



Inspection Department
 110 N Huntington
 Sulphur, LA 70663
 337-527-2050
 permits@sulphur.org



Building Permit Application

Date of application: _____

OWNER

CONTRACTOR

Name: _____

Name: _____

Address of Job: _____

Address: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Residential Commercial

Description: _____

SQ Feet: _____

Cost of Job: _____

The above work shall be performed by the undersigned permitted property owner or a licensed and bonded Contractor. All construction shall comply with the appropriate International Building code. Construction must commence within 180 days from the date the permit is issued.

Notice/Disclaimer -The Permittee/Landowner and their transferee(s), heir(s) and assign(s) are responsible for compliance with any and all building restrictions. NO permit issued by the City of Sulphur authorizes violation of building restrictions. Furthermore, the City of Sulphur does not conduct any search of the records related to any restrictions, limitations of use or any other encumbrances. The signature of the Owner/Agent below acknowledges this Notice/Disclaimer.

 Contractor

 Owner/Agent

 Inspector

TERMINATION OF PERMIT BY OWNER

In the event of termination or cancellation of a permit by an owner, the owner must notify the city in writing of said termination and notify the City of the name of the substitute or replacement contractor, if any. The permit shall be amended effective on the date of notice of the substitute or replacement contractor form from the owner. The owner shall pay the sum of \$50.00 for the substitution and/or replacement of a contractor.

Office Use Only

Flood Zone	Entered by	Date	Permit #



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City of Sulphur Plan Review Check List

Commercial

Required information to obtain a Building Permit

1. Site Plan-Indicate street(s), lot lines, dimensions, parking, driveway(s), easements or other encumbrances, footprint and size of all existing and proposed improvements with building setbacks.
2. Storm Water Prevention Plan and Drainage Plan will be required. Submit plans to Public Works Director Austin Abrahams at aabrahams@sulphur.org or contact number is 337-527-4511 and Permit Office permits@sulphur.org
3. Operations and Maintenance Agreement (if project has a detection pond) will be required. Submit to Public Works Director aabrahams@sulphur.org or 337-527-4511 and Permit Office permits@sulphur.org.
4. Land Use Approval-This office will provide this information.
5. Both water and sewer taps must be purchased. (337-527-4522)
6. Gravity Drainage (A "No Objection Letter" is required by Gravity Drainage Dist. 5 Ward 4 for all new commercial construction, residential in excess of 20,000 square feet, modifications that impact District maintained drainage facilities, proposed improvements which will impact runoff to or from adjacent properties. (337-625-3851)
7. DOTD Access Connection (Attached to State Hwy or within a half a mile of state hwy) www.sp.dotd.la.gov or contact numbers 337-437-9130 or 337-437-9138
8. Complete set of prints for review of the development (*Submit plans as a pdf. format – plans will not be returned)
9. Louisiana State Fire Marshal Review Letter (1-800-256-5452) & Copy of Stamped Building Plans
10. FEMA Elevation Certificate (flood elevation certificate if applicable)
11. Freeboard Elevation Form
12. Compliance with City of Sulphur License Department (License Contractors)
13. Louisiana Department of Health (337-721-4060 Ext: 6552)
14. Louisiana Department of Environmental Quality (DEQ) (337-491-2667)



CITY OF SULPHUR
FREEBOARD ELEVATION FORM

SECTION A— (This section to be filled in by Office Personnel)

Date: _____ Office Official: _____

Name: _____ Signature _____

Property Address: _____ Title _____

Flood Zone: A AE X (circle one)

NFIP Community #: 220041

FIRM Panel #: 22019CF

FIRM Date: 2/18/2011

Is the property above located in a Floodway? YES NO (circle one)

(1) FIRM Zone (A, AE, X) Zone X only—GIS elevation _____

FIRM Base Flood Elevation = _____ ft + 1.00 ft = _____ ft

(2) Highest Recorded of Modeled 100 yr Inundation

Elevation = _____ ft + 1.00 ft = _____ ft

**Manufactured Homes: Lowest Required Floor Elevation = "Bottom of I-Beam".

NOTE: This form is to be returned to the surveyor to establish a construction benchmark

SECTION B—(This section to be filled in by Professional Land Surveyor, Engineer, or Architect)

Benchmark Used: _____ Vertical Datum: _____

If one of the following criteria does not apply, please mark as not applicable (N/A) to the left.

