Town Use Only			
File #			
Date Rec'd:			



Town of Lebanon Design Review Board Application

1.	Property Address:			
2.	Applicants Name:			
3.	Applicants Address:			
4.	Phone:	Cell Phone:	Fax:	
5.	Assessor's Map:	Assessor's Lot:	. <u></u>	
6.	Owner of Record (if different from above):			
7.	Owners Address (if different from above): Phone:			
8.	Engineer/Surveyor Name (if applicable):			
9.	Engineer/Surveyor Address	or Address: Phone:		
	Enforcement Officer to he	p determine compilance.		
11.	submitted all required do Regulations. I hereby aut town staff to enter upon	cumentation and am in complia horize the Planning and Zoning the property for the purpose of	e information is correct and that I have nce with the Town of Lebanon Zoning Commission, Design Review Board and inspection, promulgation of construction Town of Lebanon Zoning Regulations.	
Rec	cord Owner Signature:		Date:	