Commercial Plan Review Application

Street Address of Property: _____

Name of Business: _____

Building to be used for (list all purposes and uses of building and land): _____

_____

Construction to be performed on building and/or property:

_____ New Construction   _____ Repair
_____ Renovation   _____ Relocation
_____ Remodeling   _____ Occupancy Change

Applicant: Name: _____

                    Address: _____

                    Phone #: _____

Property Owner: Name: _____

                    Address: _____

                    Phone #: _____

Contact person for inspection: (Monday through Friday 8am to 3pm)

                    Name: _____

                    Phone #: _____

Signature of Applicant: _____

For Administrative Use Only

Building Occupancy Permitted Use Classification: _____

Zoning District Permitted Use Classification: _____

Zoning District Classification:
☐ R-1 Single Family Residential   ☐ C-1 Neighborhood Commercial
☐ R-2 Single Family Residential   ☐ C-1 A Expandable Limited commercial
☐ R-3 Multi Family Residential   ☐ C-2 General commercial
                                         ☐ I Industrial

☐ Zoning Application APPROVED provided the applicant will abide by all state, parish, and city codes and ordinances and will obtain all necessary permits and licenses.

☐ Zoning Application DENIED for the following reasons: _____

_____

_____
Signature of Zoning Administrator

Commercial Plan Review Checklist Questionnaire

Date _____

1. Location of Proposed Property:
   a. Street Address of Property _____
   b. Lot Number and Description of Property (if needed) _____
   _____

2. Drawing Requirements:
   a. Construction to be performed on building and/or property.
      _____ 1. New Construction   _____ 4. Relocation
      _____ 2. Renovation   _____ 5. Occupancy Change
      _____ 3. Repair

   b. If New Construction, is building or structure:
      1. Educational, Institutional, or Assembly occupancy.
      2. Three stories or more in height.
      3. 5000 square feet or more in area.

   c. Drawings to submit with zoning application:

		Yes	No
1. Site plan drawing(s) required:		☐ Yes	☐ No
a. submit _____ set(s) of drawings.			
b. drawings must be drawn to scale.		☐ Yes	☐ No
c. blue prints must be drawn by an architect or engineer.		☐ Yes	☐ No
d. hand drawings will be acceptable.		☐ Yes	☐ No
2. Construction word drawing(s) required:		☐ Yes	☐ No
a. submit _____ set(s) of drawings.			
b. drawings must be drawn to scale.		☐ Yes	☐ No
c. blue prints must be drawn by an architect or engineer.		☐ Yes	☐ No

3. A pre-zoning walk through inspection of the site is required.　　☐ Yes　　☐ No

4. A pre-zoning walk through inspection of the facility is required.　　☐ Yes　　☐ No

5. Project site boundary locations need to be clearly marked.　　☐ Yes　　☐ No
   (staked, painted, fence line, etc.)

6. Project location falls within the boundaries of:
   a. Historic District　　☐ Yes　　☐ No
   * If Yes, the Historic District Commission Application for a Certificate of Appropriateness must be completed.
   b. Flood Hazard Area "A Zone"　　☐ Yes　　☐ No
   * If Yes, the Elevation Certification for "A Zone" Development section of the Development Permit Application must be completed.

7. Special Instructions: _____
   _____

_____
Signature of Zoning Administrator

City of Donaldsonville

P.O. Box 470 Donaldsonville, LA 70346
Phone (225) 473-4247 • Fax (225) 473-0630

Commercial Plan Review Determination
(Meeting with Fire Chief)

Immediate Past Use and Occupancy: _____
(Name of last business at this location)

Date Building Was Last Occupied: _____

Life Safety Occupancy Classification: _____

Plan Review Application must be submitted to the Office of State Fire Marshall.   ☐ Yes   ☐ No
** If yes, Building Permits will not be issued without State Plan Review approval.

_____   _____
Signature of Fire Chief or his Designee   Date