



P.O. Box 400 \* St. Francisville, LA 70775  
Phone (225) 635-3688 \* Fax (225) 635-6984 \* email: [townhall@townofstf.com](mailto:townhall@townofstf.com)  
Building Official Email: [buildingofficial@townofstf.com](mailto:buildingofficial@townofstf.com)

## BUILDING PERMIT APPLICATION – COMMERCIAL

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

PROJECT CONTRACT VALUE: \$ \_\_\_\_\_ BUILDING AREA: \_\_\_\_\_

# OF BUILDING STORIES: \_\_\_\_\_ BUILDING USE: \_\_\_\_\_

ZONING USE DISTRICT: \_\_\_\_\_

OVERLAY DISTRICT: \_\_\_\_\_

**\* *Overlay District may require additional reviews by the Architectural Design Review Board (ADRB) and the Historic District Commission.***

APPLICANT(S): \_\_\_\_\_

APPLICANT MAILING ADDRESS: \_\_\_\_\_

APPLICANT PHONE #: \_\_\_\_\_ APPLICANT EMAIL: \_\_\_\_\_

PROPERTY OWNER(S): \_\_\_\_\_

OWNER MAILING ADDRESS: \_\_\_\_\_

LESSEE (if applicable): \_\_\_\_\_

LESSEE MAILING ADDRESS: \_\_\_\_\_

LESSEE PHONE #: \_\_\_\_\_ LESSES EMAIL: \_\_\_\_\_

PROFESSIONAL OF RECORD (POR): \_\_\_\_\_ LICENSE #: \_\_\_\_\_

POR ADDRESS: \_\_\_\_\_

POR PHONE #: \_\_\_\_\_ POR EMAIL: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

CONTRACTOR ADDRESS: \_\_\_\_\_

CONTRACTOR PHONE #: \_\_\_\_\_ CONTRACTOR EMAIL: \_\_\_\_\_

PROJECT CONTACT PERSON: \_\_\_\_\_ CONTACT PHONE #: \_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

### CONSTRUCTION INFORMATION: Review Type

#### NEW CONSTRUCTION

- Complete Build-out
- Partial Build-out
- Foundation Only
- Shell Only

#### RENOVATION OR ADDITION TO AN EXISTING BUILDING

- Alteration Level 1 (Minor alterations or repairs)
- Alteration Level 2 (<50% of the square footage of the building)
- Alteration Level 3 (50% or more of the square footage of the building)
- Addition(s)
- Change in use of the building \*Check Previous Occupancy Below.

- \_\_\_\_\_ Assembly
- \_\_\_\_\_ Institutional
- \_\_\_\_\_ Business
- \_\_\_\_\_ Mercantile
- \_\_\_\_\_ Education/Day-Care
- \_\_\_\_\_ Residential
- \_\_\_\_\_ Factory/Industrial
- \_\_\_\_\_ STORAGE
- \_\_\_\_\_ High Hazard
- \_\_\_\_\_ Utility/Miscellaneous
- \_\_\_\_\_ Unknown

- Date of Original Building: \_\_\_\_\_
- Date of latest major renovation to this building: \_\_\_\_\_
- Existing Square Feet: \_\_\_\_\_
- Addition Square Feet: \_\_\_\_\_
- Renovated Square Feet: \_\_\_\_\_

#### MISC CONSTRUCTION

- Kitchen Exhaust Hood Construction
- Paint Booth Construction
- Generator Installation

\*Check Level Below.

- \_\_\_\_\_ Level I
- \_\_\_\_\_ Level II

- Clean Agent Room Construction

Foundation: \_\_\_\_\_

Construction Type: \_\_\_\_\_

Outside Wall: \_\_\_\_\_

Roofing Material: \_\_\_\_\_

Roof Type: \_\_\_\_\_

Total Square Footage: \_\_\_\_\_

Total Accessory Footage: \_\_\_\_\_

Structure Height: \_\_\_\_\_

Electrical Utilities Provider: \_\_\_\_\_ DEMCO or \_\_\_\_\_ Entergy

#### DESIGN LOADS

- First Floor Live Loads: \_\_\_\_\_
- Floor Live Loads above the 1st floor: \_\_\_\_\_
- Corridor Live Loads: \_\_\_\_\_
- Roof Live Loads: \_\_\_\_\_
- Roof (Ground) Snow Loads: \_\_\_\_\_

#### WIND DESIGN DATA

***Disclaimer: The Ultimate Design Wind Speed value is based on the verified map location for the project. For Components & Cladding Wind Pressure, please indicate the largest value when multiple values are applicable.***

