



## SIGN PERMIT

APPLICATION NO.

SP NO..

**BOX 1 ( To be accomplished by designing Architect/Civil Engineer, in print):**

|   |                   |   |                           |
|---|-------------------|---|---------------------------|
| NAME OF APPLICANT: Last Name First Name M.I.  |                   |   | Tax Identification Number |
| For Construction owned  | Form of Ownership | Main economic Activity/ Kind of Bus.            |                           |
| ADDRESS:  | No. of Street     | Barangay  | City/Municipality         |
| LOCATION:   | No. of Street     | Barangay  | City/Municipality         |
| SCOPE OF WORK:  |                   |   |                           |
| <input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Renovation <input type="checkbox"/> Demolition <input type="checkbox"/> others |                   |   |                           |
| TYPE OF SIGN:   |                   | MAKE ( Display Surface)                         |                           |
| <input type="checkbox"/> Well   |                   | <input type="checkbox"/> Neon                   |                           |
| <input type="checkbox"/> Projecting   |                   | <input type="checkbox"/> Panaflex               |                           |
| <input type="checkbox"/> Roof (max. of 6.0 meters)  |                   | <input type="checkbox"/> Cloth/Canvas           |                           |
| <input type="checkbox"/> Self-supporting (Above 6.0 meters)   |                   | <input type="checkbox"/> G.I. Sheets            |                           |
| <input type="checkbox"/> Others (Specify) _____   |                   | <input type="checkbox"/> Others (Specify) _____ |                           |
| TEMPORARY SIGNS(Designing Arch't./CE not necessary)   |                   | TYPE OF SIGN STRUCTURE:                         |                           |
| <input type="checkbox"/> STREAMER   |                   | <input type="checkbox"/> WOODEN                 |                           |
| <input type="checkbox"/> POSTERS  |                   | <input type="checkbox"/> STEEL                  |                           |
| <input type="checkbox"/> OTHERS (SPECIFY) _____   |                   | <input type="checkbox"/> Others (specify) _____ |                           |

**BOX 2 ( To be accomplished by the Receiving & Recording Section)**

|   |  |
|---|--|
| LOT OR INSTALLATION SITE DOCUMENTS<br>( THREE SETS EACH )<br><br><input type="checkbox"/> LOT TITLE<br><input type="checkbox"/> LEASE /RENTAL CONTRACT<br><input type="checkbox"/> LOT/BUILDING OWNER'S AUTHORITY<br><input type="checkbox"/> OTHERS [ Specify] | SIGN PLANS AND DOCUMENTS<br><br><input type="checkbox"/> PERSPECTIVE,SITE DEV'T. PLAN <input type="checkbox"/> MECHANICAL PLAN<br><input type="checkbox"/> SPECIFICATIONS<br><input type="checkbox"/> BILL OF MAT'LS AND COST ESTIMATES<br><input type="checkbox"/> STRUCTURAL ANALYSIS & COMPUTATIONS |
|---|--|

CLEARED AS TO ZONING REQUIREMENTS

CLEARED AS TO TOURISM:

\_\_\_\_\_  
 CITY ZONING OFFICE R

\_\_\_\_\_  
 CITY TOURISM OFFICER

**BOX 3 ( To be accomplished by the Building Official)**

|  |   |
|--|---|
| <b>ACTION TAKEN:</b><br>PERMIT is hereby GRANTED subject to the following conditions:<br>1. That the SIGN shall be installed in conformity with Chapter 20 of P.D.1096 and Rule V of its Implementing Rules and Regulation<br>2. In case of Electronic or neon signs, a corresponding electrical permit therefore shall be secured.<br>3. This permit must kept in the premises of the establishment wherein the sign is installed for inspection purposes.<br><br>NOTE: THIS PERMIT MAYBE CANCELLED OR REVOKED PURSUANT TO SECTION 305 AND 306 OF THE NATIONAL BUILDING CODE (PD 1096) AND WHEN PUBLIC INTEREST SO DEMANDS. | <b>APPROVED:</b><br><br><br><br><br><br><br><br><br><br>_____<br>DATE |
|--|---|

