



"City of the Cedars"

CITY OF LEBANON

RESIDENTIAL INSPECTION APPLICATION

Property To Be Inspected:

Street Address: _____ Unit Number: _____

Property is/will be: _____ Vacant _____ Owner Occupied _____ Tenant Occupied

Property Owner/Agent:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail _____

I, the undersigned do hereby certify that I am authorized to submit this application for a Residential Inspection at the above address. I understand no inspection will be conducted, or an occupancy permit issued until full payment of \$100.00 is made to the City of Lebanon.

I am responsible to ensure the residence is available at the scheduled appointment time with all utilities turned on for inspection and that all fees are paid. An additional fee of \$60 will be required for failure to show up for an inspection without 24 hr. notification or if a re-inspection is required. I am responsible for having any violations corrected and meet the minimum requirements as declared by City Ordinance before an occupancy permit is issued, or anyone is allowed to occupy the residence. Failure to comply with any of the above requirements may result in a civil citation and/or fine.

Print Name: _____ Date: ____/____/____

Signature: _____ Telephone: _____

Initial inspection Fee Amount: \$ 100.00 Paid: ____/____/____ Cash/ Card/ Check #: _____

Inspector: _____ Date: ____/____/____ Result: _____

Re-inspection Fee Amount: \$60.00 Paid: ____/____/____ Cash/ Card/ Check #: _____

Inspector: _____ Date: ____/____/____ Result: _____

Occupancy Limitation: Related: _____ Unrelated: _____

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