

# St. Charles Parish Department of Planning & Zoning

P.O. Box 302 Hahnville, LA 70057 (985)-783-5060 Fax (985)-783-6447

## PERMIT APPLICATION HOME OCCUPATION PERMIT

PERMIT #: 1655.07	DATE RECEIVED: 4/27/07
RECEIPT#: 19274	ZONING DISTRICT: RAIA
DATE POSTED:	NOTICES DATE:
SUBDIVISION:	
APPLICANT: Robyn Bordelor	1
IS THE APPLICANT THE OWNER OF TH	IF AFFECTED PROPERTY?
MAILING ADDRESS: 324 West Hoove	1 St. Destates 1 A 70047
STREET ADDRESS: 324 West HOOVEN	St Opstreben 1 1 20017
NAME OF BUSINESS: Eagle Eye I	Jesman, LA 10041
BUSINESS ADDRESS: 324 West	Visite of Doubles
PHONE#S: 504-491-736.	Goover st. Destrehan, LA 20047
E-MAIL ADDRESS: Cobyng+21@	
Below specify the type of business you are applying to	operate from your home, and in detail, explain how
you plan to operate the business, any materials that will	ll be stored at the home, or any vehicles used either
partially or exclusively for the business, that will be ke	
The nuture of this husiness is	to provide home inspection
Services for Clients at Client-regner of coal estate transactions.	ents then use inspection, reports
generated by computer (at my h	ome for near tighting on the sind
Peace of mind Only paper reports	are to be repeated at the home
THE CHIN MATERIAL STORED WILL BE I	eports, brochuses, and business
cards. Unly my personal vehicle	Nissan Altimal, used for openal
and business purposes, will reside	3
HOME OCCUPATION DEFINITION: A home occ	upation is an accessory use of a dwelling unit,
conducted by one or more persons who reside at the pro- incidental and secondary to the use of the dwelling for	residential purposes and does not change the
character thereof or adversely affect the uses permitted	in the residential district of which it is a part.
IMPORTANT NOTICE: READ CARLEULLY BEI	ORE COMPLETING THIS APPLICATION!
You are cautioned that the permit does NOT allow ope	ration of a home occupation in violation of the large
and ordinances. Your home occuration location MAY Unit, and Fire Department Personnel. If you have any	he cleecked by the Planning Department, Health
building does not conform to the requirements of the or	dinances administered by these departments, you
are urged to contact them for further information before Permit. YOU MUST ACKNOWLEDGE YOUR UN	Filing this application for a Home Occupational
COMMITMENT TO COMPLY WITH EACH OF	THE FOLLOWING PROVISIONS BY
INITIALING IN THE SPACE PROVIDED.	
	inical equipment. No piece of equipment shall
	echanical and/or electric equipment shall not ot exceed 8 kilowatts or the equivalent in a gas-
fired fixture.	or exceed 8 knowards of the equivalent in a gas-
2. Lagree that no sales of products and no ser	vices will take place at this home occupation
unless specifically authorized by the Plann	
will not place any signs of any type on the	e property regarding the home occupation.
	e ton (manufacturer's rating) at the home. No
more than one licensed vehicle will be utili	zed in connection with the home occupation.

5. Only my family, who actually resides at the home with me, will engage in the home occupation. I will not have any employees come to my home. I will not have any cust coming to my home, unless specifically authorized byt the Planning Director.	omers
6. I will limit all storage of materials or products to 20% of gross floor area of the dwelli All storage will be inside a building.	ng.
7. I will conduct the home occupation inside a building. (A carport or patio sunshade is a inside a building)	not
8. The home occupation will not eliminate required off-street parking.	
9. Lagree that the home occupation shall not cause external effects, including but not lim to: increased noise, excessive traffic, excessive lighting, or offensive odor, which is incompatible with the characteristics of the residential zone, or in violation of any appl governmental code. There will be no illegal discharge of materials, fluids, or gases int sewer system, or any other manner of discharging such items in violation of any governmental code.	licable
10. I will obtain parish Occupational License and a Health Certificate from the Parish He Department when required,	salth
11. I will provide a copy of the parish Occupational License for the business to the Depart of Planning and Zoning upon its issuance and upon renewal of that license annually, provide a copy of the occupational license to the Department of Planning and Zoning the 31st of March of each calendar year.	Lwill
12. I agree that the Planning Department, Fire Department or Louisiana State Fire Mars and health department my impsect my premises at any time.	hall
13. I understand that failure to abide by the twelve statements above will cause the home occupation permit to be revoked.	
14. I will further read and agree to abide by St. Charles Parish Ordinance regulating hon occupations, as well as any special provisions required by the Planning Director.	ne
CHECKLIST OF ITEMS NEEDED TO PROCESS APPLICATION:	
A. Act of Sale to Property	
B. Signed and notarized affidavit from property owner, if applicant is not	the
property owner.	
C.Print out of abutting property owners from the Assessor's Office.	
D. Check or money order for \$200 made payable to \$t. Charles Parish	
Department of Finance.	
THAVE READ AND RECEIVED A COPY OF THE HOME OCCUPATION ORDINANCE, A ACKNOWLEDGE THAT I WILL COMPLY WITH ITS CONDITIONS AND WITH ANY SPECIAL PROVISIONS IMPOSED BY THE PLANNING DIRECTOR. I FURTHER ACKNOWLEDGE THAT ANY VIOLATION OF THE ORDINANCE OR SPECIAL PROVISIONSTITUTES AN EXPRESSED SURRENDER AND ABANDONMENT OF THE HOME OCCUPATION PERMIT.	810NS
APPLICANT SIGNATURE:  If the applicant herein is not the property owner, a written and notarized letter of consent must obtained from the owner to obtain the home occupation permit.	
Application is approved/disapproved on this date:	
SPECIAL PROVISIONS:	

PLANNING DIRECTOR SIGNATURE/DATE

Louisiana Hame Disporters lies not



## ST. CHARLES PARISH

#### DEPARTMENT OF PLANNING & ZONING

[10] [20X [30]] • HAHGWILLE, LODISIANA 70057 [985] 78.0 (60) • LAX (985) 783-6447

#### AFFIDAVIT

We, Robert J. : Cynthia M. . swear to be the sole owner(s) of the property

Bordelon

Gurther certify that no other owners exist. I We grant permission to the applicant, Robyn

Bordelon

To Conduct a Services - based inspection business

on the above designated property

Abell J. Silelen

(PROPERTY OWNER)

(PROPERTY OWNER)

CONDUCT A Services - based inspection business

(PROPERTY OWNER)

CONDUCT A Services - based inspection business

(PROPERTY OWNER)

CONDUCT A Services - based inspection business

(PROPERTY OWNER)

CONDUCT A Services - based inspection business

(PROPERTY OWNER)

PALUST HE NOT

JAMIE HAYDEL MANCUSC 7 STOREHOUSE LANE

DESTREHAN, LA 7004\*
NOTARY # 65692
COMMISSIONED FOR 1 150
ST. CHARLES CONTROLLED