

JEFFERSON PARISH  
Dept. of Inspection and Code Enforcement  
1221 Elmwood Park Blvd., Suite 101  
Jefferson, LA 70123  
(504) 736-6950

- ☐ \$75.00 Renewal in Birth Month  
☐ \$30.00 Delinquent Fee (renewed 1-3 months after birth month)  
☐ \$75.00 Revival Fee (begins 4<sup>th</sup> month after birth month)

Total \_\_\_\_\_

/ **RESIDENTIAL HOME IMPROVEMENT CONTRACTOR'S LICENSE  
RENEWAL**

License Holder/Qualifying Party

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_  
(AS IT APPEARS ON CURRENT LICENSE- PLEASE PRINT)

Current Jefferson Parish License# \_\_\_\_\_ State License # \_\_\_\_\_

Business Name/\*Owner's Name \_\_\_\_\_  
(\*Registered Agent/Officer verified by Secretary of State)

Business Address (No P.O. Boxes) \_\_\_\_\_

Mailing Address (If different than business) \_\_\_\_\_

Business Phone # ( ) \_\_\_\_\_ Cell # \_\_\_\_\_

E-Mail Address (required) \_\_\_\_\_

Driver's License # / State \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Month Day Year

**Name of Person(s) who may call in for inspections or file jobs only**

NAME	DRIVER'S LICENSE NUMBER AND STATE

If more space is needed, please use the back of this application and provide the same  
information required above.

- ☐ Yes ☐ No – I acknowledge that I am responsible for maintaining a sales tax registration certificate from the LA Department of Revenue and Taxation and must have available upon request.
- ☐ Yes ☐ No – I acknowledge that I am responsible for maintaining a current occupational license, from the Jefferson Parish Sheriff's Office or the Parish of contractor's domicile, and must have available upon request.
- ☐ Yes ☐ No – I acknowledge that I am responsible for having liability and workman's comp insurance and must have available upon request.

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

\_\_\_\_\_  
**Date**

1/3/23