



Date: _____

CHANGE OF OCCUPANCY/OWNERSHIP

Permit # _____

Project Location: _____ *Town* _____ *Zip Code* _____

MOVING INTO AN: (Check below)

APARTMENT

EXISTING MOBILE HOME

EXISTING HOUSE

CHANGE OF OWNERSHIP

CHANGE OF TENANT

If water services are disconnected for a period of 2 WEEKS OR LONGER or in order to obtain a PERMANENT ELECTIRCAL CONNECTION you must contact the State Health Department at (225) 265-4002.

Property Owner's Name: _____ **Phone #:** _____

Property Owner's Mailing Address: _____

Applicant / Business Name: _____ **Phone #:** _____

Present Mailing Address: _____ **Louisiana (Zip)** _____

Work Phone # _____ **Cell Phone #** _____ **Fax #** _____ **Value of Structure** _____

Number of Bedrooms: _____ **Number of Bathrooms:** _____ **Exterior of Building:** _____ **Foundation:** _____

UTILITIES REQUESTING: **Gas** **Water:** St. James Parish **Electricity:** Entergy –Acct. # _____

Signature of Applicant

Date

Permit Fee of Ownership/Tenant: \$25.00

Make payable to: ST. JAMES PARISH GOVERNMENT

PERMIT FEE IS NON-REFUNDABLE