



SAINT CHARLES PARISH

Department of Planning and Zoning

P.O. Box 302 (14996 River Road) • HAHNVILLE, LOUISIANA 70057
(985) 783-5060 • (985) 783-5000 • FAX (985) 783-6447

CHANGE OF OCCUPANCY/USE

Name / Tenant change.....\$25
Use / Activity change.....\$105

(OFFICE SECTION)		Rev 02/2018
Permit #:	_____	Date: _____
Receipt #:	_____	Fee Paid: _____
		Zoning: _____
Prev. Occ.:	_____	Prev. Use: _____
		Vacancy: _____
Sq.Ft. for use:	_____	Req'd Parking: _____
		Sewer permit: _____
		No _____ Yes _____
Non-Conforming Agreement:	_____	No _____ Yes _____
		Date: _____

Change of Occupancy permits are required only for a name or tenant change when use or activities remains the same.

Change of Use permits are required when the use or activities change at the address. The permit requires one or more inspections by the Building Official, South Central Planning & Development Commission.

Business Address: _____

New Business Name: _____

Applicant/Occupant: _____ Email: _____

Address: _____ Phone #: _____

Property Owner: _____ Email: _____

Address: _____ Phone #: _____

Description of **all** business activities that will occur at the address: _____

Requirements for obtaining permit:

- _____ 1. Completed application & fee.....(payable to "St. Charles Parish Department of Finance")
- _____ 2. Copy of lease **or** Act of Sale to property..... (Lease must indicate the correct address)
- _____ 3. Fire Marshal Inspection Report.....(call 504-568-8506 for a "General Inspection")
- _____ 4. Dept. of Health & Hospital's Certificate.....(for food, drink and pre-packaged food sales 985-764-4376)
- _____ 5. Sewer verification.....(for municipal sewer tie-in: 985-783-5100 for private sewer service: 985-764-4376)
- _____ 6. Site plan, if applicable(Change of Use, vacant over 6 months ect.)

Additional requirements may include the following:

- _____ 7. Contract from hazardous waste hauler, if applicable(Ex. automotive repair)
- _____ 8. Permits/certifications from state agencies, if applicable.....(Ex. DEQ, Cosmetology Board)
- _____ 9. Electrical Trade Permit..... (if the electric meter was removed or electrical modification planned)
- _____ 10. Commercial Renovation Permit(if renovations are planned)
- _____ 11. Sign Permit, if applicable.....(call 985-783-5060 for a determination)

Final Occupancy issued after the following approvals (if required):

Fire Marshall approval, Dept. of Health & Hospitals Permit approval, other State or Federal agency's approval and Building Code Inspection approval for all Change of Uses, Trade Permits or Commercial Renovations (Call South Central Planning & Development at 985-655-1070 to schedule required inspections)

**Upon successful completion of this process a Certificate of Occupancy will be issued by the St Charles Parish Planning & Zoning Dept. The Certificate of Occupancy shall be presented to the St. Charles Parish Sales & Use Tax Office (985-785-3125) for a Sales Tax ID # and the St. Charles Parish Sheriff's Office Division of Tax Collection & Licenses (985-783-6237) for issuance of the business license.

Permit Conditions/Comments: _____

Applicant signature: _____ **Date:** _____

Application taken by: _____ **Date:** _____

Approved by: _____ **Date:** _____



South Central Regional Construction Code Council

5058 W. Main Street Houma, Louisiana 70360
P.O. Box 1870, Gray, Louisiana 70359
Toll Free at 1-866-95-PERMIT or (985) 655-1070

MyPermitNow.Org

SCPDC CHANGE OF OCCUPANCY / CERTIFICATE OF OCCUPANCY CHECK LIST

Applicant's Name: _____

Applicant's Phone Number (s): _____

Project Address: _____

Applicable Building Codes:

- IBC 2015 International Building Code
- IPC 2015 International Plumbing Code
- IMC 2015 International Mechanical Code
- IEBC 2015 International Existing Building Code
- NEC 2014 National Electrical Code

NOTE: If renovations/alterations are proposed that involve new construction, repairs or relocation of any walls, doors, windows, roof coverings, electrical, mechanical or plumbing, a commercial renovation permit is required.

The following information needs to be provided for all Change of Occupancy and/or Certificate of Occupancy permits:

Building and Planning information: *(Provide the following if not already indicated within any drawings that may have been provided)*

___ Gross Area of Leased Space *(approximate square footage of the owned/leased total space)* _____

___ Gross Building Area *(IF KNOWN please provide approximate square footage of total building area including areas not owned/leased)* _____

___ Number of Existing Parking Spaces *(provide brief description of number of off-street parking stalls assigned to space and if any are to be added)* _____

___ Previous Occupancy Use *(Please provide to the best of your knowledge a brief description of previous building use, i.e. office, office/warehouse, repair shop, etc... and/or type of previous business activities)*

___ Proposed Occupancy Use *(Provide brief description for new use of building i.e. office, hair salon, restaurant, automotive shop, retail, storage etc.)* _____

___ Number of Existing Restrooms _____; Number and type of fixtures in each if more than one set in each restroom _____

___ Number of Existing Drinking Fountains (if provided) _____

___ Existing Building Type Construction: *(Provide brief description of existing building type construction, i.e. wood framing and/or metal/steel, masonry, etc., or combination thereof)* _____

___ Storage areas / Occupancy: *(Provide brief description of types of items to be stored)* _____

___ Floor Plan *(Please provide if available at time of application)*. NOTE: Although a floor plan will NOT always be required (i.e. office use to office use or retail to retail etc. –same use), depending on the previous and new occupancy use, one may be required. In order to reduce review and approval time we recommend providing one if already available.

Renovations: *(The following information is required if applicable; see note **in bold** at beginning of this check list)*

___ Scope of work: *(Provide brief description of renovations to be done.)*