**BOX 4 ( To be accomplished by Designing Architect/ Civil Engineer in print)**

|                                      |   |   |
|--------------------------------------|---|---|
| <b>TOTAL ESTIMATED COST</b><br>_____ | <b>COST OF EQUIPMENT INSTALLED</b><br>_____ | <b>Total surface Area</b> _____<br><b>sq.m.</b><br><b>Proposed Date of construction</b> _____<br><b>Expected Date of Completion</b> _____ |
|--------------------------------------|---|---|

**BOX 5 ( To be accomplished by the Division/Section Concerned)**

|   |                      |                |                 |             |                       |                      |
|---|----------------------|----------------|-----------------|-------------|-----------------------|----------------------|
| <b>NOTED:</b><br>_____<br><b>Chief, Processing Div./Sec</b> | <b>PROGRESS FLOW</b> |                |                 |             |                       |                      |
|   | <b>TIME</b>          | <b>IN DATE</b> | <b>OUT TIME</b> | <b>DATE</b> | <b>ACTION/REMARKS</b> | <b>PROCESSED BY:</b> |
|   |                      |                |                 |             |                       |                      |
| <b>RECEIVING &amp; RECORDING</b>                            |                      |                |                 |             |                       |                      |
| <b>LAND USE AND ZONING</b>                                  |                      |                |                 |             |                       |                      |
| <b>ARCHITECTURAL</b>  |                      |                |                 |             |                       |                      |
| <b>STRUCTURAL</b>   |                      |                |                 |             |                       |                      |
| <b>SANITARY</b>   |                      |                |                 |             |                       |                      |
| <b>ELECTRICAL</b>   |                      |                |                 |             |                       |                      |
| <b>MECHANICAL</b>   |                      |                |                 |             |                       |                      |
| <b>ELECTRONICS</b>  |                      |                |                 |             |                       |                      |

We hereby affix our hands signifying our conformity to the information herein setforth

|  |                    |                 |   |                    |                 |
|--|--------------------|-----------------|---|--------------------|-----------------|
| <b>BOX 6 ( To be accomplished by designer)</b>   |                    |                 | <b>BOX 9 ( To be accomplished by the Structural Designer)</b>   |                    |                 |
| <b>ARCHITECT/CIVIL ENGR./ PRC NO.</b><br>(Signed & Sealed Plans/Specifications<br>Print Name | <b>PRC NO.</b>     |                 | <b>CIVIL ENGINEER/STRUCTURAL ENGINEER</b><br>Signed & Sealed Struct'l Design Analysis & comp.<br>Print Name | <b>PRC NO.</b>     |                 |
| <b>Address</b>   |                    |                 | <b>Address</b>  |                    |                 |
| <b>PTR NO.</b>   | <b>DATE ISSUED</b> | <b>P-ISSUED</b> | <b>PTR NO.</b>  | <b>DATE ISSUED</b> | <b>P-ISSUED</b> |
| <b>SIGNATURE</b>   |                    | <b>TIN</b>      | <b>SIGNATURE</b>  |                    | <b>TIN</b>      |

**BOX 7 (To be accomplished by the Construction-in-Charge)**

**BOX 10 ( To be accomplished by Lot Owner)**

|   |                    |                     |                      |
|---|--------------------|---------------------|----------------------|
| <b>ARCHITECT/CIVIL ENGINEER In-charge of Construction</b> | <b>PRC NO.</b>     | <b>TCT/OCT NO.</b>  | <b>TAX Dec. No.</b>  |
| <b>Print Name:</b>  |                    | <b>Print Name:</b>  |                      |
| <b>ADDRESS</b>  |                    | <b>ADDRESS</b>      |                      |
| <b>PTR NO.</b>  | <b>DATE ISSUED</b> | <b>PLACE ISSUED</b> | <b>RES. CERT. NO</b> |
| <b>SIGNATURE</b>  |                    | <b>TIN</b>          | <b>SIGNATURE</b>     |

**BOX 9 (TO BE ACCOMPLISHED BY THE APPLICANT)**

|   |                       |                    |                     |
|---|-----------------------|--------------------|---------------------|
| <b>SIGNATURE</b><br>_____<br><b>APPLICANT</b> | <b>RES. CERT. NO.</b> | <b>DATE ISSUED</b> | <b>PLACE ISSUED</b> |
|---|-----------------------|--------------------|---------------------|