



**Sellersburg Building Commission**  
**103 S New Albany St**  
**Sellersburg, IN 47172**  
**P: 812-246-3821 ext. 227**  
**E: permitting@sellersburg.org**

## COMMERCIAL BUILDING PERMIT APPLICATION FORM

STATE PROJECT NO. \_\_\_\_\_ DATE: \_\_\_\_\_

### APPLICANT INFORMATION

PROPERTY OWNER: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Address City State Zip

APPLICANT: \_\_\_\_\_ ORG/BUSINESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Address City State Zip

PROJECT CONTACT (IF DIFFERENT THAN APPLICANT) \_\_\_\_\_ EMAIL: \_\_\_\_\_

### PROPERTY INFORMATION

ADDRESS: \_\_\_\_\_  
Address City Zip Township

ZONING: \_\_\_\_\_ Zoning \_\_\_\_\_ DESIGNER OF RECORD \_\_\_\_\_ Name \_\_\_\_\_

OVERLAY:  YES  NO DESIGNER REGISTRATION SEAL NO. \_\_\_\_\_

GATEWAY:  Yes  No FLOODPLAIN:  Yes  No TAP FEES PAID:  Yes  No  
 AIRPORT:  Yes  No E.C./LOMA-CL/F/R:  Yes  No SEWER/WATER:  Yes  No

FOR OFFICE USE ONLY	CONST CODE	OCCUPANCY CODE	CONST TYPE
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### PROJECT INFORMATION

\$ \_\_\_\_\_ \$ \_\_\_\_\_  
**Total Valuation Interior Remodel Valuation (If applicable)**

PROJECT TYPE:  NEW  ADDITION  INTERIOR REMODEL  OTHER

USE: \_\_\_\_\_  
Current Use Proposed Use

BUILDING SIZE: \_\_\_\_\_  
1<sup>st</sup> Floor (sq/ft) 2nd Floor (sq/ft) 3rd Floor (sq/ft) Basement (sq/ft) Other Floor (sq/ft)

**PARCEL SIZE:**

Area (sq/ft)      Length (ft)      Width (ft)      Other (ft)

**SET BACKS:**

Front Lot Line (ft)      Side Lot line (ft)      Side Lot line (ft)      Rear lot line (ft)      Other (ft)

**FENCING:**

FENCING AS REGULATED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

**LANDSCAPING:**

LANDSCAPING AS REQUIRED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

**PARKING:**

PARKING AS REQUIRED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

**DUMPSTER ENCLOSURE:**

LOADING AS REQUIRED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

**OUTDOOR PATIO:**

AS REGULATED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

**OUTDOOR STORAGE:**

AS REGULATED BY ORDINANCE       Yes       No       N/A

VARIANCE APPROVAL

Approval Date

DESCRIBE VARIANCE (IF APPLICABLE)

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**CONTRACTORS**

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All contractors must be licensed and registered with our department. For more information on this go to [www.sellersburg.org](http://www.sellersburg.org)

**BUILDING:** \_\_\_\_\_  
**ELECTRICAL:** \_\_\_\_\_  
**PLUMBING:** \_\_\_\_\_  
**HEATING:** \_\_\_\_\_  
\_\_\_\_\_  
**OTHER:** \_\_\_\_\_  
**OTHER:** \_\_\_\_\_  
**OTHER:** \_\_\_\_\_

I certify the above to be true and accurate to the best of my knowledge.  
The Owner or Assignee obtaining this permit is responsible for determining the location of the property lines and conforming with the setback, height, and all other requirements of the Zoning Ordinance. Also, the restrictive covenant relating to the property may be more restrictive and should be checked.  
I hereby understand and agree that this structure will not be occupied until a final inspection has been carried out any approval given by the Building Commissioner (if applicable).

The undersigned Owner or Assignee does hereby accept the above responsibility.

_____ <b>APPLICANT SIGNATURE</b>	_____ <b>DATE</b>
_____ <b>PRINT NAME</b>	
_____ <b>VERIFY PLAN REVIEW CONTACT IF DIFFERENT THAN APPLICANT</b>	_____ <b>EMAIL</b>
	_____ <b>PHONE</b>