

Republic of the Philippines
 City/Municipality of Imus
 Province of Cavite

OFFICE OF THE BUILDING OFFICIAL

SIGN PERMIT

APPLICATION NO.

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SP NO

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BUILDING PERMIT NO.

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BOX 1 (TO BE ACCOMPLISHED 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		ZIPCODE	TELEPHONE NO	
LOCATION OF CONSTRUCTION:			LOT NO. _____	BLK NO. _____	TCT NO. _____	TAX DEC. NO. _____				
STREET _____			BARANGAY _____		CITY/ MUNICIPALITY _____					
SCOPE OF WORK										
<input type="checkbox"/> NEW CONSTRUCTION			<input type="checkbox"/> RENOVATION _____			<input type="checkbox"/> DEMOLITION _____				
<input type="checkbox"/> ERECTION			<input type="checkbox"/> CONVERSION _____			<input type="checkbox"/> ANCILLARY BUILDING/STRUCTURE _____				
<input type="checkbox"/> ADDITION			<input type="checkbox"/> REPAIR _____			<input type="checkbox"/> OTHERS (Specify) _____				
<input type="checkbox"/> ALTERATION			<input type="checkbox"/> MOVING _____			<input type="checkbox"/> _____				
USE OR CHARACTER OF OCCUPANCY										
A. Type of Display -										
1. <input type="checkbox"/> Neon			2. <input type="checkbox"/> Illuminated			2. <input type="checkbox"/> Double Face		3. <input type="checkbox"/> Multi-Media		
1. <input type="checkbox"/> Business Sign, Wall Type			4. <input type="checkbox"/> Business Sign, Temporary			3. <input type="checkbox"/> Painted-on			4. <input type="checkbox"/> Other	
2. <input type="checkbox"/> Business Sign, Projecting Type			5. <input type="checkbox"/> Advertising Sign, Ground Type			7. <input type="checkbox"/> Advertising Sign, Wall Type			8. <input type="checkbox"/> Advertising Sign, Other	
3. <input type="checkbox"/> Business Sign, Ground Type			6. <input type="checkbox"/> Advertising Sign, Wall Type			At (m ²) = _____				
C. Display Size/Face: L (m) = _____ W (m) = _____										

BOX 2 (TO BE CHECKED, RECEIVED AND RECORDED)

ACCOMPANYING DOCUMENTS: [FIVE (5) SETS EACH SIGNED AND SEALED BY RESPONSIBLE DESIGN PROFESSIONAL]	
<input type="checkbox"/> CERTIFIED XEROX COPY OF TCT	<input type="checkbox"/> XEROX COPY OF LOT PLAN AND SITE DEVELOPMENT PLAN
<input type="checkbox"/> IF NOT OWNED BY THE APPLICANT IN ADDITION TO THE CERTIFIED XEROX COPY OF TCT, XEROX COPY OF CONTRACT OF LEASE	<input type="checkbox"/> PLANS OF SIGN STRUCTURES, STRUCTURAL DESIGN & COMPUTATIONS
<input type="checkbox"/> XEROX COPY OF TAX DECLARATION AND LATEST REALTY TAX RECEIPT	<input type="checkbox"/> SPECIFICATIONS AND COST ESTIMATES

BOX 3

DESIGN PROFESSIONAL, PLANS AND SPECIFICATIONS	
_____ Date _____	
ARCHITECT AND/OR CIVIL ENGINEER (Signed and Sealed Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 4

FULL-TIME INSPECTOR AND SUPERVISOR OF CONSTRUCTION WORKS	
_____ Date _____	
ARCHITECT OR CIVIL ENGINEER (Signed and Sealed Over Printed Name)	
Address	
PRC. No	Validity
PTR. No	Date Issued
Issued at	TIN

BOX 5

_____ Date _____			
APPLICANT (Signature Over Printed Name)			
Address			
C.T.C. No.	Date Issued	Place Issued	TIN