TOWN OF LIVONIA

P.O. Box 307 – 3111 La. Highway 78
Livonia, Louisiana 70755
Office (225) 637-2981 Fax (225) 637-3189

APPLICATION FOR BUILDING PERMIT CLEARANCE

APPLICANT INFORMATION

APPLICANT NAME:______________________________ TELEPHONE: ____________

OWNER NAME: ______________________________ TELEPHONE: ____________

MAILING ADDRESS: ______________________________

PROJECT SITE

Physical Address: ______________________________

Subdivison: ______________________________ Lot No. ______________

Current Use:
____

Proposed Use:
____

Total building sq. ft. ______________ No. of buildings on lot prior : __________

Estimated value of work: $______________________________

WORK TO BE PERFORMED	TYPE OF USE/STRUCTURE
___ New Construction	___ Residential
___ Addition	___ Light Commercial
___ Renovation	___ Commercial
___ Manufactured Bldg . ___New or ___Used: AGE ____ (attach title)	___ Industrial
___ Other (specify) ________________	___ Other ________________

I, the undersigned, do hereby certify that to the best of my knowledge, all of the information provided herein and attached hereto is accurate and all work shall be performed in accordance with all applicable requirements of the Town of Livonia Code of Ordinances. I understand that failure to begin work within six months will render this clearance null and void.

APPLICANT'S SIGNATURE ______________________ DATE ______________________

THIS IS NOT AN APPLICATION FOR A BUILDING PERMIT, BUT ONLY FOR A CLEARANCE PERMIT PERTAINING TO THE CODES OF LIVONIA. ALL BUILDING PERMITS ARE TO BE OBTAINED FROM THE POINTE COUPEE PARISH POLICE JURY PERMIT OFFICE AFTER YOU HAVE RECEIVED A PERMIT CLEARANCE FROM THE TOWN OF LIVONIA.

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<u>FOR OFFICE USE ONLY</u>

Approved By: ______________________________ Date:______________________

Clearance No:__________ Zoning District: ________ Sewer Permit No.: __________ Mobile Home Insp.:________

Other:______________________________Parish Permited______________

Mobile Home Date: ______________ VIN: ______________________________