## SELLERSBURG

## PLANNING DEPARTMENT

103 S. New Albany St Sellersburg, IN 47172 phone: 812.246.3821

| Is this a revision? If yes, permit number: _ | Yes | No                             |
|--|-----|--------------------------------|
|  |     | Date Stamp<br>Office Use Only  |
|  |     | ALC: NO. OF THE REAL PROPERTY. |

## BUILDING PERMIT APPLICATION FOR SINGLE-FAMILY AND TWO-FAMILY STRUCTURES

**PERMIT NUMBER:** 

| PROJECT LOCATION IN       | NFORMATION                              |                     |                                | TO THE TOTAL PROPERTY OF THE TOTAL PROPERTY |                             |
|---------------------------|---|---------------------|--------------------------------|---|-----------------------------|
| Site Address:             |   |                     | Parcel ID:                     |   |                             |
| Subdivision:              |   |                     |                                | Lot:  | Zoning                      |
| PROJECT DETAILS           |   |                     |                                |   |                             |
| Existing Site Use:        |   |                     | Project Start Date:            |   | Completion Date:            |
|                           | Valuation of Proj                       | ect: Structure:     | Land:                          |   |                             |
| PROPERTY USE              |   |                     | UTILITIES INFORMA              | TION  |                             |
| Single-Family Residential | Two                                     | -Family Residential | Type of Sewer Disposal:        | Public  | Other                       |
| OWNER INFORMATION         |   |                     | Type of Water Supply:          | Public  | Individual Well             |
| Name:                     |   |                     | - Type of Heating:             | Gas   | Oil                         |
| Contact Name:             |   |                     |                                | Electric  | Propane                     |
| Mailing Address:          |   |                     |                                |   |                             |
| City:                     | State:                                  | Zip:                | TYPE OF STRUCTURE              | E IMPROVEI  | MENT                        |
| Phone:                    | Fax:                                    |                     | New Single-Family St           | ructure   | Square Footage              |
| Email:                    | AND |                     | New Two-Family Struc           | cture   | Square Footage Per Unit     |
| CONTRACTOR INFORMATIO     | N                                       |                     | or Town House Basement: YES    | □ NO  |                             |
| Business Name:            |   |                     | Addition:                      |   | Square Footage              |
| Contact Name:             |   |                     | Remodel                        |   | Square Footage              |
| Mailing Address:          | 4-44-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- |                     | Accessory Structure:           |   | Square Footage              |
| City:                     | State:                                  | Zip:                | Electrical Upgrade             |   |                             |
| Phone:                    | Fax:                                    |                     | Moving Number of stories above | street level  | Total Height of Structure — |
| Email:                    |   |                     | Revision:                      |   |                             |
|                           |   |                     | Page 1 of 2                    |   |                             |

| TYPE OF SIT  | TE IMPROVEMI                       | ENT                |                 |              |                     |                      |   |   |
|--|------------------------------------|--------------------|-----------------|--------------|---------------------|----------------------|---|---|
| DRIVEWAY:  | New Width                          | Repair             | Length          | Reconstru    | ection              |                      |   |   |
| SIDEWALK:  | New Width                          | Repair             | Length          | ADA Curt     | Ramp                |                      |   |   |
| SANITARY SEW   | ER, TAP CONNEC                     | TION: Ne           | ew Re           | epair        | Conversion          | Septic               | Length                                  |   |
| ☐ Water Ma   | nin Extension                      | Length             |                 |              |                     |                      |   |   |
| Current Adopte   | ed Energy Complia                  | nce Method:        |                 |              |                     |                      |   |   |
|  | Prescriptiv                        | e (most restrictiv | re)             | Total U      | (allows building e  | envelope trade-offs) |   |   |
|  | Performan                          | ce (most flexible; | ; considers hea | ting, coolin | g, and water heatir | ng costs ONLY)       |   |   |
| Does the pro   | perty contain a fl                 | oodplain?          | ☐ YES           |              | NO                  |                      |   |   |
| Does the pro   | perty contain any                  | wetlands?          | ☐ YES           |              | NO                  |                      |   |   |
| INCOMPLETE APPLICATION WILL NOT BE PROCESSED   |                                    |                    |                 |              |                     |                      |   |   |
|  |                                    |                    |                 |              |                     |                      |   |   |
| CERTIFICA:   | TION & NOTIC                       | E OF INTENT        | TO COMPLY       | STATE        | MENT                |                      |   |   |
| I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction will conform to the regulations in the Building Code, the Unified Development Ordinance, Town of Sellersburg Construction Standards, the Stormwater Ordinances and Stormwater Standards Manual, the approved Plans and Specifications, IDEM requirements, any and all Local, County, and State requirements including private restrictions, if any, which may be imposed on the above described property.  I further certify the modifications to the site and erection of a structure to be completed with this project will not cause |                                    |                    |                 |              |                     |                      |   |   |
| any adverse drainage condition that would cause damage to adjoining public or private property as a result of this construction. Location of property lines, easement, and right of ways are the responsibility of the owner and/or applicant.   |                                    |                    |                 |              |                     |                      |   |   |
| I understand that this Permit will expire six (6) months after date of issuance, a one time extension of six (6) months and no more than one year to complete this project. If I do not begin or finish within the allowable time, this permit will be null and void.  |                                    |                    |                 |              |                     |                      |   |   |
| I further understand that all work associated with the issuance of this permit must be inspected and approved by the Town of Sellersburg at predetermined points in the construction process, and includes inspections by both the Planning and Engineering Departments.   |                                    |                    |                 |              |                     |                      |   |   |
|  | certify that the<br>ates of Occupa |                    |                 |              |                     |                      | cupied until proper                     | ŧ |
| Signature of Own   | ner or Authorized Ag               | ent:               |                 |              |                     |                      | Date:                                   |   |
| Printed Name:  |                                    |                    |                 |              |                     |                      | *************************************** |   |

## SEA 393 DISCLOSURE

| In accordance with Senate Enrolled Act No. 393 (SEA 39 types of advanced structural components used in the qu | P3) regulations, all Class 1 or 2 structures must disclose the alifying property.             |
|---|---|
| Advanced Structural Components Used: (check all that apply)   | Roof (specify below)  Truss  I-Joist Other: Floor (specify below) Truss I-Joist Other: Other: |
| Township of Project:  | County of Project   |