



ST. JOHN
PLANNING & ZONING

CHANGE OF USE / CHANGE OF OCCUPANCY APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MGOCONNECT.ORG/CP/PORTAL

OFFICE USE ONLY

Permit No: _____	Date Requested: _____
Date Requested: _____	Zoning District: _____
Council District: _____	Division: _____
Council District / At Large: _____	Historic District: Y / N Design Rev. Corridor: Y / N
Lot, Sq., Subdivision: _____	

BUSINESS INFORMATION

Name: _____

Address: _____

APPLICANT INFORMATION

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

PROPERTY OWNER INFORMATION (ALL owners must be listed and must sign)

Same as above? (circle one) **YES / NO** If **NO**, has the authority of the applicant to act on behalf of the property owner been verified with a signed, dated, and notarized endorsement? Complete page 3.

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

ADDITIONAL INFORMATION

Description of activities that will occur at the business address: _____

Previous Occupant: _____

Square footage of building or tenant space: _____

No. of proposed parking spaces: _____

No. of required parking spaces: _____

Applicant's Signature

Date



CHANGE OF USE / CHANGE OF OCCUPANCY APPLICATION

OFFICE USE ONLY

Permit No: _____

SUBMITTAL REQUIREMENTS

- Completed and signed application.
- Recorded copy of Act of Sale, Judgment of Possession, or Deed to the property.
- Site plan indicating parking and/or landscaping, if required.
- Health Department approval, if applicable call (985)444-5639.
- Office of State Fire Marshal approval for **life safety only** required. Contact (225) 925-4911 or submit online at sfm.dps.louisiana.gov.
- Completed Wastewater application.

AS NEEDED SUBMITTAL REQUIREMENTS

- Permits, certifications, or approvals from state agencies, if applicable (ex. DEQ).
- Trade permit or renovation permit.
- Sign permit.

FEES

- | | |
|------------------------------|-----------|
| 1. Change of Occupancy / Use | \$ 100.00 |
| 2. Technology Fee | \$ 10.00 |

NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said property. Any action of the Parish in this matter does not: (1) imply that the applicant's title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on said property are enforceable or are not enforceable.

NOTE: Within sixty (60) days of submission of minimum application requirements, this application will become null and void. By signature of this application, the applicant agrees and understand that all permit fees are non-refundable.

NOTE: All fees will be doubled for all after-the-fact permits and when information provided on an application is falsified. All fees are non-refundable.

Applicant's Signature

Date



ST. JOHN
PLANNING & ZONING

CHANGE OF USE / CHANGE OF OCCUPANCY APPLICATION

OFFICE USE ONLY

Permit No: _____

OWNER'S ENDORSEMENT

(please print clearly)

I _____ being duly sworn, depose that I reside at
Owner(s) / Corporation

_____ in the Parish
Street City

of _____ and State of _____ and that I am
Parish State

the owner of the property described as _____ and that I have authorized
Address

_____ to make the foregoing petition for a Change of Use.
Applicant

Signature of owner(s) of property or authorized agent

SWORN TO ME THIS _____ DAY OF _____,

NOTARY PUBLIC

Print name of Notary: _____

Bar roll # _____