- Ultimate Design Wind Speed: \_\_\_\_\_
- Nominal Design Wind Speed: \_\_\_\_\_
- Risk Category: \_\_\_\_\_
- Wind Exposure Category: \_\_\_\_\_
- Applicable Internal Pressure Coefficient: \_\_\_\_\_
- Components & Cladding Wind Pressure: \_\_\_\_\_

#### FLOOD DESIGN DATA

- Adjusted Base Flood Elevation (ABFE): \_\_\_\_\_
- Finish Floor Elevation: \_\_\_\_\_
- Elevation of Lowest Member: \_\_\_\_\_
- Flood Zone: \_\_\_\_\_
- Base Flood Elevation: \_\_\_\_\_
- Design Flood Elevation: \_\_\_\_\_

**OCCUPANCY CLASSIFICATION(s):**

*\*Select Classification Description that applies*

**( ) ASSEMBLY**

*\*Check Group Below*

- ( ) Group A-1
- ( ) Group A-2
- ( ) Group A-3
- ( ) Group A-4
- ( ) Group A-5

*\*Check Occupant Size Below*

- ( ) 50 TO 299 OCCUPANTS
- ( ) 300 TO 499 OCCUPANTS
- ( ) 500 TO 999 OCCUPANTS
- ( ) 1,000 OCCUPANTS OR MORE

**( ) INSTITUTIONAL**

*\*Check Group Below*

- ( ) Group I-1 (Group Care)
- ( ) Group I-2 (Health Care)
- ( ) Group I-3 (Detention/Correction)

*\*Check Condition Below*

- \_\_\_\_\_ CONDITION 1
- \_\_\_\_\_ CONDITION 2
- \_\_\_\_\_ CONDITION 3
- \_\_\_\_\_ CONDITION 4

- ( ) Group I-4 (Day-Care)
  - Number of Children over 2-1/2 years of age: \_\_\_\_\_
  - Number of Children 2-1/2 years of age or less: \_\_\_\_\_
  - Number of Adults (if Adult Day Care): \_\_\_\_\_

**( ) BUSINESS**

**( ) MERCANTILE**

*\*Check Group Below*

- ( ) Class A (>30,000 sq. ft.)
- ( ) Class B (Between 3,000 and 30,000 sq. ft.)
- ( ) Class C (<3,000 sq. ft.)

**( ) EDUCATIONAL OR DAY-CARE**

**OCCUPANCY CLASSIFICATION(s): Continued**

**( ) RESIDENTIAL**

*\*Check Group Below*

- ( ) Group R-1 (Hotel/Motel - Primarily Transient)
- ( ) Group R-2 (Apartments- Primarily Permanent)
- ( ) Group R-3 (Small Miscellaneous)
- ( ) Group R-4 (Small Residential Care for <16 Occupants)
  - Number of Occupants: \_\_\_\_\_

**( ) FACTORY / INDUSTRIAL**

*\*Check Group Below*

- ( ) Group F-1 (Moderate Hazard)
- ( ) Group F-2 (Low Hazard)

**( ) STORAGE**

*\*Check Group Below*

- ( ) GROUP S-1 (Moderate Hazard)
  - Identify the materials to be stored: \_\_\_\_\_
- ( ) GROUP S-2 (Low Hazard)
  - Identify the materials to be stored: \_\_\_\_\_
- ( ) HIGH HAZARD

*\*Check High Hazard Group Below*

- \_\_\_\_\_ GROUP H-1 DETONATION HAZARD
- \_\_\_\_\_ GROUP H-2 DEFLAGRATION HAZARD
- \_\_\_\_\_ GROUP H-3 COMBUSTIBLE HAZARD
- \_\_\_\_\_ GROUP H-4 HEALTH HAZARD
- \_\_\_\_\_ GROUP H-5 HAZARDOUS PRODUCTION MATERIALS

