

Town of Sellersburg
Commission of Buildings and Code Enforcement
Application for Contractor License

1. Type or print legibly in black ink only.
2. Review the checklist attached.
3. Sign and date application.
4. Attach Proof of Insurance.
5. Attach payment of \$25.00 made payable to the Town of Sellersburg.
6. Mail application, completed in its entirety to: Commission of Buildings and Code Enforcement 316 East Utica St. Sellersburg, IN 47172

Note: Failure to provide all requested supporting documents will delay the processing of your application. Separate sheets may be attached if additional space is needed to provide required information.

Description of work and services the applicant will provide:

Please check the appropriate License applied for. (Only one):

- Electrical License
- Heating and Air Conditioning
- General Contractors
- Plumbing (attach proof of certification through the State of Indiana)

Check appropriate box for your type of business structure:

- Individual/Sole Proprietor
- Individual doing business under an assumed name
- Partnership
- Corporation
- Limited Liability Company

(Section 1) Applicant Information: If the Applicant is a Corporation or Limited Liability Company:*

Corporation Name: _____

Principal Office Address: _____ City: _____ St.: _____

Zip: _____ Business Phone Number: _____

Emergency Phone Number: _____ E-mail Address (required): _____

Local Office, if different than principal office: _____ City: _____ St.: _____

Zip: _____ Taxpayer Identification Number _____

State of Incorporation: _____ Date Incorporated: _____

*Attach additional sheet(s) listing the name, residence address, residence telephone number, social security number and date of birth of all corporate officers and registered agents; attach Certificate of Good Standing from the Indiana Secretary of State; attach Contractor's License Affidavit for each (1) officer, director, manager, managing member or member of any entity seeking or holding a contractor's license; or (2) owns, directly or indirectly through one or more intermediate ownership entities, 25% or more of the interest in the licensee or applicant. (Attach a copy of the assumed name certificate issued by the County Clerk if applicable.) Proceed to Section 2.

Town of Sellersburg

Commission of Buildings and Code Enforcement

If the Applicant is an Individual/Sole Proprietor or Individual doing business under an assumed name (DBA):*

Business Name: _____

Business Address: _____ City: _____ St.: _____

Zip: _____

Business Phone Number: _____ E-mail Address (required): _____

*Attach completed Contractor's License Affidavit for each (1) officer, director, manager, or member of any entity seeking or holding a contractor's license; or (2) owns, directly or indirectly through one or more intermediate ownership, 25% or more of the interest in the licensee or applicant, listing the name, residence address, residence telephone number, social security number and date of birth. (Attach a copy of the assumed name certificate issued by the County Clerk if applicable.) Proceed to Section 2.

If the Applicant is a Partnership:*

Business Name: _____

Principal Office Address: _____

Business Phone Number: _____

Emergency Phone Number: E-mail Address (required): _____

Local Office if different from principal office: _____

*Attach additional sheet(s) listing the name, residence address, residence telephone numbers, social security number and date of birth of all partners. Attach 1 Contractor's License Affidavit for (1) partner, general partner, limited partner, managers, managing member or member of any entity seeking or holding a contractor's license; or (2) owns, directly or indirectly through one or more intermediate ownership, 25% or more of the interest in the licensee or applicant. (Attach a copy of the assumed name certificate issued by the County Clerk if applicable.) Proceed to Section 2.

(Section 2)

*In the area provided below please list individually the applicant and all required members of appropriate business structure. (See above.)

Name: _____ (Last Name First Name MI)

Title: _____

DLN: _____ Date of Birth: _____

Residence Address: _____ City: _____ St.: _____

Zip: _____ Contact Phone Number: _____ E-mail Address: _____

Familiar with Indiana Codes [] Plumbing [] Electrical [] Mechanical [] Residential [] Building

Years of experience _____ Felony Conviction within last 5 years [] yes [] no

Has applicant been part of a settlement of judgment against them in excess of \$10,000.00 [] yes [] no

Town of Sellersburg

Commission of Buildings and Code Enforcement

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Title: _____

DLN: _____ Date of Birth: _____

Residence Address: _____ City: _____ St.: _____

Zip: _____ Contact Phone Number: _____ E-mail Address: _____

Familiar with Indiana Codes [] Plumbing [] Electrical [] Mechanical [] Residential [] Building

Years of experience _____ Felony Conviction within last 5 years [] yes [] no

Has applicant been part of a settlement of judgment against them in excess of \$10,000.00 [] yes [] no

Name: _____ (Last Name First Name MI)

Title: _____

SSN#: _____ Date of Birth: _____

Residence Address: _____ City: _____ St.: _____

Zip: _____ Contact Phone Number: _____ E-mail Address: _____

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If you are a licensed contractor of Clarksville, Jeffersonville or New Albany Indiana or the City of Louisville Kentucky attach a copy of your valid Contractor's License. If you are not licensed through one of these jurisdictions please attach proof of certification from an institution of higher learning in the field in which you are applying.

(Section 3) Previous business addresses: List all past business addresses from which the applicant has engaged in contracting in the last five years.

Town of Sellersburg
Commission of Buildings and Code Enforcement
LICENSING INSURANCE INSTRUCTIONS

Proof of insurance—Required.

