

Construction/Development
 Related Permit



Date _____
 Tracking Number _____

BUILDING PERMIT APPLICATION

MASTER APPLICATION

Property Address: 2114 Decatur

Apt./Ste. Number: _____

Type of Building:

☐ Residential
 (Single Family)

☐ Residential
 (Two Family)

☐ Residential
 (Half of Party Wall Double)

☐ Residential
 (Accessory Use)

☐ Commercial
 (Multi-Family)

☒ Commercial
 (Business Use)

☐ Commercial
 (Mixed Use)

☐ Commercial
 (Accessory Use)

APPLICANT INFORMATION

Applicant Identity:

☐ Owner

☐ Lessee

☐ Contractor

☐ Architect

☐ Engineer

Mark all that apply

☒ Other

Name Ricardo Roberts

Address 821 St Andrews Blvd

City Laplace

State La

Zip 70068

Phone 4235963711

Email mrrroberts@gmail.com

SCOPE OF WORK/PROPOSAL

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

removal of Garage that was damaged by storm

Will the exterior of the building be altered in any way?

☐ Yes ☐ No

Will a driveway be installed?

☐ Yes ☒ No

Was this structure built before 1978?

☐ Yes ☒ No

Will any portion of the sidewalk be repaired?

☐ Yes ☒ No

If yes, Supp G "Lead Based Paint Removal Form" is required.

Is the impervious surface area on the site where work will be performed > 5,000 sq ft?

☐ Yes ☒ No

If yes, Supp L "Sidewalk Repair Form" is required.

Is the total area of the site where you will be working > 1 acre?

☐ Yes ☒ No

Will this project have a total square footage of more the 40,000sf?

☐ Yes ☒ No

Will a dumpster be placed in the street?

☐ Yes ☒ No

Will any electrical work be done under this scope of work?

☐ Yes ☒ No

If yes, Supp J "Dumpster/Construction Zone Form" is required.

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 \$ _____ *Attach quote, contract, or other documentation of estimate.

Area of existing structure _____ ft² Area affected _____ ft² New Area added _____ ft² Number of Floors _____

Foundation Type: ☐ Slab ☐ Pier

Sprinklers: ☐ Yes ☐ No

Building Condition: ☐ Good ☐ Average ☐ N/A

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

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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 Decatur Allstars, LLC Company Decatur Allstars, LLC
 Address 5924 Constance Street City New Orleans State LA Zip 70115
 Phone 5043018086 Email zach@kuppermancompanies.com

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 [Signature] Date 9/20/2022
 1300 PERDIDO ST, NEW ORLEANS, LA 70112 • (504) 658-7100