

# Permitting Department

## Contractor's Registration



**FOR OFFICE USE ONLY**

**DATE RECEIVED:** \_\_\_\_\_

**CR #:** \_\_\_\_\_

Type of Registration:    **New**        **Renewal**

Name under which business to be conducted:

Name of Applicant: \_\_\_\_\_  
(If corporation, name of President or all partners)

Mailing address of main office: \_\_\_\_\_  
\_\_\_\_\_

Local mailing address: \_\_\_\_\_  
\_\_\_\_\_

Location of worksite: \_\_\_\_\_  
(Parish wide, Convent, Lutcher, Vacherie, etc.)

Type of Contractor: \_\_\_\_\_  
Electrical, Plumbing, Mechanical, Painting, Land Developer, etc.)

State of Louisiana License #: \_\_\_\_\_

St. James Parish Sales/Use tax ID #: \_\_\_\_\_

Parish Occupational License #: \_\_\_\_\_ Parish: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

CERTIFICATION		
I certify that I am registered with the state of Louisiana, I will follow in strict compliance with all the provisions of the Building Code, Electrical Code, and Health and Plumbing Regulations of St. James Parish.		
Applicant (Please Print)	Date	Title
Applicant's Signature		

Please make checks payable to:

**St. James Parish Government**  
**Attn: Permitting Office**  
**P.O. Box 106**  
**Convent, LA 70723**

5800 Highway 44  
P.O. Box 106  
Convent, LA 70723

Phone: (225) 562-2243  
Email: [permitting@stjamesparishla.gov](mailto:permitting@stjamesparishla.gov)