



Date _____
Tracking Number _____

BUILDING PERMIT APPLICATION

MASTER APPLICATION

Property Address: 4210 Dauphine St Apt./Ste. Number: —

Type of Building:

<input checked="" type="radio"/> Residential (Single Family)	<input type="radio"/> Residential (Two Family)	<input type="radio"/> Residential (Half of Party Wall Double)	<input type="radio"/> Residential (Accessory Use)
<input type="radio"/> Commercial (Multi-Family)	<input type="radio"/> Commercial (Business Use)	<input type="radio"/> Commercial (Mixed Use)	<input type="radio"/> Commercial (Accessory Use)

APPLICANT INFORMATION

Applicant Identity: Owner Lessee Contractor Architect Engineer
 Mark all that apply Other

Name Mark Jagger

Address 4210 Dauphine St City New Orleans State LA Zip 70117

Phone 504-505-9024 Email jagger@fastmail.com

SCOPE OF WORK/PROPOSAL

Description of proposed work (Please include thorough details or provide attachments.)

Replace damaged and non-original front door with another door that matches style of the house.

Will the exterior of the building be altered in any way? Yes No

Was this structure built before 1978? Yes No
If yes, Supplement G "Lead Based Paint Removal Form" is required.

Will any electrical work be done under this scope of work? Yes No

Will any A/C or gas line work be done under this scope of work? Yes No

Will signage be affected (altered, added, changed)? Yes No
If yes, Supplement H "Sign Permit Application" is required.

Is this application for a Federal Housing Unit? Yes No

Estimate cost/value of proposed work \$ TBD ***Attach quote, contract, or other documentation of estimate.**

Area of existing structure 1170 ft² Area affected 0 ft² New Area added 0 ft² Number of Floors 1

Foundation Type: Slab Pier Sprinklers: Yes No Building Condition: Good Average Not applicable

Existing Use _____ Proposed Use _____

BUILDING INFORMATION

- ICC Construction Type:
- Not Applicable
 - Site Built
 - Modular
 - Manufactured

	Number of Existing Meters	Number of New Meters
Electrical Meters		
Gas Meters		

Construction/Development
 Related Permit



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RESIDENTIAL BUILDING INFORMATION (Single Family and Two Family) NOT APPLICABLE

Dwelling Area _____ ft² Garage Area _____ ft² Number of Bedrooms _____ Number of Bathrooms _____ Central A/C and Heat? Yes No

MULTIFAMILY AND COMMERCIAL BUILDING INFORMATION NOT APPLICABLE

Total Number of Residential Units _____ Efficiency Units _____ 1 Bedroom _____ 2 Bedroom _____ 3+ Bedrooms _____
 Number of Elevators _____ Number of A/C Units _____ Number of Boilers _____ Number of Escalators _____

OWNER INFORMATION SAME AS APPLICANT

Name _____ Company _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

CONTRACTOR INFORMATION SAME AS APPLICANT

Name _____ Company _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____ State Lic. # _____ Exp. _____

ARCHITECT INFORMATION SAME AS APPLICANT

Name _____ Company _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____ License Number _____

ENGINEER INFORMATION SAME AS APPLICANT

Name _____ Company _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____ License Number _____

FEES

- Permit Fee: \$60 + (\$5 per \$1000 of work to be performed)
- Plan review Fee: (\$1 per \$1000 of work to be performed)
- VCC/HDLC Surcharge: (50% of total fee, calculated using the above)

ACKNOWLEDGMENTS

I certify that the above information is true and correct to the best of my knowledge. I understand that the City of New Orleans is authorized to suspend or revoke a permit or license issued under the provisions of its Municipal Code wherever a permit or license is issued in error or on the basis of incorrect, inaccurate or any false statement or misrepresentation, or in violation of any ordinance or regulation or any of the provisions of the City of New Orleans Municipal Code, the Comprehensive Zoning Ordinance, the International Construction Code or International Fire Code as adopted by the City of New Orleans. Fines and penalties for misrepresentation of material facts will be assessed in accordance with City of New Orleans ordinances and State of Louisiana Revised Statutes. I understand that any change in the scope or cost of the work must be reported to the Department of Safety and Permits and additional permits may be required.

I certify that I have the authority of the current property owner(s) to apply for the work proposed.

Applicant Signature Mark J. [Signature] Date 8/17/2022
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