

City of Lebanon

Date Received: _____

400 South 8th Street, Lebanon, PA 17042
Phone: (717) 228-4490 Fax: (717) 274-2482

Building/Zoning/Sign Permit Application

Residential (circle one) single/detached duplex semi-detached row-home / townhouse
Multi-Family (# of units _____) Rental License # _____

Commercial / Existing use: _____ Proposed use: _____

Project Type: *(see reverse side for additional projects)*

Dwelling Addition Renovation Detached Garage (>1000 sq ft) Deck (above 30")

Pool (___ Above Ground ___ In-Ground ___ Storable) Electrical HVAC Plumbing

Change of Use Other: _____

Project Description: _____

Project Address: _____ City _____ State _____ Zip _____

Applicant Name: (Print Clearly) _____

Mailing Address: _____ City _____ State _____ Zip _____

Phone: _____ Email: _____ Fax: _____

Project Cost: _____ Total Square Footage: _____

Signature

Date

Contractor Information*

*Contractor must provide a Certificate of Insurance listing the City of Lebanon as the certificate holder.

Contractor: _____ Workers Compensation Insurance: Yes No*

State Registration # _____ * Attach notarized exemption form

Owner Information: (if different from applicant)

I am the owner of this property and I am assuming all insurance responsibility for this permit.

Owner Name: _____ Phone # _____

Owner's Address: _____ City _____ State _____ Zip _____

Owner's Signature: _____

The following documents must be submitted with all applications:

⇒ Two complete sets of detailed building construction and floor plans (Commercial & Mixed Use plans require 3 sets that are signed and sealed by a licensed design professional)

⇒ For HVAC projects - Public Safety Fire Inspection Permit # _____ (if required)

Building Code Official may enter a building, structure or premises during normal business hours or at a time agreed to by owner or owner's agent to perform inspections or to enforce the Uniform Construction Code.

Building Code Official: _____ Date: _____

