

Town of Lebanon, Maine
Application for Certificate of Occupancy

Building Permit # _____ Map/Lot _____

Address: _____

Property Owner: _____

Mailing Address: _____

Phone Number(s): _____

Email: _____

Name of Applicant: _____

Mailing Address: _____

Phone Number(s): _____

Email: _____

Type of Construction: (Please Check one)

☐ House

☐ Garage

☐ Shed

☐ Other

Please Describe: _____

Signatures of the following are required before certificate can be issued:

I certify that I have done all the work in my area of responsibility in accordance with all applicable codes.

General Contractor: _____ Date _____

Builder: _____ Date _____

License # _____

Electrician: _____ Date _____

License # _____

Plumber _____ Date _____

License # _____

Heating _____ Date _____

License # _____

Mason _____ Date _____

Signature of Applicant _____ Date _____

Signature of CEO _____ Date _____