **Type of Fencing:** | 🞏 Indigenous Materials | 🞏 R.C. & Interlink/Cylone Wire | |
|  | 🞏 R.C. (Reinforced Concrete) | 🞏 R.C. & Steel Matting | |
|  | 🞏 R.C. & Conc. Hollow Blocks | 🞏 R.C. & Barbed & other wire | |
|  | 🞏 R.C. & Bricks | 🞏 Others (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ­­­­­ | |

**BOX 4 (TO BE ACCOMPLISHED BY THE BUILDING OFFICIAL)**

|  |  |
| --- | --- |
| **Action Taken:**  Permit is hereby granted subject to the following conditions:   1. That the proposed construction/addition/repair/renovation shall be done in conformity with the National Building Code (P.D. 1096) and its corresponding implementing rules and regulations. 2. That the required setback shall be observed. | |
| Note:  This Permit may be cancelled or revoked pursuant to sections 305 and 306 of the National Building Code. | **ENGR. CHRISTOPHER Q. NAVARRO, MPA**  *City Engineer*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |

**BOX 5 (TO BE ACCOMPLISHED BY THE DIVISION CONCERN)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **A S S E S S E D F E E S** | | | | |
|  | Amount Due | Assessed by | O.R. No. | Date Paid |
| 🞏 Line and Grade | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| 🞏 Fencing | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| 🞏 Electrical (if any) | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| 🞏 Others (Specify) | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Reviewed: |  |
| 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chief, Processing Division | |
| **T o t a l** | P \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |

**BOX 5 (TO BE ACCOMPLISHED BY THE DIVISION/SECTION CONCERN)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **P R O G R E S S F L O W** | | | | | | |
| Noted: | **In** | | **Out** | | **Action/** | **Processed by** |
| Chief, Processing Div. | **Time** | **Date** | **Time** | **Date** | **Remarks** |
| Receiving & Recoding |  |  |  |  |  |  |
| Geodetic (Line Conformity) |  |  |  |  |  |  |
| Structural |  |  |  |  |  |  |
| Electrical |  |  |  |  |  |  |
| Cashier |  |  |  |  |  |  |

We hereby affix our hands signifying our conformity to the information herein above set forth.

**BOX 7: BOX 9:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Architect/Civil Engineer  Signed and Sealed Plans & Specifications | | PRC REG. NO. |  | Applicant  Print Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Print Name | | |
|  | | |
| P.T.R. No. | Date Issued | Place of Issue |
|  |  |  | Res. Cert. | Date | Place of |
| Address | | | No. | Issued | Issue |
|  | | |  |  |  |
| Signature | | |
|  | | |

**BOX 8: BOX 10 (CONSENT OF LOT OWNER)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Architect/Civil Engineer | | PRC Reg. No. |  | Print Name of Land Owner  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| In-Charge of Construction | |
| Print Name | | |
| Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Address | | | OCT/TCT No. | | Tax Dec. No. | |
| P.T.R. No. | Date Issued | Place of Issue | Res. Cert | Date | | Place of |
|  |  |  | No. | Issued | | Issue |
|  |  |  |  |  | |  |
| Signature | | |  |  | |  |
| Signature | | | |