(3) Sanitary Sewer Manhole (SSMH) (upstream or downstream of wye)

Top of Nearest SSMH = _____ ft + 1.00ft = _____ ft

(4) Street Centerline (Street Name: _____)

Elevation= _____ ft + 1.00ft = _____ ft

Lowest Adjacent Grade: _____

Benchmark: _____

Surveyor Comments:

Required)



(Seal

Signature (Land Surveyor, Engineer, or Architect)

Date



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Plan Review Application

Date: _____

Name of Applicant: _____ Phone No: _____

Address of Applicant: _____

Owner of Job: _____ Phone No: _____

Email: _____

Address of Job: _____

Description of Job: _____

Hours of Operation for Business _____ Type of Business _____

DEVELOPERS

Architect/Engineer/Designer of Plans: _____

Address: _____

Phone: _____ Email: _____

Building Contractor: _____

Address: _____

Phone No: _____ Cell Number _____

Email: _____

Square footage of job: _____ Land Area: _____

Number of stories: _____ Height of Structure: _____

Electrical Contractor: _____ Contact Number _____

Mechanical Contractor: _____ Contact Number _____

Plumbing Contractor: _____ Contact Number _____

COST OF JOB: \$ _____ Residential Plan Review \$55.00 Commercial Plan Review \$70.00

As owner of the above mentioned property, or his duly authorized agent, I certify that the above information contained in this application is true and correct to the best of my knowledge and hereby state that if a permit is issued, all provisions of the City Ordinance and State laws will be complied with, I further agree to hold the City harmless of any and all claims, which may result as a consequence of the permitting and/or erection of the said structure.

Signature of Applicant: _____ Date: _____

Flood Zone	Entered by	Date	Permit #



STORM WATER EROSION & SEDIMENT CONTROL CHECKLIST

****Please fill in checklist & return to Permit Office along with site plan when applying for permits****

1. _____ **Show all proposed erosion and sediment protection measures (BMPs)** (*silt fencing/hay bales for protecting drainages and/or neighboring properties, large rock/gravel to minimize tracking of sediments, dust, debris onto roadway*).
2. _____ Show North arrow
3. _____ Label property/lot dimensions
4. _____ Show proposed structures/development with distances from lot lines (*including driveways*).
5. _____ Show all natural and manmade drainages (*gravity drain ditches, bodies of water, swale ditches, etc...*) with distances from building/grading pad sites.
6. _____ Indicate drainage flow across property
7. _____ Show all storm drains, yard drains, culverts, catch basins, etc...
8. _____ Show all dirt stockpiles and impervious (concrete/asphalt) areas
9. _____ Define limitation of grading area and/or grassy buffers (*see questions below*)
 - a. Is entire lot to be graded and/or filled? (YES or NO)
 - b. Will any grassy buffer remain around perimeter of graded/filled area? (YES or NO). If yes, please indicate location and size on plan.

****NOTE: IN SOME CASES, ADDITIONAL INFORMATION MAY BE REQUIRED****



Reference: CHAPTER 24 – ARTICLE IV. – STORMWATER DISCHARGES FROM CONSTRUCTION ACTIVITIES

To All Contractors, Homeowners, and Developers:

The City of Sulphur requires that erosion controls (Best Management Practices) be installed prior to Stormwater Grading Permit being issued. Any soil disturbance including, but not limited to, the following will require a Grading Permit: Sec. 24-52. – Permitting Procedures.

1. Excavating, cutting, filling, grading, draining, or paving of lots, parcels, or other areas,
2. Altering, rerouting, deepening, widening, obstructing, or changing in any way an existing drainage system or feature,
3. Development of residential lots or subdivisions, commercial, institutional, or industrial complexes, installation of utilities or other activities, or
4. Commencement of any other development or excavation which may: significantly increase or decrease the rate and/or quantity of surface water runoff; degrade the quality of water; adversely affect any sinkhole, water course, or water body.

The following described activities shall not require a grading permit in order to perform clearing, excavation, or related earthwork: Sec. 24-51. – Exemptions.

