



RESIDENTIAL PERMIT APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MYGOVERNMENTONLINE.ORG

OFFICE USE ONLY			
Permit No:		Date Requested:	
Parcel #:		Council District / At Large:	
Zoning District:		Historic District: Y / N	Design Rev. Corridor: Y / I
Lot, Sq., Subdivision:			
APPLICANT INFORMATION			
Name:			
Mailing Address:			
Phone:			
Same as above? (circle one) YES / NO If No Name: Mailing Address: Phone:			
CONTRACTOR INFORMATION			
Business:		Name:	
Mailing Address:		License #: _	
Phone:	Email:		_
PROPERTY INFORMATION			
Address:			
Parcel ID #:			
Property Size (square feet):			_
Applicant's Signature		Date	





RESID	DENTIAL PERMIT APPL	ICATION		
	OFFICE USE ONLY			
Permit No:				
PLEASE DESCRIBE PROJECT IN DETAIL:				
Contract Value: \$	Square Footage: _			
	PLEASE CHECK ALL THAT AP	PLY		
☐ Accessory	☐ Gas		☐ Pool	
\square Addition	☐ Mechanical			
\square Renovation	☐ Plumbing	☐ Re-Roof		
☐ Generator	☐ Electrical		\square Other	
Master permit: primary permit fees shall include the fees for sa details of all subcontractor work. Failure to include the requir charged to the applicant. Current registration / license, when a	red information at the time of application shall r	actor qualifier signature. equire that a separate po	s are on the application ermit be issued with the	and plans include the appropriate fees being
PERMIT TYPE	BASE FEE	INSPECTION	TECH FEE	TOTAL
Above Ground Pool (\$0-\$5000)	\$25	\$50	\$10	\$85
Above Ground Pool (\$5000-\$10000)	\$100	\$50	\$10	\$160
Above Ground Pool (\$10001-above)	\$200	\$50	\$10	\$260
Accessory (< 200 sq. ft.) no utilities	\$0	\$50	\$10	\$60
Accessory (200 sq. ft. or greater; one or	\$0.23 x sq. ft. (\$75 min; \$500	\$50	\$10	TBD

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Above Ground Pool (\$5000-\$10000)	\$100	\$50	\$10	\$160
Above Ground Pool (\$10001-above)	\$200	\$50	\$10	\$260
Accessory (< 200 sq. ft.) no utilities	\$0	\$50	\$10	\$60
Accessory (200 sq. ft. or greater; one or	\$0.23 x sq. ft. (\$75 min; \$500	\$50	\$10	TBD
more walls)	max)	Ć.C.O.	Ć10	Ć425
Accessory (200 to 500 sq. ft.; without walls)	\$75 plus trade fees	\$50	\$10	\$135
Accessory (> than 500 sq. ft.; without walls)	\$200 plus trade fees	\$50	\$10	\$260
Attached Patio Cover (Aluminum only)	\$75	\$50	\$10	\$135
Demolition	\$50	\$50	\$10	\$110
Generator	\$200	-	\$10	\$210
In Ground Pool	\$200	\$50	\$10	\$260
Minor Renovation (\$0- \$5000)	\$25	\$50	\$10	\$85
Minor Renovation (\$5000-\$10000)	\$100	\$50	\$10	\$160
Major Renovation (\$10001 and above)	\$200	\$50	\$10	\$260
New Construction/Addition	\$0.45 x sq. ft.	\$50	\$10	TBD
Re-Roof	\$50	-	\$10	\$60
Structure Elevation	\$500	\$50	\$10	\$560
Structure Relocation	\$250; + trades	\$50	\$10	\$310
Trade	\$125	-	\$10	\$135

Applicant's Signature	Date



CONNIE POWELL, JD Director

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Permit No:
SUBMITTAL REQUIREMENTS
☐ Completed and signed application.
☐ Recorded copy of Act of Sale or Deed to the property.
\Box One complete set of construction plans, including site plan, which indicates all dimensions and building setbacks.
☐ Payment of fees; payable by credit card, check or money order to: "St. John Parish Council".
AS NEEDED SUBMITTAL REQUIREMENTS
□ Letter of No Objection from the Pontchartrain Levee District and/or Lafourche Basin Levee District, U.S. Army Corps of Engineers (MVNLeveePermits@usace.army.mil), and Office of Coastal Protection and Restoration (CPRArequests@la.gov) if work is within 1500′ of the mainline Mississippi River levee, or if otherwise applicable. Levee Districts: West bank – 225-265-7545/ East bank – 225-869-9721.
☐ Review and approval of Floodplain Manager to determine compliance with the National Flood Insurance Program and SJBP Code of Ordinances.
☐ Copy of contract and contractor's license, if applicable.
☐ Culvert Permit Fee Estimate, if applicable (contact Public Works at 985-652-4815 for estimate).
NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said property. Any action of the Parish in this matter does not: (1) imply that the applicant's title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on said property are enforceable or are not enforceable.
NOTE: Within sixty (60) days of submission of minimum application requirements, this application will become null and void. By signature of this application, the applicant agrees and understand that all permit fees are non-refundable.
NOTE: All fees will be doubled for all after-the-fact permits and when information provided on an application is falsified. All fees are non-refundable.
Applicant's Signature Date



