



# St. James Parish Government

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**Peter A. Dufresne**  
Parish President

Permitting Phone: (225) 562-2243

Permitting Email: [permitting@stjamesparishla.gov](mailto:permitting@stjamesparishla.gov)

## Demolition Requirements

### No Fee Required

- Proof of Ownership or Notarized Letter from Property Owner
- Completed Application
- Four color pictures of property (front, back, right, and left side)
- Call to 811
- Order Dumpsters (Republic Services @ \$275 each)
- LaDHH Approval (Health Department)
- Letter of No Objection from Levee Board (if required, see information below)

## Levee Board Information:

Please note that any and all excavations within 1,500 feet of the crown of the Mississippi River levee must obtain a letter of no objection from the Pontchartrain Levee District (East Bank) at (225) 869-9721 or Lafourche Basin Levee District (West Bank) at (225) 265-7545.

## Sanitation Department Information:

All Permits Including PLUMBING Must Go through the Health Department

Phone: (225) 265-4002  
29170 Health Unit Street, Vacherie, LA 70090

Office Hours:  
Monday & Wednesday – 8:00 a.m. – 9:30 a.m.

# Permitting Department

## Demolition



**FOR OFFICE USE ONLY**

**DATE RECEIVED:** \_\_\_\_\_

**PERMIT #:** \_\_\_\_\_

Circle One: **Residential**   **Commercial**

PROJECT/SERVICE ADDRESS: \_\_\_\_\_  
 (STREET) \_\_\_\_\_ (CITY, STATE) \_\_\_\_\_ (ZIP) \_\_\_\_\_  
 Subdivision: \_\_\_\_\_ Lot Number: \_\_\_\_\_

If Commercial, Business Name: \_\_\_\_\_

### PROPERTY OWNER'S INFORMATION

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ City: \_\_\_\_\_  
 Email: \_\_\_\_\_ State, Zip: \_\_\_\_\_

### APPLICANT'S INFORMATION

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ City: \_\_\_\_\_  
 Email: \_\_\_\_\_ State, Zip: \_\_\_\_\_

### CONTRACTOR'S INFORMATION

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ City: \_\_\_\_\_  
 Email: \_\_\_\_\_ State, Zip: \_\_\_\_\_

Why do you wish to demolish the existing structure? \_\_\_\_\_

Contact Republic Services for Dumpsters (225) 663-7808.      How many dumpsters purchased: \_\_\_\_\_

**Cost of Demolition**

Do you wish to rebuild on the site? Y or N      If yes, what do you plan to build: \_\_\_\_\_

What is your plan for maintaining the lot after the structure has been moved?  
 \_\_\_\_\_

### CERTIFICATION

I certify that the above information is correct and agree to demolish this building in accordance with the plot, building plans and specifications submitted herewith, an in strict compliance with all the provisions of the Building Code, Electrical Code, and Health and Plumbing Regulations of St. James Parish.

Applicant (Please Print)

Applicant's Signature

Date

Title

### OFFICE USE ONLY

- Proof of Ownership
- Health Department Approval
- Levee Board Approval
- Utilities Disconnection Verification

- Water - Verified By: \_\_\_\_\_
- Gas - Verified By: \_\_\_\_\_
- Electricity - Account Number: \_\_\_\_\_

GIS Notification      Date: \_\_\_\_\_

Employee's Initials: \_\_\_\_\_

Permit #: \_\_\_\_\_