



ST. JOHN
PLANNING & ZONING

DEMOLITION PERMIT APPLICATION

Permit No: _____	Date Requested: _____
Receipt No: _____	Council District/At Large: _____
Zoning District: _____	Parcel No: _____
Lot, Sq., Subdivision: _____	
Historic Dist. / Landmark: Yes / No Hearing Required: Yes / No	
OFFICE USE ONLY	

APPLICANT INFORMATION:

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

PROPERTY OWNER INFORMATION:

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 affidavit or a contract? (*Circle one*) **YES / NO**

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

CONTRACTOR INFORMATION:

Name: _____

Mailing Address: _____ License No.: _____

Phone: _____ Email: _____

LOCATION OF WORK:

Address: _____

Floor/ Bay / Suite #: _____

Subdivision: _____ Block: _____ Lot No.: _____

Parcel ID No.: _____

Within sixty (60) days of submission of minimum application requirements, this application will become null and void. Further, by signature of this application, applicant understands that permit fees are non-refundable.

Applicant's Signature

Date



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Permit No: _____ Date Submitted: _____
Lot, Sq., Subdivision: _____

OFFICE USE ONLY

Please describe project in detail:

Proposed use after demolition:

If in a Historic District, please describe any hardships experienced:

Value: \$ _____ Gross Square Footage: _____

OTHER SUBMITTAL REQUIREMENTS:

- Copy of Act of Sale, judgement of possession, or deed to the property
- Photographs of the building or structure to be demolished
- Fees; if by check or money order made to "St. John Parish Council," or by credit card

Note: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land shown, 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.

I hereby acknowledge that I have read and understand all of the requirements listed on this application. I also understand that I am responsible for ensuring that all utilities are disconnected and capped prior to beginning any demolition work. Louisiana One Call can be reached by dialing 811 or 1-800-272-3020 or at www.laonecall.com.

- Electric/Power Date: _____
- Gas Date: _____
- Sewer Date: _____
- Water Date: _____

Applicant's Signature

Date



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OWNER'S ENDORSEMENT

I (We) _____ being duly sworn, depose that I (we)
_____ Owner(s) / Corporation
reside at _____,
_____ Street _____ City
in the Parish of _____ and State of _____
and that I (we) am/are the owner of the property described as _____
and that I (we) have authorized _____ to
make the foregoing **Demolition Permit**.

Signature of owner(s) of property or authorized agent

SWORN TO ME THIS _____ DAY OF _____,
_____.

NOTARY PUBLIC

Print name of Notary: _____
Bar roll # _____