

CITY OF MINDEN

520 Broadway

P. O. Box 580
Minden, Louisiana 71058-0580

Phone: (318) 377-2144

FOR OFFICE USE ONLY

Building Permit

Permit No. _____

Paid _____

Date _____

By _____

APPROVED FOR PERMIT

By _____

APPLICATION FOR BUILDING PERMIT

SUBMIT IN DUPLICATE

Job Location _____ Lot No. _____
(PLEASE TYPE OR PRINT STREET ADDRESS)

Subdivision _____ Zoning _____ Flood Zone _____

Owner _____ Phone _____

Architect or Engineer _____ Address _____

Builder _____ Address _____ Phone _____

Type of Construction _____ Size of Building _____

Remarks: _____

	Estimated Cost of Construction	\$	_____
Electrician	_____	Building Net Cost	\$ _____
Plumber	_____	Rate	\$ _____
HVAC	_____	Fee Collected	\$ _____

OFFICE OF ZONING ADMINISTRATION

CERTIFICATION

Property Zoned _____

Approved For _____

Date _____

Authorized Signature _____

I, or we, hereby make application for a permit to erect, remodel, repair or demolish the building structure, or sign, described below and detailed on the plans and specifications attached hereto and herein agree to comply with the provisions of all ordinances applicable hereto. It is further agreed that any code requirements missed during initial plan review will be immediately complied with upon notice.

BY _____
Builder, Owner or Agent

DATE _____

All changes in construction of site plans shall be resubmitted for review.