



West Lebanon Township
 322 North 22nd Street, Lebanon, PA. 17046
 Phone # (717) 274-1598 Fax: (717) 274-5119

Application for Building Permit & Plan Review

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

Property Address

Applicant Name	County	
Street Address	Parcel	Zoning

Owner address

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

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner or record, and that I agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code Official or his delegated representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project.

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

Owner Signature: _____ Date _____

Phone _____ Fax _____ Office Phone _____

Email _____

Description of proposed project:

All 7 pages of the Plan Review / Building Application need to be submitted to the West Lebanon Township along with 3 sets of stamped building plans. Spec Sheets must be included.

Applications will be reviewed by the Code officer, Zoning officer and/or Commonwealth Code Inspection Services prior to issuance of a Permit.

Fixture Name	GPM	PSI	#	Fixture Name	GPM	PSI	#

Sewer Sewer Company Name _____ Job # _____
 Size of Main _____ in. Size of Lateral _____ in. Capacity of System _____ DFU

Septic 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 _____

Architect

Architect in Responsible Charge _____
Lead Architect _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Structural Engineer

Firm _____
Lead Engineer _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Electrical Engineer

Firm _____
Lead Engineer _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Mechanical Engineer

Firm _____
Lead Engineer _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Plumbing Engineer

Firm _____
Lead Engineer _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Fire Alarm Engineer / Designer

Firm _____
Lead Engineer/Designer _____ Contact Person _____
Street Address _____
City, State, Zip _____
Phone _____ Office _____ Fax _____
Email _____

Fire Suppression Engineer / Designer

Firm _____
Lead Engineer/Designer _____ Contact Person _____
Street Address _____
City, State, Zip _____
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 _____