Prior to the issuance of a general contractor license, each applicant shall furnish a certificate of insurance, issued by an insurer authorized to insure in Indiana evidencing commercial general liability insurance, as follows:

Insurance Requirements. Each license-holder actively employed for hire in the Town of Sellersburg and doing work on their respective trade shall, at the time application is made for renewal and/or licensing, provide the building commissioner with evidence of Liability insurance for each occurrence in the amount of one hundred thousand /three hundred thousand (\$100,000. / \$300,000.) dollars by an insurance company licensed to do business in the State of Indiana

Each policy of insurance required under this section shall include a provision requiring 30 days' advance notice to the commissioner prior to cancellation or lapse of the policy. The licensee shall maintain the insurance required under this section in full force and effect for the duration of the license period. A single violation of this section shall result in suspension or revocation of the contractor license.

The certificate must state that the notice will be sent to:

Sellersburg Commission of Buildings and Code Enforcement
316 East Utica St.
Sellersburg, IN 47172

YOU ARE REQUIRED TO LIST THE TOWN OF SELLERSBURG AS AN ADDITIONAL INSURED IF YOU WILL BE DOING WORK FOR THE TOWN.

YOU MUST PROVIDE A NEW INSURANCE CERTIFICATE AT LEAST 14 DAYS BEFORE YOUR INSURANCE EXPIRES.

Town of Sellersburg

Commission of Buildings and Code Enforcement

CHECKLIST FOR CONTRACTOR LICENSE APPLICANTS

Each license application must provide the information listed below:

- The type of license for which application is being made.
- Description of work and services the applicant will provide.
- The email address where applicant wishes to receive notifications.
- A statement verified by affidavit as to whether any (1) officer, director, partner, general partner, limited partner, manager, managing member or member of any entity seeking or holding a general contractor's license; or (2) owns, directly or indirectly through one or more intermediate ownership entities, 25% or more of the interest in the licensee or applicant, as applicable is financially solvent.
- The name and address of the principal location from which the applicant has engaged in the business of contracting at any time within the last five years.
- If the applicant is not a sole proprietor, proof that the applicant is authorized to do business in the State of Indiana.
- If the applicant is doing business in Indiana under an assumed name, a copy of assumed certificate by County Clerk.
- If the applicant is a corporation, a copy of Certificate of Good Standing from the Indiana Secretary of State and the name and address of the corporation's registered agent.
- Proof of insurance as required by the Building Ordinance of the Town of Sellersburg.
- Certification from insurance company or insurance broker.
- The license fee as required by Building Ordinance of the Town of Sellersburg.
- Photo identification must be provided.

For an individual, the applicant's driver's license or other state-issued ID bearing the applicant's photograph, as well as a driver's licenses or other state-issued ID's bearing the photograph of anyone who either signed the application and/or anyone who signed the supporting affidavit (if different from the applicant, himself.)

For a general partnership, the driver's license or other state-issued ID bearing the photograph of the partner primarily responsible for day to day management decisions for the partnership, and the driver's license or other state-issued ID bearing the photograph of anyone who signed the application and/or anyone who signed the supporting affidavit (if different from the other two individuals.)

For a limited partnership, the driver's licenses or other state-issued ID's bearing the photograph of the managing partners, and the driver's licenses or other state-issued ID's bearing the photograph of anyone who signed the application and/or anyone who signed the supporting affidavit (if different from the other two individuals.)

For a limited liability corporation, the driver's license or other state-issued ID bearing the photograph ID of the managing member and the driver's licenses or other state-issued ID's bearing the photograph of anyone who either signed the application and/or anyone who signed the supporting affidavit (if different from the other individuals.)

For a corporation, the driver's license or other state-issued ID bearing the photograph of the corporation's president or that of the local manager or the local director and the driver's license or other state-issued ID bearing the photograph of anyone who either signed the application and/or anyone who signed the supporting affidavit.

Town of Sellersburg

Commission of Buildings and Code Enforcement

FOR ADDITIONAL INFORMATION AND COPIES OF THE CONTRACTOR'S LICENSE REQUIREMENTS PLEASE VISIT THE DEPARTMENT OF BUILDINGS WEBSITE AT:

www.sellersburg.org

ALL LICENSES SHALL BE RENEWED ON OR BEFORE JANUARY 2 OF EACH YEAR.

THE LICENSE FEE SHALL BE TWENTY FIVE DOLLARS (\$25.00).

The application must be completed in full and all attachments must be enclosed. Please include License Fee of \$25.00 and make check payable to the Town of Sellersburg and mail to:

Sellersburg Commission of Buildings and Code Enforcement
316 East Utica St.
Sellersburg, IN 47172

If you have any questions please call (812) 246-3821 ext. 6

1. Incomplete applications will be returned to applicant.
2. Completed application will either be approved or rejected for licensure within 28 days.
3. Once your application is approved, your license will be mailed to your business address within 10 Business days.

Town of Sellersburg
Commission of Buildings and Code Enforcement
GENERAL CONTRACTOR'S LICENSE AFFIDAVIT

This affidavit is required for all license applications.

Under the penalty of perjury, I, the Undersigned, warrant that:

- (1) I am authorized to execute this affidavit on behalf of the applicant.
- (2) Each controlling person of the applicant is at least 18 years of age.
- (3) The applicant and each controlling person of the applicant are financially solvent.
- (4) All information, certifications and statements contained in the attached license application are true, accurate and complete as of the date furnished to the Town. Information pertaining to the qualifications of each controlling person has been obtained on an individual basis from each controlling person
- (5)
 - (a) Neither the applicant nor any controlling person has ever been convicted, is in custody, is under parole or under any other non-custodial supervision resulting from a conviction in a court of any jurisdiction for the commission of a felony or criminal offense of whatever degree involving bribery; or
 - (b) If so, the details surrounding each conviction are provided in a separate attachment submitted with this affidavit.

Signature of Applicant

Date

Printed Name

Date

Please send all attachments to building@sellersburg.org