

TOWN OF LEBANON

Dodge County
Lebanon, WI 53047

For Inspection Call
Phone: (262) 490-4141

Send Permits To:

Building Inspector
405 N. Prairie Dr • Summit, WI 53066

Make checks payable Town of Lebanon

Date _____

Building Permit # _____

Tax Key # _____

Phone () _____

Application For Building Permit

Owner Name _____

Address _____

Contractor _____ Phone () _____

Address _____

D.C. Contractor # _____ D.C. Qualifier # _____

Project Location _____

Project Description _____

Zoning District _____	Recert:	Footing Hgt.	Bond:	Setbacks:	Front ft.	Rear ft.	Left ft.	Right ft.
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Inspector Signature _____ Zoning Permit # _____

Permit Fees

No refunds on permits

Quantity

Fee

RESIDENTIAL - 1 and 2 Family

- Remodel / Addition - \$ 7.00 per M of valuation
- \$75.00 minimum
- Accessory Building - Up to 150 sq. ft. - \$50.00.....
- 150 - 600 sq. ft. - \$75.00.....
- Over 600 sq. ft. \$.20/sq. ft.
- New Building - \$.20/sq. ft.

COMMERCIAL - INDUSTRIAL

- New Building - \$.20/sq. ft.
- Remodel / Addition - \$ 7.00 per M of valuation
- \$75.00 minimum

AGRICULTURAL BUILDINGS

- New Building - Up to 2500 sq. ft.- \$.15/sq. ft. \$300.00 max, \$75 min.....
- Remodel / Addition - 2500 - 5000 sq. ft. - \$400.00.....
- Over 5000 sq. ft. - \$500.00

MECHANICAL & MISCELLANEOUS

- Decks, each - \$ 75.00
- Special Inspections - \$ 50.00

Permit to start construction of footings & foundation

- Residential - \$ 50.00
- Commercial - Industrial - \$ 75.00

OTHER - \$

Double fees shall be charged if work is started before permit is issued.....

Valuation: \$ _____ Ck # _____ Rec.'d by _____ Date Rec'd ___ / ___ / ___ TOTAL FEES: \$ _____

Conditions of Approval: **Does not include electrical or any other permits.** _____

The applicant agrees to comply with the Wisconsin UDC/IBC and other Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, express or implied, on the DSPS, or Municipality; and certifies that all the above information is accurate.

SIGNATURE OF APPLICANT _____ **DATE** _____