



South Central Regional Construction Code Council

5058 W. Main Street Houma, Louisiana 70360
P.O. Box 1870, Gray, Louisiana 70359
Toll Free at 1-866-95-PERMIT or (985) 655-1070

MyPermitNow.Org

SCPDC CHANGE OF OCCUPANCY / CERTIFICATE OF OCCUPANCY CHECK LIST

Applicant's Name: _____ Business Name: _____

Applicant's Phone Number (s): _____ Email: _____

Project Address: _____ Business Mailing Address: _____

Applicable Building Codes:

- IBC 2012 International Building Code
- IPC 2012 International Plumbing Code
- IMC 2012 International Mechanical Code
- IEBC 2012 International Existing Building Code
- NEC 2011 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)* _____

___ 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 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.

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.)*