1. If Building permit is obtained,
2. Utility or public works improvements,
3. Excavation in connection with a building, swimming pool, retaining wall, or other structure authorized by a valid building permit,
4. Any emergency activity that is immediately necessary for the protection of life, property, or natural resources,
5. Septic repair and/or alteration,
6. Cemetery graves,
7. Temporary stockpiling or storing of materials, provided that such operations do not affect adjacent properties and all drainage and erosion control requirements,
8. Accepted agricultural practices such as plowing, cultivation, construction of agricultural structures, nursery operations, tree cutting, logging operations leaving the stump and root mat intact, and cultivated sod operation,
9. Minor landscaping and sprinkler installation.

If your project requires a Grading Permit, complete the attached Grading Permit Application, and submit to the City of Sulphur Permit Department for review. Once approved, the applicant will receive a Grading Permit or Building Permit to start site preparation.

If you have any questions specific to the erosion controls, contact the Permitting Department at, 337-527-2050 or Public Works Department at, 337-527-4511.

Signature

Date

WATER AND/OR SEWER SERVICE AVAILABILITY

DATE: _____

Business Name (if applicable): _____

Location: _____

Address or Parcel No.

City

Requested By: _____

Name

Contact Information: _____

Address

Phone Number

FAX

Email

I am requesting information on the availability of (inside the corporate limits of Sulphur only):

(Check all that apply)

Water Availability Sewer Availability

The request is for: A Single Unit

Multiple Units Number of Units _____ (Site Plan Required)

Plan Required – A plan showing the exact location of the parcel must be submitted with this request form. A block plan or GIS print is acceptable. It is preferred that the plan shows an adjacent cross street

Please Note: Approval for water and/or sewer service is contingent upon site conditions, available water or sewer mains, and compliance with the City of Sulphur’s design requirements. (Please allow up to five business days for each approval).

For City of Sulphur Use Only:

The availability of WATER for the location above is:

WATER IS AVAILABLE Water Main is located within street frontage or rear easement

WATER IS AVAILABLE – CONDITIONAL Water service can be provided. Conditions apply.

WATER IS NOT AVAILABLE

LOCATION OF TIE-IN: _____

Date: _____ **Reviewed By:** _____

The availability of SEWER for the location above is:

SEWER IS AVAILABLE Sewer Main is located within street frontage or rear easement

SEWER IS AVAILABLE – CONDITIONAL Sewer service can be provided. Conditions apply.

SEWER IS NOT AVAILABLE

LOCATION OF TIE-IN: _____

Date: _____ **Reviewed By:** _____

WATER AND SEWER CHECKLIST

DATE: _____

BUSINESS NAME/CUSTOMER NAME: _____

SERVICE ADDRESS: _____ PHONE # _____

CONTACT PERSON _____ PHONE# _____

REASON FOR REQUEST: _____

TAP REQUESTED LOCATION: _____

LOCATION MUST BE MARKED BY OWNER

*Installation of an approved BFP as described in Chp 22, Art. II, Sec 22-21 of the Code of Ordinances.

SHALL BE THE OWNER'S RESPONSIBILITY Backflow Preventer needed yes no

PROJECT: SINGLE FAMILY DWELLING MOBILE HOME
 COMMERCIAL BUILDING COMMERCIAL BUILDING WITH SUITES
 DUPLEX TRI-PLEX QUAD-PLEX APARTMENTS

Water Service requirements

Commercial Bldg w/suites, Duplex, Tri-plex, Quad-plex and Apartments must have a separate water tap and cut off for each unit.

WATER:

_____ 1" RESIDENTIAL WATER TAP

_____ 1" RETROFITTED METER

_____ 3/4" RESIDENTIAL WATER TAP

_____ 2" COMMERCIAL WATER TAP & METER

_____ 3/4" COMMERCIAL WATER TAP & METER

_____ 2" RETROFITTED METER

_____ 3/4" RETROFITTED METER

_____ 4" COMMERCIAL WATER TAP
(METER INSTALLED BY OWNER)

_____ 1" COMMERCIAL WATER TAP & METER

FIRE LINE: (SPRINKLER SYSTEM)

_____ 2" COMMERCIAL TAP

_____ 6" COMMERCIAL TAP

_____ 8" COMMERCIAL TAP

SEWER:

_____ 6" RESIDENTIAL SEWER TAP

_____ 6" COMMERCIAL SEWER TAP

INSPECTOR

DATE

FORM COMPLETED BY