



15485 CLUB DELUXE ROAD  
HAMMOND, LA 70403  
OFFICE: (985) 542-2117  
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### MOVING PERMIT APPLICATION

Name of Applicant: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Site Location (911 Address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Directions to Site: \_\_\_\_\_

**Type of Structure:** (check-one) Email Address: \_\_\_\_\_

Used Mobile Home: \$25\_\_\_\_ New Single-Wide: \$60\_\_\_\_ New Double-Wide: \$120\_\_\_\_

House: \$50\_\_\_\_ Storage Shed: \$50\_\_\_\_ FEMA MH: \_\_\_\_\_ Restore MH: \_\_\_\_\_

#### **Location Information:**

Existing Mobile Home Park: Yes\_\_\_\_ No\_\_\_\_ Mobile Home Park's Name: \_\_\_\_\_

Private Property: Yes \_\_\_\_ No \_\_\_\_ Land Owner's Name (Must be the name of applicant): \_\_\_\_\_

Total Acres? \_\_\_\_\_ Structure Length \_\_\_\_\_ Structure Width \_\_\_\_\_

Mover's Name and Phone #: \_\_\_\_\_

Structure being moved from: \_\_\_\_\_

How many existing dwellings and/or houses (includes manufactured homes and single family homes) are located on the property?  
Mobile Homes: \_\_\_\_\_ Houses: \_\_\_\_\_ (Must be 1/2 acre per T.P. Ord No. 19-13)

Is this structure replacing an existing structure: Yes\_\_\_\_ No\_\_\_\_ Will structure be renovated: Yes\_\_\_\_ No\_\_\_\_

*Site Plan to be provided showing existing dwellings, proposed structures location including distances from other dwellings and setbacks. Per TP Ord No.19-13 (Attached)*

*If proposed manufactured home is placed within Special Flood Hazard Area (Flood Zone) lowest horizontal member to be at least 12 inches above BFE. If manufactured home is replacing an existing dwelling unit the previous unit to be removed from the site within 60 days of placement of the new structure or power disconnect to be issued.*

By signing below, I understand and acknowledge that all information is valid. In the event that this information is invalid this permit may be revoked.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

.....  
**OFFICE USE ONLY:**

FLOOD DETERMINATION: Community No. 220206 Panel: \_\_\_\_\_ Zone: \_\_\_\_\_ Tax Assessment# \_\_\_\_\_

Section: \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Council District Number: \_\_\_\_\_

Site Plan provided \_\_\_\_\_ How Determined: \_\_\_\_\_ Elevation Certificate Required: Yes\_\_\_\_ No \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_ This area IS NOT in a special flood hazard area \_\_\_\_\_ This area IS in a special flood hazard area

Signature: \_\_\_\_\_

Date: \_\_\_\_\_