



Republic of the Philippines
City Government of Muntinlupa



OFFICE OF THE BUILDING OFFICIAL

TO : CITY/MUNICIPAL FIRE MARSHALL
Bureau of Fire Protection, DILG

SUBJECT : COMPLETION OF CONSTRUCTION

Pursuant to the provision of the Memorandum of Agreement, please conduct a final inspection of building owned by _____ located at _____ for fire safety and control requirements.

In accordance with the provisions of said Memorandum of Agreement, you are required to submit to this Office the Fire Safety Inspection Certificate within five (5) working days from receipt of this notification. Provided, that in case of non-issuance, suspension or revocation of said certificate of fire safety inspection, the reasons or grounds therefore shall be stated by you in writing. Failure of the C/MFM to act within said period shall mean that the plans and specifications submitted conform to all requirements to the FCP.

BUILDING OFFICIAL
(Signature Over Printed Name)

Date referred to C/MFM: _____

Date received by C/MFM: _____

Date returned to Building Official: _____

Date received by Building Official: _____



BUREAU OF FIRE PROTECTION

National Capital Region
Fire District III
Muntinlupa City Fire Station
Market Drive, Filinvest Corp. City, Alabang, Muntinlupa City
0842-2201
muntinlupafire@bfp.gov.ph



FSIC

APPLICATION NUMBER

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FIRE SAFETY INSPECTION CERTIFICATE APPLICATION FORM

CHECK BOX OF CERTIFICATE APPLIED FOR

NAME OF OWNER	<input checked="" type="checkbox"/>
BUILDING/FACILITY/STRUCTURE/BUSINESS/ ESTABLISHMENT NAME	<input checked="" type="checkbox"/>
EXACT ADDRESS	<input checked="" type="checkbox"/>
AUTHORIZED REPRESENTATIVE	<input checked="" type="checkbox"/>
TYPE OF OCCUPANCY/ BUSINESS NATURE	<input checked="" type="checkbox"/>
TOTAL FLOOR AREA (M ²): <input checked="" type="checkbox"/>	NO. OF STOREY: <input checked="" type="checkbox"/>
CONTACT NUMBER: <input checked="" type="checkbox"/>	EMAIL ADDRESS: <input checked="" type="checkbox"/>

ATTACHED DOCUMENTARY REQUIREMENTS

FSIC FOR CERTIFICATE OF OCCUPANCY

ENDORSEMENT FROM OFFICE OF THE BUILDING OFFICIAL (OBO)
 CERTIFICATE OF COMPLETION
 CERTIFIED TRUE COPY OF ASSESSMENT FEE FOR SECURING CERTIFICATE OF OCCUPANCY FROM OBO
 AS-BUILT PLAN (IF NECESSARY)
 ONE (1) SET OF FIRE SAFETY COMPLIANCE AND COMMISSIONING REPORT (FSCCR) (IF NECESSARY)

FSIC FOR BUSINESS PERMIT

<input type="checkbox"/> FOR NEW BUSINESS	<input type="checkbox"/> FOR RENEWAL OF BUSINESS
<input type="checkbox"/> CERTIFIED TRUE COPY OF VALID CERTIFICATE OF OCCUPANCY <input type="checkbox"/> ASSESSMENT OF BUSINESS PERMIT FEE/ TAX ASSESSMENT BILL FROM BPLO <input type="checkbox"/> AFFIDAVIT OF UNDERTAKING THAT THERE WAS NO SUBSTANTIAL CHANGES MADE ON BUILDING/ESTABLISHMENT	<input type="checkbox"/> ASSESSMENT OF THE BUSINESS PERMIT FEE/TAX ASSESSMENT BILL FROM BPLO <input type="checkbox"/> COPY OF FIRE INSURANCE (IF NECESSARY) <input type="checkbox"/> ONE (1) SET OF FIRE SAFETY MAINTENANCE REPORT (FSMR) (IF NECESSARY) <input type="checkbox"/> FIRE SAFETY CLEARANCE FOR WELDING, CUTTING AND OTHER HOT WORK OPERATIONS (IF REQUIRED)

NOTE: Incomplete documentary requirements will be returned to the applicant.

I hereby certify the correctness of the information provided above and the completeness of the attached documents.

OWNER/AUTHORIZED REPRESENTATIVE'S SIGNATURE OVER PRINTED NAME

DATE

VERIFIED BY BFP-CRO:

DATE/TIME

FSIC MONITORING (TO BE FILLED UP BY BFP PERSONNEL ONLY)

CRO		FCA		FCCA		C,FSES		FSI		C,FSES		CFM/MFM		CRO	
DATE:		DATE:		DATE:		DATE:		DATE:		DATE:		DATE:		DATE:	
IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT

PAALALA: "MAHIGPIT NA IPINAGBABAWAL NG PAMUNUAN NG BUREAU OF FIRE PROTECTION SA MGA KAWANI NITO ANG MAGBENTA O MAGREKOMENDA NG ANUMANG BRAND NG FIRE EXTINGUISHER"
"FIRE SAFETY IS OUR MAIN CONCERN"

BFP-QSF-FSED-002 REV.02 (08.24.20)



BUREAU OF FIRE PROTECTION

National Capital Region
(Fire District III)
(Muntinlupa City Fire Station)
(Market Drive, Filinvest Corp. City, Alabang, Muntinlupa City)



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CLAIM STUB

BFP-QSF-FSED-002 REV.02 (08.24.20)