



Republic of the Philippines
City Government of Muntinlupa



OFFICE OF THE BUILDING OFFICIAL CERTIFICATE OF COMPLETION

DATE _____																																							
<p>This is to certify that the building/structure covered by Building Permit No. _____ issued on _____ has been constructed and completed under our supervision, conforms with the plans and specifications submitted and on file with the Office of the Building Official, and complies with the provisions of the National Building Code of the Philippines, its Revised IRR and other referral codes.</p>																																							
NAME OF OWNER _____ (Last Name) _____ (Given) _____ (M.I.)																																							
ADDRESS OF OWNER _____ ZIP CODE _____ TEL. NO _____																																							
LOCATION OF CONSTRUCTION: LOT NO. _____ BLK NO. _____ STREET _____ BARANGAY _____, MUNTINLUPA CITY																																							
USE OR CHARACTER OF OCCUPANCY _____ GROUP _____																																							
	PLANNED																																						
	ACTUAL																																						
DATE OF START OF CONSTRUCTION																																							
DATE OF COMPLETION																																							
TOTAL FLOOR AREA (Square Meters)																																							
NO. OF STOREY(S)																																							
NO. OF UNITS																																							
SUMMARY OF ACTUAL COSTS 1. TOTAL COST OF MATERIALS: P _____ 1.1. CEMENT (bags) _____ 1.2. LUMBER (bd. ft.) _____ 1.3. REINFORCING BARS (kg.) _____ 1.4. G.I. SHEETS (sheets) _____ 1.5. PREFAB STRUCTURAL STEEL (kg.) _____ 1.6. Other materials _____ 2. TOTAL COST OF DIRECT LABOR: P _____ This includes compensation whether by salary or contract for project architect/engineer down to laborers. 3. TOTAL COST OF EQUIPMENT UTILIZATION: P _____ 4. OTHER COSTS: P _____ This includes professional services fees, permits and other fees TOTAL COST OF BUILDING / STRUCTURE P _____																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION</td> <td colspan="2">IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT</td> </tr> <tr> <td rowspan="3" style="text-align: center; vertical-align: middle;"> _____ ARCHITECT OR CIVIL ENGINEER (Signed And Sealed Over Printed Name) Date _____ </td> <td colspan="2"> Contractor: _____ </td> </tr> <tr> <td colspan="2"> Address _____ Tel. No. _____ </td> </tr> <tr> <td colspan="2"> _____ Date _____ </td> </tr> <tr> <td> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PRC No.</td> <td>Validity</td> </tr> <tr> <td>PTR No.</td> <td>Date Issued</td> </tr> <tr> <td>Issued at</td> <td>TIN</td> </tr> <tr> <td>CTC No.</td> <td>Date Issued</td> </tr> <tr> <td></td> <td>Issued at</td> </tr> </table> </td> <td colspan="2"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">AUTHORIZED MANAGING OFFICER</td> </tr> <tr> <td colspan="3" style="text-align: center;">(Signature Over Printed Name)</td> </tr> <tr> <td>CTC No</td> <td>Date Issued</td> <td>Place Issued</td> </tr> </table> </td> </tr> <tr> <td colspan="2"> CONFORME: _____ Date _____ OWNER / PERMITEE (Signature Over Printed Name) </td> <td> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>CTC No</td> </tr> <tr> <td>Date Issued</td> </tr> <tr> <td>Place Issued</td> </tr> </table> </td> </tr> </table>		FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION	IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT		_____ ARCHITECT OR CIVIL ENGINEER (Signed And Sealed Over Printed Name) Date _____	Contractor: _____		Address _____ Tel. No. _____		_____ Date _____		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PRC No.</td> <td>Validity</td> </tr> <tr> <td>PTR No.</td> <td>Date Issued</td> </tr> <tr> <td>Issued at</td> <td>TIN</td> </tr> <tr> <td>CTC No.</td> <td>Date Issued</td> </tr> <tr> <td></td> <td>Issued at</td> </tr> </table>	PRC No.	Validity	PTR No.	Date Issued	Issued at	TIN	CTC No.	Date Issued		Issued at	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">AUTHORIZED MANAGING OFFICER</td> </tr> <tr> <td colspan="3" style="text-align: center;">(Signature Over Printed Name)</td> </tr> <tr> <td>CTC No</td> <td>Date Issued</td> <td>Place Issued</td> </tr> </table>		AUTHORIZED MANAGING OFFICER			(Signature Over Printed Name)			CTC No	Date Issued	Place Issued	CONFORME: _____ Date _____ OWNER / PERMITEE (Signature Over Printed Name)		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>CTC No</td> </tr> <tr> <td>Date Issued</td> </tr> <tr> <td>Place Issued</td> </tr> </table>	CTC No	Date Issued	Place Issued
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REPUBLIC OF THE PHILIPPINES) CITY/MUNICIPALITY OF _____) S.S																																							
BEFORE ME, at the City/Municipality of _____, on _____ personally appeared the persons whose signatures appear herein at the front and back of this page, known to me to be the same persons who executed this standard prescribed form and acknowledged to me that the same is their free and voluntary act and deed. WITNESS MY HAND AND SEAL on the date and place above written.																																							
Doc. No. _____ Page No. _____ Book No. _____ Series of _____	_____ NOTARY PUBLIC (Until December _____)																																						

NOTE: COPY TO BE FURNISHED THE PSA

DESIGN PROFESSIONALS, PLANS AND SPECIFICATIONS:

ARCHITECTURAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
IAPOA No.	O.R. No. Date Issued:
PTR. No.	Date Issued
Issued at	TIN

CIVIL / STRUCTURAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

ELECTRICAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

MECHANICAL	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

SANITARY	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

PLUMBING	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

ELECTRONICS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

INTERIOR DESIGN	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

SUPERVISORS OF SPECIALTY WORKS:

ELECTRICAL WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

MECHANICAL WORKS	
_____ Date _____ (Signature Over Printed Name)	
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INTERIOR DESIGN WORKS	
_____ Date _____ (Signature Over Printed Name)	
Address	
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Issued at	TIN