

NEW RESIDENTIAL CONSTRUCTION PERMIT CHECKLIST

Thibodaux, Louisiana

Phone: (985) 446-7208



Will home be built on a MOUND? Yes _____ No _____

- If Yes, please provide a Compaction Test or Post Tension Slab drawings.

List all types of Insulation _____ Spray Foam, _____ Batt, _____ Blown Cellulose _____ Int

You will need to provide Manuals J, D, & S before open wall inspection. _____ Int

Documents Needed:

Completed New Construction Permit Form (available online or in person)

Site Plan (drawing showing location of building on lot, lot size & dimensions on all sides, distance of building from all property lines, and the outline of the building)

One (1) Complete Set of Plans (ONE 11" x 17") Note: In many cases the plans will need to be designed and/or stamped by a Louisiana License Engineer call Permit office for more information.
THIS MUST INCLUDE M.E.P. PLANS

Land Verification (Must be a RECORDED Copy of Act of Cash Sale/Donation/Succession)

Copy Of Contractor's License or Affidavit Claiming Exemption from Licensure (available in person)

I/We acknowledge that I/we have read the above requirements, and I/we have provided all required documents. Init. _____

Project Address: _____

Printed Name: _____ Signature: _____

Date: _____

RENOVATION/ADDITION BUILDING PERMIT APPLICATION

Thibodaux, Louisiana

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The undersigned applies for a building permit for the following use, said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct. The applicant is required, in addition to the information requested on this form to submit plans, in duplicate and drawn to scale, showing the actual dimensions and shape of the lot, exact sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed buildings or alterations.

1. **Building Address:** _____

2. **Name of Owner:** _____

Mailing Address: _____

Phone No.(s): Home: _____ Work: _____ Cell: _____

3. **Name of Contractor:** _____

Mailing Address: _____

Phone No.(s): Office: _____ Cell: _____ Contact: _____

4. **Proposed Use:**

Select One (1):

Residential _____ Commercial _____ Industrial _____

Select Project Type:

Alteration/Addition _____ Accessory Building _____

Re-roofing _____ Other (Explain) _____

6. Lot Area: _____ Percentage of lot to be occupied: _____ %

7. Lot Width: _____ Lot Depth: _____

8. **Square Feet of Project Area**

Residential (Living): _____ Commercial: _____ Industrial: _____

9. Yard Dimensions: Front: _____ Rear: _____
One Side: _____ Sum of Side Yards: _____

10. Dimensions of Addition: Height: _____ Size/Dimensions: _____

11. **Estimated Project Cost:** _____

NOTE: This permit shall be void if work is not started within six (6) months or completed within 2 years.

Printed Name: _____

Signature: _____

Date: _____
