



Keith Berry, Director

City of Sulphur
Occupational License
101 N. Huntington St.
Sulphur, LA 70663
Phone: 337-527-4517
license@sulphur.org



Christopher L. Duncan, Mayor

POINTS TO REMEMBER ABOUT YOUR OCCUPATIONAL LICENSE

Every separate location of a business needs an occupational license

Before any alteration is made to the building you must notify the Permit Office

Should the location of a business change?

- Obtain a Certificate of Occupancy for the building into which you are moving
- Notify the License Department of your new address

Contact the License Department when you close your business

A license is only valid until December 31st of the year it is issued

When food is involved, you must contact the Calcasieu Parish Board of Health for an inspection.

A copy of a current inspection is required before licensing.

When alcohol is involved, you must obtain a City and State Alcohol Beverage License

Questions about your business activity, please do not hesitate to call:

License Department-----337-527-4517 or 337-527-2050
 Local Sales Tax Office-----337-217-4280
 State Sales Tax Office-----855-307-3893
 Health Department-----337-480-2550



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NEW BUSINESS APPLICATION

Name of Business _____

Business Location _____

Mailing Address _____

Legal Name of Owner _____

Home/Corp Address _____

Business Telephone _____ Home/Corp _____

Type of Organization _____ Individual _____ Partnership _____ Corp _____ LLC

If other than individual, give names of partners or principal officers

Describe in detail the type of business activity or service you will perform

Tax Id# _____

Title _____ Social Security # _____

Driver's License # & State _____

I affirm that the information given on this application is true and correct.

Signature

Date



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CERTIFICATE OF OCCUPANCY APPLICATION

Name of Business _____

Owner of Business _____

Business Location _____

Mailing Address _____

Contact Telephone # _____ Business # _____

Owner/Lessor of Property _____

Address of Property Owner/Lessor _____

Description of Business activity or service _____

City Water/Sewer service account name _____

I, the undersigned, hereby apply for a Certificate of Occupancy and acknowledge my understanding that no building or structure can be occupied until it has been issued a Certificate of Occupancy. I also understand that a Certificate of Occupancy is only valid when the property is used consistent with the use indicated on the application. I affirm that the information given on this application is true and correct.

Signature of Applicant _____ Title _____

Office Use Only

No Inspection required _____ Occupancy Type _____

City Official _____

Building Approval

Date

Building Inspector _____

Fire Inspector _____

Revised 3/17/17

