



BUILDING PERMIT APPLICATION

APPLICANT INFORMATION

APPLICANT NAME: _____ PHONE # _____

MAILING ADDRESS: _____ CELL # _____

PROPERTY/LAND OWNER: _____

ARE YOU THE HOMEOWNER AND CLAIMING AN EXEMPTION FROM CONTRACTORS LICENSURE? YES NO

IF YES, LSLBC Notarized affidavit required ATTACHED

CONTRACTOR _____ LICENSE # _____

MAILING ADDRESS _____ PHONE # _____ CELL# _____

ARE YOU APPLYING FOR: NEW SERVICE NEW LOCATION
 RECONNECTION EXISTING LOCATION

IF YOU ARE APPLYING FOR RECONNECTION AT AN EXISTING LOCATON,
HOW LONG HAVE THE UTILITIES BEEN DISCONNECTED? _____

LOCATION

PROJECT ADDRESS _____

PROJECT NAME: _____ SPECIFIC USE: _____

PROJECT DESCRIPTION (SCOPE OF WORK): _____

SUBDIVISION _____ LOT # _____

SECTION _____ TOWNSHIP _____ RANGE _____ PARCEL # _____ ACRES _____

BUILDING TYPE: RESIDENTIAL _____ COMMERCIAL _____

CATEGORY:

- ___ New Construction
- ___ Addition
- ___ Remodeling
- ___ Modular Building
- ___ Building Relocation
- ___ Accessory Building (garage, patio, shed)
- ___ Camp/Farm Structure
- ___ Demolition
- ___ Other: _____
- ___ Change of Use/Occupancy (Previous Use)

COMMERCIAL OCCUPANCY USE GROUP:

- Assembly (A__)
- Business (B__)
- Education (E__)
- Factory and Ind. (F__)
- High Hazard (H__)
- Institutional (I__)
- Mercantile (M__)
- Residential (R__)
- Storage (S__)
- Utility and Misc. (U__)

UTILITIES REQUESTED:

- ___ Electrical
- ___ Plumbing
- ___ HVAC-Mechanical

UTILITY PROVIDERS:

ELECTRIC*: _____

WATER: _____

GAS: _____

- SEWER: Individual
 Public
 Community
 Existing

ATTACH SEWER PERMIT**

Permit # _____

TEMP _____ FINAL _____

***ALL REQUIRED INSPECTIONS MUST PASS BEFORE AN ELECTRIC CONNECTION WILL BE AUTHORIZED TO YOUR UTILITY CO.**

****A TEMPORARY SEWER PERMIT IS REQUIRED BEFORE THE PARISH PERMIT CAN BE ISSUED.**

BUILDING INFORMATION

TOTAL SQ FT _____
LIVING SQ FT _____

ACCESSORY SQ FT _____
GARAGE SQ FT _____

CONSTRUCTION COST \$ _____

REMODEL/ALTERATION COST \$ _____

TYPE OF FRAME:

Wood/Masonry/Structural Steel (Type 1, 2, 3, 4, 5)

TYPE OF HEATING/COOLING:

Gas/Electric
Central A/C? _____

ZONING: _____

AICUZ: _____

FIRE MARSHAL PROJECT # _____
(NFPA 101 review)

FLOOD ZONE INFORMATION:

(To be completed by Local Community's Floodplain Administrator)

Community/FIRM Panel # _____

Dated _____

Flood Zone _____ Base flood elevation _____

Property plat with site plan of proposed development required for Floodplain Determination

APPLICANT SIGNATURE

DATE