

PARISH OF ASCENSION
OFFICE OF PLANNING AND DEVELOPMENT
BUILDING DEPARTMENT



BUILDING APPLICATION

INSPECTION DIVISION

Date: _____ 20____

Land Owner: _____

Tenant: _____

Project Site / Physical Address: _____

An address is required prior to submittal – Please see Addressing Coordinator

Subdivision: _____ Lot #: _____

Phone (work): _____ (home) _____

.....
Contractor Name: _____ Parish License #: _____

Contractor Address: _____

Contact Person: _____ Phone Number: _____
.....

Proposed Construction: _____ Commercial \$ _____ Bid Price

Description of Project:

_____ Residential _____ Total Square Footage

_____ Living Area Square Footage

_____ New Construction _____ Addition _____ Other

_____ Bedrooms _____ Bath(s)

_____ Entergy _____ Demco

_____ Y/N Has any fill been placed on the property

Office Use Only: **BFE** _____ **Flood Zone** _____ **Initials** _____

NOTICE: Any information written on this application becomes public record