***NBC FORMS***

**NBC FORM NO. E – 03**

**Republic of the Philippines**

**City/Municipality of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Province of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OFFICE OF THE BUILDING OFFICIAL**

**PERMIT FOR TEMPORARY SERVICE CONNECTION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **APPLICATION 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**  **BY AN ENTERPRISE** | | **FORM OF OWNERSHIP** | | **USE OR CHARACTER OF OCCUPANCY** | |
| **ADDRESS NO. STREET BARANGAY CITY/MUNICIPALITY ZIP CODE** | | | | | **TELEPHONE #** |
| **LOCATION OF CONSTRUCTION LOT NO.\_\_\_\_\_\_\_\_\_\_\_\_ BLK NO.\_\_\_\_\_\_\_\_\_\_\_ TCT NO.\_\_\_\_\_\_\_\_\_\_\_ TAX DEC NO.\_\_\_\_\_\_\_\_\_\_**  **STREET\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BARANGAY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY/MUNICIPALITY OF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **PURPOSE:**  ** FOR CONSTRUCTION  FOR TESTING  OTHERS (Specify)** | | | | | |
| **SUMMARY OF ELECTRICAL LOADS/ CAPACITIES APPLIED FOR** | | | | | |
| **TOTAL CONNECTED LOAD**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_kVA** | **TOTAL TRANSFORMER CAPACITY**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Kva** | | **TOTAL GENERATOR/UPS CAPACITY**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Kva** | | |

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

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **PROFESSIONAL ELECTRICAL ENGINEER**  (Signed and Sealed Over Printed Name)  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Address** | |
| **PRC NO.** | **VALIDITY** |
| **PTR NO.** | **Date Issued** |
| **Issued at** | **TIN** |

**BOX 3 (TO BE ACCOMPLISHED BY THE OWNER / APPLICANT)**

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature Over Printed Name)  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Address** |
| **C.T.C No.** |
| **Date Issued** |
| **Place Issued** |

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