



**Failure to fill out the permit application completely may result in delays or rejection of application.**

Applicant Name	County	
Street Address	Parcel	Zoning

Last Name or Business	First Name	Phone Fax	
Address	City	State	Zip

All subdivision plans must be recorded at Lebanon County Recorder of Deeds, along with storm water agreements. Bonds and/or fees must be paid prior to permits or plans being released.

Email \_\_\_\_\_

*All 7 pages of this Application need to be submitted to the West Lebanon Township along with 3 sets of stamped plans. Spec Sheets must be included.*

Updated August 2022

## Type of Application

<input type="checkbox"/> Building <input type="checkbox"/> Plumbing	<input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical	<input type="checkbox"/> Accessibility <input type="checkbox"/> Fire Suppression	<input type="checkbox"/> Fire Alarm <input type="checkbox"/> Occupancy	<input type="checkbox"/> Other _____
<b>Type of Work (Check all that apply)</b> <input type="checkbox"/> New Construction <input type="checkbox"/> Additional Construction <input type="checkbox"/> Alteration/Structure/Egress Change <input type="checkbox"/> Repair/Renovations IBC IEBC (1 2 3) <input type="checkbox"/> Foundation Permit <input type="checkbox"/> Change of Use / Occupancy <input type="checkbox"/> Initial Certificate of Occupancy		<b>Type of Construction (Check all that apply)</b> <input type="checkbox"/> IA <input type="checkbox"/> IVv <input type="checkbox"/> IBv <input type="checkbox"/> IIA <input type="checkbox"/> VB <input type="checkbox"/> IIB <input type="checkbox"/> VA <input type="checkbox"/> IIIA <input type="checkbox"/> Separate Use <input type="checkbox"/> IIIB <input type="checkbox"/> Non-separated Use		Previous L&I Certificate #(s)  Proposed Code/Year for this Project
<b>Use Groups (List all)</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> A1      <input type="checkbox"/> H1      <input type="checkbox"/> R1  <input type="checkbox"/> A2      <input type="checkbox"/> H2      <input type="checkbox"/> R2  <input type="checkbox"/> A3      <input type="checkbox"/> H3      <input type="checkbox"/> R3  <input type="checkbox"/> A4      <input type="checkbox"/> H4      <input type="checkbox"/> R4  <input type="checkbox"/> A5      <input type="checkbox"/> H5           </div> <div style="width: 33%;"> <input type="checkbox"/> B      <input type="checkbox"/> I1      <input type="checkbox"/> S1  <input type="checkbox"/>      <input type="checkbox"/> I2      <input type="checkbox"/> S2  <input type="checkbox"/> E      <input type="checkbox"/> I3      <input type="checkbox"/> U  <input type="checkbox"/>      <input type="checkbox"/> I4           </div> <div style="width: 33%;"> <input type="checkbox"/> F1  <input type="checkbox"/> F2      <input type="checkbox"/> M           </div> </div>		<b>Fire Separation</b> <input type="checkbox"/> Single Use <input type="checkbox"/> Separated Uses <input type="checkbox"/> Non-Separated Mixed Use <input type="checkbox"/> Incidental Use Main Use _____		<b>Fire Suppression ( list all)</b> <b>Type:</b> <input type="checkbox"/> Wet (Water) # _____ Standard _____  <input type="checkbox"/> Dry (Water) # _____ Standard _____  <input type="checkbox"/> Chemical # _____ Standard _____ Type _____
<b>Proposed Start Date:</b> _____		<b>Projected Finish Date:</b> _____		<b>Total Value of all Work:</b> _____

\*\* Attach additional sheets, if necessary, to provide complete listing of systems as requested in the sections below.

### Electrical Permit Information

☐ Not applicable to project

<b>Electrical Service Size</b> <div style="display: flex; justify-content: space-between;"> <div>           _____ Amps            _____ Volts            _____ Ø         </div> <div>           Power Company Name _____            Power company Job # _____         </div> </div>							
General Outlets: _____ 120 volts      _____ 240 volts Circuits: _____ 2 wire      _____ 3 wire      _____ 4 wire							
Device Name	Watts	Amps	#	Device Name	Watts	Amps	#

### Plumbing Permit Information

☐ Not applicable to project

<b>Water Service Size</b> <div style="display: flex; justify-content: space-between;"> <div>           _____ In. Dia            _____ Pressure @ main (PSI)            Supply Branches: _____ Hot      _____ Cold         </div> <div>           Water Company Name _____            Water company Job # _____            Supply @ main (GPM)            Total Demand: _____ GPM      _____ PSI         </div> </div>			
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## Plumbing Permit Information Continued

Fixture Name	GPM	PSI	#	Fixture Name	GPM	PSI	#
<b>Sewer</b> Sewer Company Name _____ Job # _____ Size of Main _____ in.    Size of Lateral _____ in.    Capacity of System _____ DFU							
<b>Septic</b> S.E.O. Company Name _____ Job # _____ Size of Tank _____ gal.    Size of Lateral _____ in.    Capacity of System _____ DFU Size of Building Drain _____ in.    Total Calculated Outflow _____ DFU							
Fixture Name	Drain (in)	Vent (in)	DFU	Fixture Name	Drain (in)	Vent (in)	DFU
Grease Trap _____ gal.    Garbage Disposal # _____    Air Admittance Valve # _____    Backflow Preventer # _____							

## Mechanical Permit Information

☐ Not applicable to project

Number of Systems _____				
System	BTU	Fuel	Vent Type (+ R ? )	Function ( Heat? Cool? Water? Vent?)

