



Town of Sellersburg
Building Commission
 316 E Utica
 Sellersburg, Indiana 47172
 Phone: 812-246-3821 Web Site: <https://www.sellersburg.org>

HVAC-MECHANICAL PERMIT APPLICATION

I hereby certify that I am the owner of record or the owner of record authorizes the proposed work and I attest that I currently maintain an active State HVA/C Contractors License.

Signature of Owner or Contractor _____ Date _____

Location: _____ Subdivision: _____ Lot # _____
(street address is required for all applications) (If applicable) (If applicable)

Please provide a brief description of your project below: _____

Estimated Cost: \$ _____ Related Building Permit #: _____

Contractor _____ State Lic. #: _____
 Address: _____ Phone: _____
 City: _____ State: _____ Zip: _____ Cell: _____
 HVAC Contractor: _____ Lic. #: _____
 Phone: _____ Email: _____

Owner: _____ Email: _____
 Address: _____ Phone: _____
 City: _____ State: _____ Zip: _____ Cell: _____

<u>Unit Type</u>	<u>HVAC</u>	<u>Unit Type</u>	
Combination Furnace and AC (New):	_____	PTAC or Split Units	_____
Combination Furnace and AC(replacement)	_____	Range Hood with Suppression (type 1)	_____
Furnace or AC only	_____	Range Hood without Suppression	_____
Roof Top Units (RTU)	_____	Spray Booth Ventilation / exhaust fans	_____
Multi-Family, (3 family and Over), New	_____	Fireplace	_____
Multi-family (3 family and Over Addition/	_____		
Remodel/ Renovation	_____		

Equipment Type
 Gas Electric Oil Water to Air

Application Type

<input type="checkbox"/> New One & Two Family	<input type="checkbox"/> <u>New Commercial Class 1</u>
<input type="checkbox"/> Existing One & Two Family	<input type="checkbox"/> <u>Existing Commercial Class 1</u>
<input type="checkbox"/> Existing New Multifamily Apartments Existing Multifamily Apartments	

Signature of Owner or Agent _____ Date _____