

Work Application

New Orleans & CBD Historic District Landmarks Commissions

1340 Poydras Street, Suite 1152, New Orleans, LA 70112 Telephone (504)658-7040 Fax (504)658-3802

(Please print or type)

Address of Property: _____

Owner's Name: _____

Owner's Address: _____
(Street) (City/State) (Zip) (Phone #)

Applicant (If different from owner): _____

Applicant's Address: _____
(Street) (City/State) (Zip) (Phone #)

Applicant Is: _____ Owner _____ Lessee _____ Architect _____ Contractor _____ Other

Architect (If any) _____ PHONE _____ FAX _____

Contractor (If any) _____ PHONE _____ FAX _____

Detailed description of work contemplated (drawings and specifications are required for all major work in which the work cannot be clearly and specifically described in writing):

For Staff Use Only

Date Received _____

Date Approved _____

C of A # Dates _____

Signature of Owner or Representative

Date