

[illegible][illegible]

DO NOT FILL-UP (PSA USE ONLY)

|   |  |   |                          |
|---|--|---|--------------------------|
|   |  |   |                          |
|   |  |   |                          |
| <b><u>TARLAC</u></b>  |  |   |                          |
| <b>SCOPE OF WORK</b>  |  |   |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  | <input type="checkbox"/> |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  | <input type="checkbox"/> |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  | <input type="checkbox"/> |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  | <input type="checkbox"/> |
| <b>USE OR CHARACTER OF OCCUPANCY</b>                          |  |   |                          |
| <input type="checkbox"/> GROUP A : RESIDENTIAL (DWELLINGS)    | <input type="checkbox"/> GROUP E : COMMERCIAL        | <input type="checkbox"/> GROUP H : ASSEMBLY (OCCUPANT LOAD LESS THAN 1,000) |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/> GROUP B : RESIDENTIAL                | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/> GROUP I : ASSEMBLY (OCCUPANT LOAD 1,000 OR MORE)   |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/> GROUP C : EDUCATIONAL & RECREATIONAL | <input type="checkbox"/> GROUP F : LIGHT INDUSTRIAL  | <input type="checkbox"/>  |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/> GROUP G : MEDIUM INDUSTRIAL | <input type="checkbox"/> GROUP J : (J-1) AGRICULTURAL                       |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/> GROUP D : INSTITUTIONAL              | <input type="checkbox"/>                             | <input type="checkbox"/> GROUP J : (J-2) ACCESSORIES                        |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |
| <input type="checkbox"/>                                      | <input type="checkbox"/>                             | <input type="checkbox"/>  |                          |

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FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS (REPRESENTING THE OWNER)

|   |  |  |
|---|--|--|
| _____<br><b>ARCHITECT OR CIVIL ENGINEER</b> |  |  |
|   |  |  |
|   |  |  |
|   |  |  |

BOX 3

BOX 4

|            |  |  |                                       |  |  |
|------------|--|--|---------------------------------------|--|--|
| APPLICANT: |  |  | LOT OWNER / AUTHORIZED REPRESENTATIVE |  |  |
| _____      |  |  | _____                                 |  |  |
|            |  |  |                                       |  |  |
| CTC NO.    |  |  | Gov't Issued                          |  |  |

BOX 5

CTC.

CTC.

BOX 6 (TO BE ACCOMPLISHED BY THE PROCESSING AND EVALUATION DIVISION)

| ASSESSED FEES  | ACCOUNT | BASIS OF ASSESSMENT | AMOUNT DUE | ASSESSED BY |
|--|---------|---------------------|------------|-------------|
| FOR ZONING (ZONING ADMINISTRATOR):                   |         |                     |            |             |
| <input type="checkbox"/> LOCATIONAL / ZONING OF LAND |         |                     |            |             |
| FOR BUILDING / STRUCTURE (OBO):                      |         |                     |            |             |
| <input type="checkbox"/> FILING FEE                  |         |                     |            |             |
| <input type="checkbox"/> G FEE                       |         |                     |            |             |
| <input type="checkbox"/> LINE AND GRADE (Geodetic)   |         |                     |            |             |
| <input type="checkbox"/> FENCING                     |         |                     |            |             |
| <input type="checkbox"/> ARCHITECTURAL               |         |                     |            |             |
| <input type="checkbox"/> CIVIL / STRUCTURAL          |         |                     |            |             |
| <input type="checkbox"/> ELECTRICAL                  |         |                     |            |             |
| <input type="checkbox"/> MECHANICAL                  |         |                     |            |             |
| <input type="checkbox"/> SANITARY                    |         |                     |            |             |
| <input type="checkbox"/> PLUMBING                    |         |                     |            |             |
| <input type="checkbox"/> ELECTRONICS                 |         |                     |            |             |
| <input type="checkbox"/> INTERIOR                    |         |                     |            |             |
| <input type="checkbox"/> SURCHARGES                  |         |                     |            |             |
| <input type="checkbox"/> PENALTIES                   |         |                     |            |             |
| FOR FIRE SAFETY (BFP):                               |         |                     |            |             |
| <input type="checkbox"/> FIRE CODE CONSTRUCTION TAX  |         |                     |            |             |
| <input type="checkbox"/> HOTWORKS                    |         |                     |            |             |
| TOTAL  |         |                     |            |             |

TERMS AND CONDITIONS:

1.

The Owner/Applicant shall accomplish the prescribed Application Form, with the assistance of the professional/s and/or the Architect/Civil Engineer, hired/commissioned by him/her as full-time construction works, by filling up the necessary data / information required thereat.

2.

The fully accomplished prescribed Application Form, duly notarized, shall be submitted to the concerned Building Official, accompanied by the various applicable ancillary and accessory permits, plans and and sealed by the corresponding design professionals who shall be responsible for the comprehensive and of the plans in compliance to the National Building Code of the Philippines (PD 1096), its Revised IRR and all referral codes and professional regulatory laws, together with the other documentary requirements pursuant 302 of PD 1096 and its Revised IRR.

JESUS P. CAWIGAN, JR.  
BUILDING OFFICIAL