



Republic of the Philippines
City Government of Muntinlupa



QF/OBO/A028/001

OFFICE OF THE BUILDING OFFICIAL

CERTIFICATE OF FINAL ELECTRICAL INSPECTION/COMPLETION

CONTROL NO.

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CFEI NO.

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This is to certify that the final inspection of the electrical installation has been conducted on the building and/or premises covered by **Building Permit No.** _____ issued on _____ and the same were found completed in accordance with the approved plans and specifications on file with the Office of the Building Official and in accordance with the Philippine Electrical Code provisions.

OWNER/APPLICANT: LAST NAME		FIRST NAME		MIDDLE NAME		TIN
ADDRESS: NO., STREET, BARANGAY,			CITY/MUNICIPALITY		ZIP CODE	CONTACT NO.
LOCATION OF INSTALLATION: LOT NO. _____ BLK NO. _____ TCT NO. _____ CURRENT TAX DEC. NO. _____						
STREET _____ BARANGAY _____, MUNTINLUPA CITY						
TYPE OF OCCUPANCY OR USE						
<input type="checkbox"/> RESIDENTIAL DWELLING	<input type="checkbox"/> EDUCATIONAL AND RECREATION	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> STORAGE AND HAZARDOUS			
<input type="checkbox"/> RESIDENTIAL, HOTEL, APARTMENT	<input type="checkbox"/> BUSSINESS AND MERCANTILE	<input type="checkbox"/> INSTITUTIONAL	<input type="checkbox"/> OTHERS (SPECIFY) _____			
TYPE OF INSTALLATION						
<input type="checkbox"/> NEW	<input type="checkbox"/> RECONNECTION	<input type="checkbox"/> RELOCATION	<input type="checkbox"/> NET METERING	<input type="checkbox"/> REMODEL	<input type="checkbox"/> OTHERS (SPECIFY) _____	
TYPE OF WIRING						
<input type="checkbox"/> OPEN WIRING	<input type="checkbox"/> CONDUITS	<input type="checkbox"/> CABLE	<input type="checkbox"/> ARMORED CABLE	<input type="checkbox"/> RACEWAYS	<input type="checkbox"/> OTHERS (SPECIFY) _____	
NUMBER OF OUTLETS:		NUMBER OF EQUIPMENTS / WIRING DEVICES:		INSTALLATION DETAILS:		
_____ LIGHT _____ CONVENIENCE / RECEPTACLE _____ SPO, AIRCON _____ SPO, COOKING UNIT _____ SPO, WATER HEATER _____ SPO, WATER PUMP		_____ TOGGLE SWITCH _____ BELLS / BUZZERS _____ PUSH BUTTONS _____ FA DETECTORS _____ OTHERS (See Attached)		NATURE OF WORKS: _____ TOTAL LOAD (KVA): _____ SIZE OF MAIN WIRE: _____ LOAD PER UNIT (KVA): _____ SIZE OF FEEDER WIRE PER UNIT: _____ NO. KWH METER: _____ AMPERES (MCB): _____ VOLTAGE: _____ PHASE: _____ OTHERS (SPECIFY): _____		
START OF INSTALLATION:			DATE OF COMPLETION:			

I hereby certify that the above data and information are true and correct to the best of my knowledge and belief.

ELECTRICAL CONTRACTOR (200-AMPERE MAIN AND ABOVE)	
Name and Signature	PCAB License No. _____ (SPECIALTY ELECTRICAL) Validity _____
Address	Tel. / Fax No. _____
PERSON IN-CHARGE OF ELECTRICAL INSTALLATION	
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED MASTER ELECTRICIAN (Not exceeding 600 V & 500 kVA)	
_____ Date _____ (Signed and Sealed Over Printed Name)	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN
Address	
OWNER / PERMITTEE	
_____ (Signature Over Printed Name) Date _____	Address
	C.T.C. / Gov't Issued ID No.
	Date Issued
	Place Issued

INSPECTED BY:

RECOMMENDING APPROVAL:

PERMIT ISSUED BY:

ELECTRICAL INSPECTOR
(Signature Over Printed Name)

ELECTRICAL ENGINEER OF THE BUILDING OFFICE
(Signature Over Printed Name)

ENGR. DYNADALLE N. ARANDA
BUILDING OFFICIAL

AMOUNT PAID: _____

OR NO. _____

DATE: _____

NUMBER OF STOREY _____
ESTIMATED COST _____
ACTUAL COST _____
a) Materials (Total Cost) P 1. Electrical Wires _____ 2. Lighting Outlets _____ 3. Convenience Outlets _____ 4. Switches _____ 5. Others (Specify) _____ b) Other Costs _____ <div style="text-align: right; font-size: small;">This includes professional fees, permits and other fees</div>

1. Loads to be Connected: _____ LIGHT _____ SPO, COOKING UNIT _____ CONVENIENCE/RECEPTACLE _____ SPO, WATER HEATER _____ SPO, AIRCON _____ SPO, WATER PUMP	_____ TOGGLE SWITCH _____ FA DETECTORS _____ BELLS/BUZZERS _____ OTHERS (See Attached) _____ PUSH BUTTON _____
2. Nature of Works: _____	
3. Type of Service: Voltage _____ Size of Wire _____ Phone _____	
4. Remarks: _____	

I hereby certify that the above data and information are true and correct to the best of my knowledge and belief

ELECTRICAL FEES	<input type="checkbox"/> PEE <input type="checkbox"/> REE <input type="checkbox"/> RME
Fee P _____ Surcharge P _____ Total P _____	ADDRESS _____ PRC REG NO. _____ VALIDITY _____ PTR NO. _____ TIN _____ CTC NO. _____ DATE ISSUED _____ PLACE ISSUED _____
Computed by: _____ Signature Over Printed Name	

LOAD	

Natures of Works:	
Inspector	Contractor _____
Fee: P	
Paid under Official Receipt No. _____	Owner/Occupant _____
Date _____	

RECOMMENDING APPROVAL:

ISSUED BY:

ELECTRICAL ENGINEER OF THE BUILDING OFFICE
(Signature Over Printed Name)

BUILDING OFFICIAL
(Signature Over Printed Name)

PRC REG. NO. & VALIDITY

NOTE: Renewals or extension of this permit and/or final certification of the electrical installaton are subject and payment of corresponding in conformity with pertinent provisions of the "National Building Code" (P.D 1096 and its implementing rules and regulations.)