



Republic of the Philippines
DEPARTMENT OF LABOR AND EMPLOYMENT
Regional Office _____

APPLICATION FOR POWER PIPING LINES INSTALLATION

1. Name of Establishments: _____
2. Complete Business Address: _____
3. Owner/Manager: _____
4. Address: _____
5. Where Piping Lines are installed: _____

6. Nature of work process or service: _____
7. Identification of Piping Lines distributions, use separate sheet listing all identified pipes, valves and fittings specifying all the necessary data and specification such as brand name, ASTM specification, ASA Code, maximum pressure, operating pressure, schedule number, pipe wall thickness, inside and outside diameter, equivalent length of each pipe line, relieving capacity, etc.

8. Total equivalent length (L1 + L2 + L3 + ...) _____ Ft.
9. Total volume or capacity (V1 + V2 + V3 +) _____ cu.ft.
10. Contents of piping lines _____
11. Printed Name and Signature of Person
to Supervise the installation: _____

PME Registry No.	_____	Date:	_____
P.T.R. No.	_____	Date:	_____
TIN:	_____		
12. Other accessories or equipment: _____

Printed Name and Signature of Owner/Manager

Company TIN: _____
Company Tel. No. _____

Applicant No. _____

