NBC FORM NO. A - 04

Republic of the Philippines
City/Municipality of _____
Province of _____
OFFICE OF THE BUILDING OFFICIAL

MECHANICAL PERMIT

APPLICATION NO. ☐☐☐☐☐☐☐☐☐☐ MP NO. ☐☐☐☐☐☐☐☐ BUILDING PERMIT NO. ☐☐☐☐☐☐☐☐

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

OWNER/APPLICANT	LAST NAME	FIRST NAME	M.I.	TIN NO.

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 _____ MUNICIPALITY OF **TANAUAN**

SCOPE OF WORK

- ☐ NEW CONSTRCUTION
- ☐ ERECTION
- ☐ ADDITION
- ☐ ALTERATION
- ☐ RENOVATION _____
- ☐ CONVERSION _____
- ☐ REPAIR _____
- ☐ MOVING _____
- ☐ RAISING _____
- ☐ DEMOLITION _____
- ☐ ACCESSORY BUILDING/ STRUCTURAL _____
- ☐ OTHERS(Specify)

BOX 2 (TO BE ACCOMPLISHED BY THE DESIGN PROFESSIONAL)

INSTALLATION AND OPERATION OF :

- ☐ BOILER
- ☐ PRESSURE VESSEL
- ☐ INTERNAL COMBUSTION ENGINE
- ☐ REFRIGERATION AND ICE MAKING
- ☐ WINDOW TYPE AIRCONDITIONING
- ☐ PACKAGED/SPLIT TYPE AIRCONDITIONING
- ☐ OTHERS (Specify) _____
- ☐ RENOVATION
- ☐ MECHANICAL VENTILLATION
- ☐ ESCALATOR
- ☐ MOVING SIDEWALK
- ☐ FREIGHT ELEVATOR
- ☐ PASSENGER ELEVATOR
- ☐ CABLE CAR
- ☐ DUMBWAITER
- ☐ PUMPS
- ☐ COMPRESSED AIR, VACUUM,INSTITUTIONAL and/or INDUSTRIAL GAS
- ☐ PNEUMATIC TUBES, CONVEYORS and/or MORAILS
- ☐ FUNICULAR

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS

_____
PROFESSIONAL MECHANICAL ENGINEER
(Signed and Sealed Over Printed Name)
Date _____

Address:	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 4

SUPERVISOR / IN-CHARGE OF MECHANICAL WORKS

☐ **PROFESSIONAL MECHANICAL ENGINEER** ☐ **MECHANICAL ENGINEER**

_____
(Signed and Sealed Over Printed Name)
Date _____

Address:	
PRC No.	Validity
PTR No.	Date Issued
Issued at	TIN

BOX 5

BUILDING OWNER

_____
(Signed and Sealed Over Printed Name)
Date _____

Address		
C.T.C. No.	Date Issued	Place Issued

BOX 6

WITH CONSENT: **LOT OWNER**

_____
(Signed and Sealed Over Printed Name)
Date _____

Address		
C.T.C. No.	Date Issued	Place Issued