



## St. James Parish Government

P. O. Box 106  
Convent, Louisiana 70723-0106  
FAX (225) 562-2422  
TDD: (225) 562-8500

**Peter A. Dufresne**  
Parish President

Permitting Phone: (225) 562-2243

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

### All Sign Permits - \$100

#### **\*\*All permit fees are non-refundable\*\***

- Proof of Ownership or lease agreement
- Contract or Permission Letter from Property Owner
- Liner Footage of Building (*detached signs*)
- Liner Footage of Lot (*detached signs*)
- Plans for SCP&D Submittal
- Contractor's Registration
- State License Certificate

### 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.

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**Rick Webre**  
Director of  
Operations

**Felix Boughton**  
Director of  
Finance

**Ingrid LeBlanc**  
Director of  
Human Resources

**Eric Deroche**  
Director of  
Emergency Preparedness

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# Permitting Department

## Sign Permit



FOR OFFICE USE ONLY

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

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

Type of Sign: \_\_\_\_\_

**Residential or Commercial Use** (circle one)

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

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

Installer: \_\_\_\_\_ STATE LIC#: \_\_\_\_\_ CR#: \_\_\_\_\_

PROJECT DESCRIPTION:	VALUE OF SIGN
<input type="checkbox"/> Sign Attached <input type="checkbox"/> Sign Detached <input type="checkbox"/> Temp Banner Square Footage: _____   Liner Ft of Building: _____   Liner Ft. of Lot: _____	

CERTIFICATION		
I certify that the above information is correct and agree to construct 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)	Date	Title
Applicant's Signature		

### PAYMENT INFORMATION

PERMIT AMOUNT: \$ \_\_\_\_\_   Payment Reference #: \_\_\_\_\_

PAYMENT TYPE: Cash, Check, Money Order, or Credit Card

5800 Highway 44  
P.O. Box 106  
Convent, LA 70723

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