**( ) UTILITY / MISCELLANEOUS**

Provide a Description of Use: \_\_\_\_\_

---

---

**SUBMITTAL REQUIREMENTS:**

- \_\_\_\_\_ 1. Completed and signed application.
- \_\_\_\_\_ 2. Copy of Deed/Act of Sale to property.
- \_\_\_\_\_ 3. Lease, if applicable.
- \_\_\_\_\_ 4. Survey of property, signed and dated by a licensed land surveyor or engineer.
- \_\_\_\_\_ 5. Detailed set of complete plans- Two sets of 2'x3' sheets and two sets of 11"x17" sheets. Plans must be drawn to scale. Plans shall be stamped by a Louisiana licensed architect or engineer if so required by the Architects Licensing Law, L.R.S. 37:155.
  - Utility Plans must show backflow preventer with details for water lines (size, type, location)
  - Utility Plans must show check valve details for sewer line in accordance with attached sewer specifications.
  - Landscape plan, if required, must be drawn to scale and stamped by a Louisiana licensed architect of engineer.
  - Detailed sign plan (a separate permit is required)
  - Site plan showing location of all existing and proposed structures, distances between existing structures and proposed structures, proposed setbacks from property lines, and detailed parking plan.
  - See Louisiana State Fire Marshal building code check list as referenced.
- \_\_\_\_\_ 6. Grade Certificate/Benchmark Certificate signed and dated by a licensed land surveyor ONLY if in an AE or VE flood zone. Also, a VE Design Certificate signed by a registered professional engineer or architect, if in a VE flood zone.
- \_\_\_\_\_ 7. Sign Permit - separate sign permit application & approval required / see SIGN PERMIT APPLICATION
- \_\_\_\_\_ 8. Health Department approval, if applicable. PHONE #225-635-3644
- \_\_\_\_\_ 9. Office of State Fire Marshal approval. (225) 925-4911
- \_\_\_\_\_ 10. DOTD approval, if applicable. (225) 638-7286
- \_\_\_\_\_ 11. Payment of Permit fee

\*NOTE-Additional permits and/or approvals may be required, road crossing permit, demolition permit, DEQ permit, etc.

## COMMERCIAL INSPECTION GUIDELINES:

**YOU MUST CALL FOR AN INSPECTION DURING EACH PHASE OF CONSTRUCTION.**

- \_\_\_\_\_ 1. Temporary power pole - Call
- \_\_\_\_\_ 2. In-ground plumbing/site de-grassing - Call
- \_\_\_\_\_ 3. Foundation (pre-pour) - Call
- \_\_\_\_\_ 4. "Building Under Construction" Elevation Certificate, signed and stamped by a licensed land surveyor, if in an AE or VE flood Zone. Submit certificate to:
- \_\_\_\_\_ 5. Building Official - 1st inspection - Call
  - Setbacks met

**ALL OF THE ABOVE REQUIREMENTS MUST BE MET AND APPROVED BY TOWN OF ST. FRANCISVILLE PLANNING & ZONING BOARD PRIOR TO POURING THE FOUNDATION.**

- \_\_\_\_\_ 6. Electrical rough-in - Call
- \_\_\_\_\_ 7. Plumbing top out - Call
- \_\_\_\_\_ 8. Mechanical rough-in - Call
- \_\_\_\_\_ 9. Framing - Call
- \_\_\_\_\_ 10. Insulation - Call
- \_\_\_\_\_ 11. Final electrical - Call
- \_\_\_\_\_ 12. Final mechanical - Call
- \_\_\_\_\_ 13. Final plumbing - Call
- \_\_\_\_\_ 14. Attic Insulation - Call
- \_\_\_\_\_ 15. Final building (Certificate of Compliance) - Call
- \_\_\_\_\_ 16. First sewer inspection: inspection of uncovered lines after connection to the public sewer system. (see attached sewer specifications) - Call Town of St. Francisville / Utility Department 635-3688.
- \_\_\_\_\_ 17. Second sewer inspection including check valve – Call Town of St. Francisville / Utility Department 635-3688 (You will not receive a Certificate of Occupancy if you do not have this inspection)
- \_\_\_\_\_ 18. "Finished Construction" Elevation Certificate, signed and stamped by a licensed land surveyor, if in an AE or VE flood zone. Submit Certificate to Town of St. Francisville / Building Official 225-635-3688
- \_\_\_\_\_ 19. Building Official 2nd inspection: - Call Town of St. Francisville / Building Official 225-635-388
  - Construction debris removed from property including port-o-let
  - Landscaping installed according to approved plan
  - Parking complete and striped
  - No construction related damage to street/curb or other public property
  - Driveways & sidewalks installed and approved
- \_\_\_\_\_ 20. Fire Marshal Inspection (ok for permanent occupancy) - Submit to Town of St. Francisville / Building Official 225-635-3688
- \_\_\_\_\_ 21. Health Department final - Submit to Town of St. Francisville / Building Official 225-635-3688
- \_\_\_\_\_ 22. Backflow inspection by third party inspector- Submit Report to Town of St. Francisville / Building Official 225-635-3688.
- \_\_\_\_\_ 23. Backflow preventer test completed and Submit to Town of St. Francisville / Building Official 225-635-3688.