

Customer fill in highlighted sections:

PLEASE PRINT **Check one:** _____ COMMERCIAL _____ RESIDENTIAL **DATE:** _____

| | | | |
|----------|----------------------------|--------------------------|---------------|
| PERMIT # | PROJECT DESCRIPTION | CONSTRUCTION COST | CENSUS |
| | | | |

| | |
|----------------------------------|-------------------------------|
| PHYSICAL ADDRESS ASSIGNED | CITY / STATE / ZIPCODE |
| | |

| | | |
|--------------------|-----------------------------|-----------------------------------|
| SUBDIVISION | TRACT or LOT / BLOCK | PARCEL / ASSESSMENT NUMBER |
| | | |

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|-----|-----------|---------|----------|-------|------|
| ESN | COMMUNITY | SECTION | TOWNSHIP | RANGE | WARD |
| | | | | | |

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|--|------------------------|
| OWNER of STRUCTURE & INFORMATION and/or | MAILING ADDRESS |
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| | | | |
|-------------------------------|------------------|------------------|----------------------|
| CITY / STATE / ZIPCODE | TELEPHONE | ALT PHONE | EMAIL ADDRESS |
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|---|------------------------|
| APPLICANT & INFORMATION and/or | MAILING ADDRESS |
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| | | | |
|-------------------------------|------------------|------------------|----------------------|
| CITY / STATE / ZIPCODE | TELEPHONE | ALT PHONE | EMAIL ADDRESS |
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|--|------------------------|
| CONTRACTOR & INFORMATION and/or | MAILING ADDRESS |
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| | | | |
|-------------------------------|------------------|-----------------------|----------------------|
| CITY / STATE / ZIPCODE | TELEPHONE | LICENSE NUMBER | EMAIL ADDRESS |
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|----------------------------|---------------|------------|----------------------------|---------------|----------------|
| TRAILER INFORMATION | | | PROJECT INFORMATION | | |
| TRAILER SIZE | SERIAL NUMBER | YEAR MODEL | COLOR | EXTERIOR TYPE | SQUARE FOOTAGE |
| | | | | | |

| | | | | | | |
|------------|------|------|------|------|------|----------|
| FIRM PANEL | ZONE | ELEV | ABFE | ZONE | ELEV | REQ ELEV |
| | | | | | | |

| | | |
|--------------|--------------------------|-------------------------------------|
| PERMIT TECH: | ELECTRIC COMPANY: | GAS CO: <i>If applicable</i> |
| | | |

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|-------------|-----------|--------|
| WIND SPEED: | COMMENTS: | FEE \$ |
| | | |

This permit becomes null and void if work or construction authorized is not commenced within 180 calendar days from the date of issuance, or if construction or work is suspended or abandoned for a period of 180 calendar days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of all laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other federal, state or local law regulating construction or the performance of construction. I understand that all plan review and permit fees are non-refundable. By signing this application, the applicant, owner or owner's agent gives Lafourche Parish Permit Department permission to enter the jobsite at any time during normal business hours.

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| Signature of Contractor or Authorized Agent | Date |
| | |

or

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| Signature of Owner (If Owner/Builder on Residential) | Date |
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