

Lionel Johnson, Jr.  
Mayor



City Council:  
Deborah Alexander  
Freddie "Carl" Frazier, Sr.  
Ronald Grace  
Melvin Hasten, Sr.  
Kelvin York, Sr.  
  
Police Chief:  
Kevin Ambeau, Sr.

**CITY OF ST. GABRIEL**

*"A City of Pride, Progress & Possibilities"*

**APPLICATION FOR SWIMMING POOL PERMIT**

|  |  |  |                                      |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> Residential Pool (1&2 Family/Townhomes) | <input type="checkbox"/> Commercial Pool   |  |                                      |
| <input type="checkbox"/> New Construction                        | <input type="checkbox"/> Addition          | <input type="checkbox"/> Pool Building |                                      |
| <input type="checkbox"/> In-Ground Pool                          | <input type="checkbox"/> Above-Ground Pool | <input type="checkbox"/> Spa           | <input type="checkbox"/> Other _____ |

**APPLICANT/CONTRACTOR INFORMATION**

Business Name: \_\_\_\_\_  
 Names (First, Last) \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 City State Zip

**OWNER INFORMATION**

Business Name: \_\_\_\_\_  
 Names (First, Last) \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 City State Zip

\_\_\_\_\_ Check Box if owner information is the same as Applicant or Contractor  
 Name of Subdivision (if applicable) \_\_\_\_\_ Lot Number: \_\_\_\_\_

Project/Site Address: \_\_\_\_\_

Construction Valuation of Structure/Improvements \_\_\_\_\_ Square Footage of Structure: \_\_\_\_\_

| PROVIDED?                | DOCUMENT CHECKLIST   | NOTES |
|--------------------------|--|-------|
| <input type="checkbox"/> | 2 Sets of Construction Documents – Site Plan, Equipment Location, Electrical/Plumbing Plans and Electronic PDF Copy – Jump Drive |       |
| <input type="checkbox"/> | Contractor Licensing – With State of Louisiana Contractor’s Licensing Board  |       |
| <input type="checkbox"/> | Contractor’s Proof of Insurance & Workers Compensation   |       |
| <input type="checkbox"/> | Contractor Annual Registration – With City of St. Gabriel  |       |
| <input type="checkbox"/> | Contractor Sales Tax Clearance – With Iberville Parish   |       |
| <input type="checkbox"/> | 911 Address issued by Iberville Parish   |       |

**FOR OFFICE USE ONLY – PERMIT TECHNICIAN REVIEW OF COMPLETION OF APPLICATION DOCUMENTS**

ACCEPTED \_\_\_\_\_ ON HOLD/PENDING \_\_\_\_\_ DENIED \_\_\_\_\_

P.O. Box 597 • 5035 Iberville Street • St. Gabriel, LA • Tel: (225) 642-9600 • Fax: (225) 642.9670 • Website:  
[www.cityofstgabriel.us](http://www.cityofstgabriel.us)

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