



Natchitoches Parish Planning and Zoning Department

625 Bienville Circle, Room 153, Natchitoches, LA 71457

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PERMIT APPLICATION Permit # _____

Parcel #			Site Address				
City				State and Zip Code			
Subdivision			Section		Township		Range
GPS	Latitude			Longitude			
Electricity Power Utility				ACCT #			
Applicant: Name and/or Company:							
Mailing Address							
Email							
Phone Number			Cell Phone Number				
Property Owner: Name and/or Company name:							
Mailing Address							
Email							
Phone Number			Cell Phone Number				
General Contractor: Contractor's Name and Company's Name (if applicable)							
Address							
Email							
Phone Number			License Number				
Electrician Contractor's name and Company's Name (if applicable)							
Address							
Email							
Phone Number			License Number				
Plumber Contractor's Name and Company's Name (if applicable)							
Address							
Email							
Phone Number			License Number				
HVAC Contractor's Name and Company's Name (if applicable)							
Address							
Email							
Phone Number			License Number				
Project Total Square Feet			Living			Non-Living	
# of Structure Stories / Levels				# of Parking Spaces			
Project Cost: including service, labor & materials costs				\$			
Describe the work to be done:							

NOTICE: This permit is void if the authorized work is suspended or abandoned for 180 days from the date that the permit was issued. Contractors must be Louisiana State licensed with the LA State Licensing Board for Contractors.

If the property is in a flood zone, the application must be accompanied by a preliminary and final flood elevation certificate from a licensed surveyor. If the property is deemed in a natural floodway, a “no-rise certificate” is required from a licensed engineer.

Any person who performs plumbing work as defined by the Louisiana Plumbing Law, R.S. 1377, shall possess a license issued by the Louisiana State Plumbing Board. A master plumber shall properly designate his employing entity to the board. Any questions concerning compliance shall be addressed to the board.

See the back.

HOMEOWNER CLAIMING EXEMPTION FROM LICENSURE: LSLBC Notarized affidavit required.

Residential Camp homeowner claiming exemption from building codes: Clerk of Court Recorded and Notarized ACT 12 affidavit required.

Permit Type: ☐ Residential ☐ Commercial ☐ Industrial

PERMIT CATEGORY:

- ☐ Addition to a Building
- ☐Attached Building
- ☐Building Relocation
- ☐Camp
- ☐Change of Occupancy
- ☐Change of Use
- ☐Detached Accessory Building
- ☐Farm
- ☐Manufactured Home
- ☐Mini Storage
- ☐Modular Building
- ☐New Construction Building
- ☐Cell Tower Construction
- ☐Addition /Modify Cell Tower
- ☐Billboard / Signs
- ☐Digital

☐Standard
- ☐Flood Review Only
- ☐Other

- ☐Portable Building
- ☐Livable

☐Storage
- ☐Remodeling of a Building
- ☐Swimming Pool
- ☐Temporary Electrical Pole
- ☐Temporary Use Building

TRADE PERMIT:

- ☐Electrical
- ☐Electrical Reconnect
- ☐Plumbing
- ☐Mechanical / HVAC
- ☐Generator
- ☐Demolition

COMMERCIAL OCCUPANCY GROUP:

- ☐Assembly (A1 – A5)
- ☐Business (B)
- ☐Education (E)
- ☐Factory and Ind. (F1, F2)
- ☐High Hazard (H1 – H5)
- ☐Institutional (I1 – I4)
- ☐Mercantile (M)
- ☐Residential (R1 – R4)
- ☐Storage (S1, S2)
- ☐Utility and Misc (U)

A Fire Marshall Review must accompany Commercial Permits.

Fire Marshal Project

(NFPA 101 review)

Manufactured Home or RV:

Square feet: _____

Make: _____

Model: _____

Year: _____

Serial Number:

Vin Number:

Hud Number:

I, the (owner, contractor, applicant, or authorized agent) hereby agree to comply with the Parish of Natchitoches Codes and Ordinances applicable to all work described herein and to all plans and specifications attached hereto. I agree to comply with EPA Rules regarding Lead-Based Paint Renovation, Repair, and Painting (RRP) rules in structure. I agree to and certify that the project cost is true and correct. No inspections will be performed unless a permit is displayed on the job site and approved plans are available to the Inspector on the job site at the time of inspection. The inspector shall have the right to enter the premises/building for the purpose of inspection on Monday through Friday from 6:00 AM to 7:00 PM CST. I understand that it is my responsibility as the applicant to contact the State Fire Marshal’s Office to determine whether a plan review is required. By signing, you are verifying that all information is correct to the best of your knowledge; and you have read, understood, and accepted this disclaimer and application. By typing your name below, you are signing this application electronically. You agree that your electronic signature is the legal equivalent of your manual written signature on this application.

Applicant’s Signature:

Building Information:

Type of Building Frame:

☐Wood

☐Masonry

☐Structural Steel

☐Gunit

☐Polymer

☐Log Pier & Beam

Type of Heating

☐Wood

☐Electric

☐Gas

☐Oil

☐Window Unit

☐Other

Utility Company Name

Water _____ Gas _____

Other Agency Permits

Environmental Health # _____ ☐ Approved

Community Sewage Letter ☐ Approved

Parish Land District Zone _____

Fire Marshall Letter & Plans Provided:

☐ YES

☐ NO

☐ NOT REQUIRED

FLOOD ZONE:

Community-Panel # _____

Dated _____

Flood Zone _____ BFE _____

☐ NAVD88

☐ NGVD29

Source: ☐FIS ☐FIRM ☐ Other _____

Minimum Elevation Requirement: _____

Natural Ground Elevation: _____

Fill Added ☐YES ☐ NO

Substantial Damage (SD) ☐YES ☐ NO

Substantial Improvement (SI) ☐YES ☐ NO

**The flood zone will be acquired from the LSU AgCenter Flood Maps website. See Disclaimer. **