CONNIE POWELL, JD Director

RESIDENTIAL PERMIT APPLICATION

RESIDENTIAL INFORMATION FOR ASSESSOR'S OFFICE By order of the Regular Session of the Louisiana Legislature, R.S. 47:1957(B) was amended by Act 829, St. John the Baptist Parish Assessor's Office is now required to have the following information on all permits located in the parish: Name of property owner:	OFFICE USE ONLY
By order of the Regular Session of the Louisiana Legislature, R.S. 47:1957(B) was amended by Act 829, St. John the Baptist Parish Assessor's Office is now required to have the following information on all permits located in the parish: Name of property owner: Address: Living Area (square feet): # of Bedrooms: # of Stories: Heating and Cooling (circle one): Central Window Space Wall Fireplace: YES / NO If yes, how many? Garage: YES / NO if yes, square footage?	Permit No:
Address: Living Area (square feet): # of Bedrooms: # of Stories: Heating and Cooling (circle one): Central Window Space Wall Fireplace: YES / NO If yes, how many? Garage: YES / NO if yes, square footage?	By order of the Regular Session of the Louisiana Legislature, R.S. 47:1957(B) was amended by Act 829, St. John the Baptist Parish Assessor's Office is now required to have the following information on all permits
Living Area (square feet): # of Bathrooms: # of Stories: # of Bedrooms: # of Stories: Heating and Cooling (circle one): Central Window Space Wall Fireplace: YES / NO If yes, how many? Garage: YES / NO if yes, square footage?	Name of property owner:
# of Bedrooms: # of Stories: Heating and Cooling (circle one): Central Window Space Wall Fireplace: YES / NO If yes, how many? Garage: YES / NO if yes, square footage?	Address:
Heating and Cooling (circle one): Central Window Space Wall Fireplace: YES / NO If yes, how many?Garage: YES / NO if yes, square footage?	Living Area (square feet):
Fireplace: YES / NO If yes, how many?Garage: YES / NO if yes, square footage?	# of Bedrooms: # of Stories:
	Heating and Cooling (circle one): Central Window Space Wall
Construction Type (circle one): Slab Pier Combination	Fireplace: YES / NO If yes, how many?Garage: YES / NO if yes, square footage?
Applicant's Signature Date	



RESIDENTIAL PERMIT APPLICATION

RESIDENTIAL INSPECTION GUIDELINES

SERVICE	AGENCY	PHONE
Temporary Power Pole	South Central	985-655-1070
In-ground plumbing/site de-grassing	South Central	985-655-1070
Foundation (pre-pour)	South Central	985-655-1070
Submit Under Construction Elevation Certificate, signed & stamped by a licensed land surveyor, if in a flood zone	Planning & Zoning	Submit in person,
Preliminary Zoning/1st Inspection: setbacks met, port-olet on-site, dumpster/trash retention on-site	Planning & Zoning	985-651-5565

ALL ABOVE REQUIREMENTS MUST BE MET AND APPROVED BY ST. JOHN THE BAPTIST PARISH

SERVICE	AGENCY	PHONE
Electrical rough-in	South Central	985-655-1070
Plumbing top out	South Central	985-655-1070
Mechanical rough-in	South Central	985-655-1070
Framing	South Central	985-655-1070
Roof	South Central	985-655-1070
Insulation	South Central	985-655-1070
Final Electrical/Final Gas/Final Plumbing	South Central	985-655-1070
Attic Insultation	South Central	985-655-1070
Final Building (Certificate of Compliance)	South Central	985-655-1070
sewer inspection: inspection of <i>uncovered</i> lines after connection to the public sewer system	South Central	985-655-1070
Second sewer inspection	South Central	985-655-1070
Finished Construction Elevation Certificate, signed & stamped by a licensed land surveyor, if in a flood zone	Planning & Zoning	Submit in person,
Final Zoning/2nd Inspection: port-o-let removed, debris removed, no damage to street/curb/public area, driveway & sidewalk installed & approved	Planning & Zoning	985-651-5565

Applicant's Signature	Date	