TPCG CHANGE OF OCCUPANCY / CERTIFICATE OF OCCUPANCY CHECK LIST
8026 Main Street, Suite 100, Houma, LA 70360
To schedule an inspection, call 985-873-6568.
Schedule your inspection online at www.mypermitnow.org

Applicant name: ________________________________  Business name: ________________________________
Applicant phone: ________________________________  Applicant email: ________________________________
Project address: ________________________________  Mailing address: ________________________________

Applicable Building Codes:
- IBC  2015 International Building Code
- IPC  2015 International Plumbing Code
- IMC  2015 International Mechanical Code
- IEBC  2015 International Existing Building Code
- NEC  2014 National Electrical Code

NOTE: If renovations/alterations are proposed that involve new construction, repairs or relocation of any walls, doors, windows, roof coverings, electrical, mechanical or plumbing, a commercial renovation permit is required.

The following information needs to be provided for all Change of Occupancy and/or Certificate of Occupancy permits:

**Building and Planning information:** *(Provide the following if not already indicated within any drawings that may have been provided)*

- Gross Area of Leased Space *(approximate square footage of the owned/leased total space)* ______________
  
  If office/warehouse combined:
  Total sq. footage of office space __________  Total sq. footage of warehouse __________

- Gross Building Area *(IF KNOWN please provide approximate square footage of total building area including areas not owned/leased)* ______________

- Number of Existing Parking Spaces *(provide brief description of number of off-street parking stalls assigned to space and if any are to be added)* ______________

- Previous Occupancy Use *(Please provide to the best of your knowledge a brief description of previous building use, i.e. office, office/warehouse, repair shop, etc... and/or type of previous business activities)*

____________________________________________

____________________________________________
Proposed Occupancy Use (Provide brief description for new use of building i.e. office, hair salon, restaurant, automotive shop, retail, storage, water processing, etc.)

Will the proposed use of the structure involve waste as defined by Chapter 11 of the Terrebonne Parish Code of Ordinances? ________________________________

If so, will the waste(s) be generated, disposed, collected, transported, and/or stored at the facility?_______________

If so, what type of waste(s) will be involved and how will the waste be generated?___________________________

Do you possess or require an EPA Hazardous Waste ID number? _________________ . If so, please provide your EPA Hazardous Waste ID Number ___________________________________.

Please list all Federal/State permits received/applied for regarding hazardous waste, NORM, waste, etc:

______________________________________________________________

______________________________________________________________

______________________________________________________________

Number of Existing Restrooms_____; Number and type of fixtures in each if more than one set in each restroom

______________________________________________________________

Number of Existing Drinking Fountains (if provided) _________________

Existing Building Type Construction: (Provide brief description of existing building type construction, i.e. wood framing and/or metal/steel, masonry, etc., or combination thereof) ______________________________________

Storage areas / Occupancy: (Provide brief description of types of items to be stored)__________________________________

Floor Plan (Please provide if available at time of application). NOTE: Although a floor plan will NOT always be required (i.e. office use to office use or retail to retail etc. –same use), depending on the previous and new occupancy use, one may be required. In order to reduce review and approval time we recommend providing one if already available.

Utilities are: (Please circle) ON OFF

Renovations: (The following information is required if applicable; see note in bold at beginning of this check list)

Scope of work: (Provide brief description of renovations to be done.)

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