



Department
of Building
Safety &
Permits

Application for OCCUPANCY

DELIVER FORM TO:
250 Bouscaren St, Ste 202
Slidell, LA 70458
985.646.4323
fax 985.646.6117
buildingsafety1@cityofslidell.org

Applicant / Business Information

Name of Business: _____

Address of Business Location: _____

Type of Business: _____

Owner of Business: _____

Contact Phone Number: _____

Email Address: _____

Name of Previous Business at this Address: _____

How long has building been vacant? _____ If not vacant, is this a change of ownership? _____

Is this a shared business space? _____

Please Note:

- *There is a \$50.00 fee for inspection and Issuance of the Certificate of Occupancy when it is determined that an inspection is required, typically when there is a change in use of a structure.*
- *If you plan to make any interior or exterior renovations to the building please explain on the line below or attach additional sheets, as a Building Permit may be required.*

Applicant Signature

Signature of Applicant

Date

FOR DEPARTMENT USE ONLY

- | | |
|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> A copy of property lease provided by applicant | <input type="checkbox"/> Approved application given to Applicant |
| <input type="checkbox"/> A copy of the health certificate provided by applicant | <input type="checkbox"/> Approved application sent to Finance Department and Applicant has been informed |
| <input type="checkbox"/> Temporary power form sent _____ | |

Inspection Required: Yes _____ No _____		Receipt #
_____ Approved _____ Not Approved	By:	Fee Paid \$
	Date:	Permit #
Flood Zone:	Design Elevation:	Tax Assessment #: