

CITY OF LEBANON  
PLANNING DEPARTMENT  
401 S. MERIDIAN STREET LEBANON, IN. 46052  
765-482-8845 / 765-482-8845 Fax 765-482-8873

**2007 LEBANON UTILITIES SEWER & WATER FEE CALCULATIONS REQUEST**

INSTRUCTIONS:

- 1) Complete every part of this form. This request may be denied if any part is left blank.
- 2) Submit a site plan.
- 3) Either type or print all information in ink.

The City of Lebanon requests the following supplemental information for the purpose of calculating sewer connection and availability fees for the project referenced below in accordance with local ordinance 04-09. If any of the project information below is modified or changed, the sewer fee may be adjusted to reflect the change.

1. LOCATION OF PROPOSED ACTIVITY

PROJECT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

2. OWNER OF PREMISES WHERE PROPOSED ACTIVITIES WILL TAKE PLACE

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
CONTACT PERSON \_\_\_\_\_

3. CERTIFICATION

I hereby certify I have the authority to make the foregoing application that the applicant and accompanying site plan are correct. I further affirm by signature and under the penalty for perjury that the foregoing is true.

\_\_\_\_\_  
SIGNATURE DATE

A. LAND USE DESCRIPTION. Identifying any existing or proposed land uses or any expansion/addition or existing uses.

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B. PROJECT SIZE/AREA. Identify the square footage of all proposed buildings or structures. Specify square footage dedicated to individual activities within the site/building.

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C. NUMBER OF EMPLOYEES PER SHIFT. Indicate the total number of employees to be located at the proposed site. Include existing and future employees. Indicate the number of shifts per day.

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D. Miscellaneous - List the number of seats (if restaurant) number of chairs (if Dentist) number of exam rooms (if medical use).

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For office use only  
Application Fee (EDU) \_\_\_\_\_ Availability Fee (EDU) \_\_\_\_\_  
Connection Fee (EDU) \_\_\_\_\_ TOTAL CHARGES \_\_\_\_\_