

**LIONEL JOHNSON, JR.**

MAYOR

CITY COUNCIL

**WILLIAM CUSHENBERRY, JR.**

**MELVIN HASTEN, SR.**

**JEFFERY HAYES, SR.**

**HOZA REDDITT, SR.**

**KELVIN YORK, SR.**

**KEVIN AMBEAU, SR.**

POLICE CHIEF

­ **CITY OF ST. GABRIEL**

**Application for MOVE-IN PERMIT**

Site Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **RESIDENTIAL** | New Mobile Home Modular Home Elevated Home Mobile Home Swop-Out |
| **COMMERCIAL** | Office Trailer Modular Building Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Applicant INFORMATION OWNER INFORMATION**

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names (First, Last)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names (First, Last)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Check Box if Owner information is same as Applicant information.

|  |  |  |
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| **CHECK** | **DOCUMENT** | **OFFICE USE** |
|  | Pictures of the structure – all 4 sides (Include HUD Insignia) |  |
|  | State Issued Driver’s License of ID for applicant |  |
|  | Proof of ownership of the structure to be moved |  |
|  | Survey site plan (show structure location, front, rear, sides setbacks, etc.) |  |
|  | 911 Address issued by Iberville Parish (Steven Stein 225-687-5150) |  |
|  | Date of moving structure |  |

|  |  |  |
| --- | --- | --- |
| ***VERIFICATION OF FEES*** | | |
|  | | |
| **Check** | ***Applicable Fees*** | **OFFICE USE** |
|  | *Move-in Permit Fee \_\_\_\_\_$50.00\_\_\_\_*(Move-in permit fee applicable for both swop-outs and new) |  |
|  | *Entergy Permit Fee \_\_\_\_\_$50.00\_\_\_\_(Submit Application for Entergy permit form where required)* |  |
|  | *Sewer Account Fee \_\_\_\_\_$50.00\_\_\_\_(Submit Application for Sewer account form where required)* |  |