

JACLYN HOTARD  
Parish President



**ST. JOHN**  
PLANNING & ZONING

TARA LAMBETH  
PHD, AICP, CFM  
Director

**HISTORIC DISTRICT APPLICATION**

TO SUBMIT APPLICATION ONLINE VISIT [WWW.MYGOVERNMENTONLINE.ORG](http://WWW.MYGOVERNMENTONLINE.ORG)

**OFFICE USE ONLY**

Docket No: \_\_\_\_\_ Date Requested: \_\_\_\_\_  
Meeting Date: \_\_\_\_\_ Zoning District: \_\_\_\_\_  
Parcel #: \_\_\_\_\_ Flood Zone: \_\_\_\_\_  
Council District / At Large: \_\_\_\_\_ Historic District: Y / N Design Rev. Corridor: Y / N  
Lot, Sq., Subdivision: \_\_\_\_\_

APPLICATION FOR:  CERTIFICATE OF APPROPRIATENESS  DISTRICT or LANDMARK DESIGNATION

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY OWNER INFORMATION** (ALL owners must be listed and must sign)

Same as above? (circle one) **YES / NO** If **NO**, has the authority of the applicant to act on behalf of the property owner been verified with a signed, dated, and notarized endorsement? Complete page 3.

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY INFORMATION**

Property Address: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Parcel #: \_\_\_\_\_  
Property Size (square feet): \_\_\_\_\_

**PLEASE DESCRIBE PROJECT IN DETAIL:**

\_\_\_\_\_  
\_\_\_\_\_

Value: \$ \_\_\_\_\_ Square Footage: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature Date



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**SUBMITTAL REQUIREMENTS**

- Completed and signed application.
- Recorded copy of Act of Sale, Judgment of Possession, or Deed to the property.
- Payment of fees; payable by credit card, check or money order to: "St. John Parish Council".

**AS NEEDED SUBMITTAL REQUIREMENTS**

- Color Samples.
- Door & Window Detail.
- Copy of Contractor's License.
- Elevations & Floor Plan.
- Material Samples (if applicable).
- Photos (before).
- Plans & Specifications.

**FEES**

- |                                   |          |
|-----------------------------------|----------|
| 1. Certificate of Appropriateness | \$ 50.00 |
| 2. Technology Fee                 | \$ 10.00 |

*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.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



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**OWNER'S ENDORSEMENT**

(please print clearly)

I \_\_\_\_\_ being duly sworn, depose that I reside at  
Owner(s) / Corporation

\_\_\_\_\_ in the Parish  
Street City

of \_\_\_\_\_ and State of \_\_\_\_\_ and that I am  
Parish State

the owner of the property described as \_\_\_\_\_ and that I have authorized  
Address

\_\_\_\_\_ to make the foregoing petition for a Historic District Application.  
Applicant

\_\_\_\_\_  
Signature of owner(s) of property or authorized agent

SWORN TO ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_,

\_\_\_\_\_  
NOTARY PUBLIC

Print name of Notary: \_\_\_\_\_

Bar roll #: \_\_\_\_\_

# Historic District Process





### PROCESS TIMELINE ACKNOWLEDGEMENT

#### OFFICE USE ONLY

Docket No: \_\_\_\_\_ Project/Permit Type: \_\_\_\_\_

Applicant: \_\_\_\_\_

Best Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Meeting:     Historic District             ZBA             Planning Commission             Council

Application received: \_\_\_\_\_

P&Z Meeting Date: \_\_\_\_\_

Council Meeting Date: \_\_\_\_\_  
(if applicable)

- I understand and acknowledge the meeting date listed above and agree to appear or have a representative present at the P&Z meeting.
- I understand and acknowledge failure to attend will result in the request being tabled and will delay this process.
- I understand and acknowledge that the Planning Commission serves as an advisory board to the Council. Therefore, final approval or denial is determined by the Parish Council (as applicable).
- I understand and acknowledge that all fees are non-refundable.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Rec'd By: \_\_\_\_\_ on \_\_\_\_\_