City of New Albany, Indiana Building Department Building Commissioner

Approved By:	
Building:	

142 East Main Street, Suite 206 New Albany, IN 47150 812-948-5371

www.cityofnewalbany.com

	MERCIAL APPLICATION FOR HVAC and/or APP			
	ess Name:			
	Site Address:			
	actor Name:			
	Person on Job Site:			
	ated cost of project: \$			
1.	Fee regarding any new or replacement HVAC \$40.00 per unit. Combination is \$80.00 per u	rcial, sh	all be charg	ed
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REMINDER FOR CONTRACTORS

When mailing in applications, please remember to send a self-addressed stamped envelope to receive your copy.