

Republic of the Philippines  
 City of Imus  
 Province of Cavite  
**OFFICE OF THE BUILDING OFFICIAL**  
**WIRING PERMIT**

APPLICATION NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EP NO

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BUILDING PERMIT NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**BOX 1 (TO BE ACCOMPLISHED IN PRINT BY THE OWNER/APPLICANT)**

OWNER/APPLICANT	LAST NAME	FIRST NAME	M.I.	TIN
FOR CONSTRUCTION OWNED BY AN ENTERPRISE		FORM OF OWNERSHIP	USE OR CHARACTER OF OCCUPANCY	
ADDRESS: NO.,	STREET,	BARANGAY,	CITY/MUNICIPALITY	ZIP CODE
TELEPHONE NO				
LOCATION OF CONSTRUCTION: LOT NO. _____		BLK NO. _____		TCT NO. _____
STREET _____		BARANGAY _____		
		CITY/ MUNICIPALITY OF _____		
<b>SCOPE OF WORK</b>				
<input type="checkbox"/> NEW INSTALLATION		<input type="checkbox"/> RECONNECTION OF SERVICE ENTRANCE		<input type="checkbox"/> RELOCATION OF SERVICE ENTRANCE
<input type="checkbox"/> ANNUAL INSPECTION		<input type="checkbox"/> SEPARATION OF SERVICE ENTRANCE		<input type="checkbox"/> OTHERS (Specify) _____
<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> UPGRADING OF SERVICE ENTRANCE		
<b>SUMMARY OF ELECTRICAL LOADS/CAPACITIES APPLIED FOR</b>				
TOTAL CONNECTED LOAD _____ kVA		TOTAL TRANSFORMER CAPACITY _____ kVA		TOTAL GENERATOR/UPS CAPACITY _____ kVA

**BOX 2 (TO BE ACCOMPLISHED IN PRINT BY THE DESIGN PROFESSIONAL)**

<b>DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS</b>		
_____ Date _____ <b>PROFESSIONAL ELECTRICAL ENGINEER</b> (Signed and Sealed Over Printed Name)	Address	
	PRC. No	Validity
	PTR. No	Date Issued
	Issued at	TIN

**BOX 3**

<b>SUPERVISOR / IN-CHARGE OF ELECTRICAL WORKS</b>		
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER <input type="checkbox"/> REGISTERED MASTER ELECTRICIAN		
_____ Date _____ (Signed and Sealed Over Printed Name)		
PRC. No	Validity	
PTR. No	Date Issued	
Issued at	TIN	
Address		

**BOX 4**

<b>BUILDING OWNER</b>		
_____ Date _____ (Signature Over Printed Name)		
Address		
C.T.C. No.	Date Issued	Place Issued

**BOX 5**

<b>WITH MY CONSENT: LOT OWNER</b>		
_____ Date _____ (Signature Over Printed Name)		
Address		
C.T.C. No.	Date Issued	Place Issued