



Republic of the Philippines  
City Government of Muntinlupa



## OFFICE OF THE BUILDING OFFICIAL CERTIFICATE OF COMPLETION

DATE _____			
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.			
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			
<p><b>SUMMARY OF ACTUAL COSTS</b></p> <p>1. TOTAL COST OF MATERIALS: P _____</p> <p>1.1. CEMENT (bags) _____</p> <p>1.2. LUMBER (bd. ft.) _____</p> <p>1.3. REINFORCING BARS (kg.) _____</p> <p>1.4. G.I. SHEETS (sheets) _____</p> <p>1.5. PREFAB STRUCTURAL STEEL (kg.) _____</p> <p>1.6. Other materials _____</p> <p>2. TOTAL COST OF DIRECT LABOR: P _____ This includes compensation whether by salary or contract for project architect/engineer down to laborers.</p> <p>3. TOTAL COST OF EQUIPMENT UTILIZATION: P _____</p> <p>4. OTHER COSTS: P _____ This includes professional services fees, permits and other fees</p> <p style="text-align: center;"><b>TOTAL COST OF BUILDING / STRUCTURE P _____</b></p>			
<b>FULL-TIME SUPERVISOR OR INSPECTOR OF CONSTRUCTION</b>		<b>IF CONSTRUCTION WAS UNDERTAKEN BY CONTRACT</b>	
_____ <b>ARCHITECT OR CIVIL ENGINEER</b> (Signed And Sealed Over Printed Name) Date _____		Contractor: _____	
		PCAB Lic. No. _____ Validity _____ TIN _____	
PRC No. _____ Validity _____ PTR No. _____ Date Issued _____ Issued at _____ TIN _____		Address _____ Tel. No. _____	
		_____ Date _____ <b>AUTHORIZED MANAGING OFFICER</b> (Signature Over Printed Name)	
CTC No. _____	Date Issued _____	Issued at _____	CTC No. _____ Date Issued _____ Place Issued _____
<b>CONFORME:</b>			CTC No. _____
_____ Date _____ <b>OWNER / PERMITTEE</b> (Signature Over Printed Name)			Date Issued _____
			Place Issued _____
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:**

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

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

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

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

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

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

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

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

**SUPERVISORS OF SPECIALTY WORKS:**

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

<b>MECHANICAL WORKS</b>	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

<b>SANITARY WORKS</b>	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

<b>PLUMBING WORKS</b>	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

<b>ELECTRONICS WORKS</b>	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN

<b>INTERIOR DESIGN WORKS</b>	
_____ Date _____ (Signature Over Printed Name)	
Address	
PRC. No.	Validity
PTR. No.	Date Issued
Issued at	TIN