Fuel Gas: Yes _____ No _____		Public: Yes _____ No _____		Piping Type(s) _____	
Oil: Yes _____ No _____		Tank Capacity _____		Underground: Yes _____ No _____	
Electric: Yes _____ No _____		Total KW _____			

Duct Detectors	Yes _____ No _____	Number of Zones _____	Type _____
Kitchen Hood	Yes _____ No _____	Fire Suppression System	Yes _____ No _____ Type _____
Hazardous Exhaust	Yes _____ No _____	Fire Suppression system	Type _____
Fire Dampers	Yes _____ No _____	Smoke Dampers	
Smoke Control System	Yes _____ No _____	Governing Code Sections(s)	_____
Regular Exhaust Fans	Yes _____ No _____	Number Duct Type (s)	_____
Fireplace	Yes _____ No _____	Number _____	
Gas	Yes _____ No _____	Piping Type _____	Vent Type _____
Masonry	Yes _____ No _____	Material Type _____	Chimney Type _____
Electric	Yes _____ No _____	Kw _____	



**Fire Alarm Permit Information**☐ Not applicable to project

Requiring Code Section \_\_\_\_\_

Types of Wirings \_\_\_\_\_

Battery Back up Yes \_\_\_\_\_ No \_\_\_\_\_ Generator Yes \_\_\_\_\_ No \_\_\_\_\_

Number of Zones \_\_\_\_\_

Types(s) of System(s) \_\_\_\_\_  
Smoke, Heat, Infrared, Ultraviolet, etc..

Types of Special Applications \_\_\_\_\_

Types of Initiating Tests \_\_\_\_\_

**Fire Suppression System Permit**☐ Not applicable to project

Requiring Code Section \_\_\_\_\_

Number of System(s) \_\_\_\_\_

Design NFPA 13 Yes \_\_\_\_\_ No \_\_\_\_\_ Wet System Yes \_\_\_\_\_ No \_\_\_\_\_ Number \_\_\_\_\_

NFPA 13 R Yes \_\_\_\_\_ No \_\_\_\_\_ Dry System Yes \_\_\_\_\_ No \_\_\_\_\_ Number \_\_\_\_\_

System Type	Piping Type	System Design Pressure (PSI)	System Design Capacity (GPM)

Alternate Systems Yes \_\_\_\_\_ No \_\_\_\_\_ Pre-Action Yes \_\_\_\_\_ No \_\_\_\_\_ Number of Systems \_\_\_\_\_

System Type	Chemical	Capacity	Reference Standards(s)

**Storm Water Review**☐ Not applicable to project

Storm Water Plans	Plans / Letters attached	Yes _____ No _____
ENS Plan (Lebanon County Conservation District )	Plans / Letters attached	Yes _____ No _____

**Additional Utilities needed**☐ Not applicable to project

Permit Needed	Application / Spec Sheet attached	Plans included / attached
Gas	Yes _____ No _____	Yes _____ No _____
Electrical	Yes _____ No _____	Yes _____ No _____
Public Water	Yes _____ No _____	Yes _____ No _____
Public Sewer	Yes _____ No _____	Yes _____ No _____
Curb and Sidewalk	Yes _____ No _____	Yes _____ No _____
Street Excavation / HOP	Yes _____ No _____	Yes _____ No _____

### General Contractor

General Contractor / Company \_\_\_\_\_

Contact Person \_\_\_\_\_ Are there other prime contractors Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes list separately)

Address \_\_\_\_\_

Phone \_\_\_\_\_ Office \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

### Architect

Architect in Responsible Charge \_\_\_\_\_

Lead Architect \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Office \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

### Structural Engineer

Firm \_\_\_\_\_

Lead Engineer \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Office \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

### Electrical Engineer

Firm \_\_\_\_\_

Lead Engineer \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Office \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

### Mechanical Engineer

Firm		
Lead Engineer		Contact Person
Address		
Phone	Office	Fax
Email		

### Plumbing Engineer

Firm		
Lead Engineer/Designer		Contact Person
Address		
Phone	Office	Fax
Email		

### Fire Alarm Engineer / Designer

Firm		
Lead Engineer		Contact Person
Address		
Phone	Office	Fax
Email		

### Fire Suppression Engineer / Designer

Firm		
Lead Engineer/Designer		Contact Person
Address		
Phone	Office	Fax
Email		

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### Notice

A list of inspections that will be required, based on the permit application and plan submission, can be obtained from the Code Official at the time of permit issuance. Noted inspection may be waived or additional inspections may be required, at the discretion of the Code Official, as deemed necessary in order to ensure Code Compliance. Inspection approval must be obtained from the work currently completed before proceeding to the next step of construction listed for each trade.

The Township contracts with Commonwealth Code Inspection Services (CCIS). All inspections will be conducted by CCIS with the exception of special inspections required by the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional; or as otherwise directed by the Township. Special Inspections shall be performed per the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional.

A special inspection program list shall be furnished to CCIS prior to the start of the project phase associated with the inspection. The list shall include name of company, corporate officers, address, and contract information along with accreditation and qualifications of individual inspectors.

The applicant or authorized representative must request all regular inspections directly through Commonwealth Code Inspection Service, Inc with at least 24 hours' notice to CCIS between 6:00 a.m. and 8:00 a.m. 717-664-2347 (main office) or 800-732-0043 (toll free - PA).

*Applicant's signature acknowledging that the above Notice was read:* \_\_\_\_\_

Date \_\_\_\_\_