

St. Bernard Parish Government

Department of Community Development
8201 West Judge Perez Drive
Chalmette, LA, 70043
Office: 278-4310 Fax: 278-4298



Date: _____
Received by: _____
Tracking Number: _____

LICENSED CONTRACTOR APPLICATION

Electrical: _____ State License # _____ Expiration Date: _____

HVAC: _____ State License # _____ Expiration Date: _____

Plumbing: _____ State License # _____ Expiration Date: _____

Gas: _____ State License # _____ Expiration Date: _____

Certificate Of Insurance: _____ LDR/State Tax Clearance: _____

Occupational License #: _____ City/State (Issued): _____

Name of Louisiana State License Holder: _____

Mailing Address:

_____ Street Address City/State Zip

Work Telephone: _____ Cell Telephone: _____

Name Of Business: _____

Address Of Business:

_____ Street Address City/State Zip

I do hereby attest that the above information is true and correct.

Signed: _____ Date: _____

Print Name: _____

For Office Use Only

License Issued By: _____

Date: _____

I.D. Card Issued By: _____

Date: _____

New _____

Renewal _____