## Town of Abita Springs

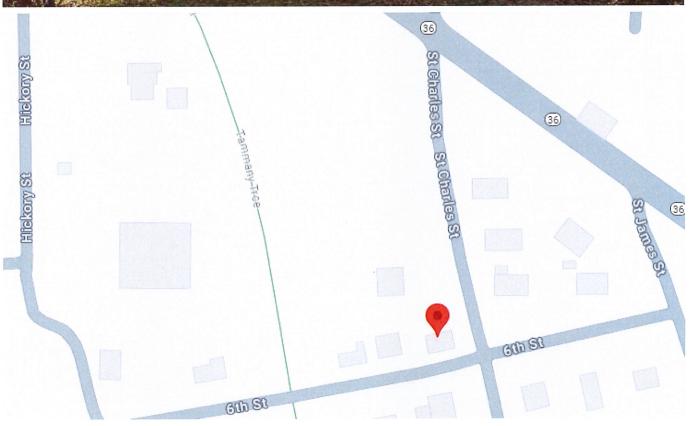
Date: 6 5 24	Type of Approval
Owner	☐ Sign ☐ Fence
Applicant	☐ Other:
APPLICATION FOR PERMIT TO: (Briefly describe project-Use separate paper if necessary)  New York 160 St., Charles St.,  IN KIND CHARLEST.	
APPLICANT NAME: John O. Collay	
Email: johncolly chetter hat Phone!	
Address: 2210 LAUNCH ST/BOX/64 ASTA SPIRILLA	
OWNER (IF DIFFERENT FROM APPLICANT):	
Email:	Phone:
Address:	
CONTRACTOR NAME & COMPANY:  Email: Etero6 Gry Charles Washine: 985-222-8476  Address: A	
Cohn Holley 6/5/24	
Signature of Owner /Date/ /	Signature of Applicant Date
Do Not Write Below this Line	
7 DAYS NOTICE REQUIRED BEFORE FINAL APPROVAL OF CONSTRUCTION. IF YOU BUILD IN THE HISTORIC DISTRICT APPROVAL MUST BE GIVEN BEFORE YOUR CERTIFICATE OF OCCUPANCY WILL BE ISSUED.  Commissioners Initial	
Ron Blitch Revio	ew Date:
Otto Dinkelacker Appr	oved:
Thad Mancil	
Andre Monnot Com	missioner Assigned:
Paul Vogt Wor	k Completed as Presented:
Inspe	ected on Date:

### Town of Abita Springs

#### SUBJECT PROPERTY Street Address or Legal Description: **Nearest Cross Streets:** Lot Dimensions: Estimated Completion Date: Work Begins: **DETAILS ABOUT YOUR SIGN OR FENCE SIGNS** Location: Permanent □ Temporary Location: On Building □ Hanging Two-Sided Sign? No Size of Sign: Sign Material: **Post Material:** Height of Sign: **Describe Sign Lighting:** Notes: **FENCE** Location: Height: Style: Material: ☐ 6' Privacy with 2' Lattice Type: ☐ 4' Picket ☐ 7' Privacy **Set Back Requirements:** Notes: **PAINT DETAILS** Details: Roof - Cor. Metal roof in kind replacement **OTHER** Give Details:

## 71601 St. Charles Street









# Replacing corrugated metal roof with same exact material

