

City of New Roads – Residential | Commercial Building Permit Instructions

Permit & Inspection Department
211 West Main Street
New Roads, LA 70760

RESIDENTIAL PERMIT FEES WILL BE DETERMINED BY THE FOLLOWING

1. Total square footage of the structure.
2. Multiplied by \$82.00 or the current southern regional average cost to construct a house in a rural area as published by the National Home Builders Association, to determine the house value.
3. Multiplied by the average cost of construction permit fee of \$3.50.

Example: 2000 square foot home

2000 multiplied by \$82.00 = \$164,000.00 (cost of construction)

\$164,000.00 divided by 1000 (to calculate per thousand dollars) multiplied by \$3.50

$(\$164,000.00 \div 1000 = 164 \times \$3.50 = \$574.00)$ (permit fee)

4. Flood Plan Review Fee: \$45.00
5. Construction Plan Review Fee: \$75.00

COMMERCIAL PERMIT FEES WILL BE DETERMINED BY THE FOLLOWING

1. \$5.50 per thousand for first \$3 million
2. \$3.00 per thousand for next \$2 million
3. \$1.00 per thousand for anything exceeding \$5 million
4. Flood Plan Review Fee: \$45.00
5. Construction Plan Review Fee: \$125.00 - \$350.00

City of New Roads – Residential Building Permit Application

Permit & Inspection Department
211 West Main Street
New Roads, LA 70760

NOTICE TO CONTRACTORS

- Payments made by check or money order payable to the City of New Roads.
- All work must be readily accessible for inspection by the Building Official or authorized representative.
- This form does not allow deviations from permitting procedures, local ordinances, or adopted codes.

PROJECT INFORMATION (Please Print)

Owner of Property: _____ Phone No.: _____

Address of Proposed Site: _____

CONTRACTOR INFORMATION (Please Print)

Contractor: _____ Phone No.: _____

Address: _____ License No.: _____

Subdivision: _____

RESIDENTIAL PERMIT FEE SCHEDULE

Item	Unit	Amount
Square Feet _____	\$82.00 Sq. Ft.	\$ _____
Construction Cost _____	\$3.50 \$1000.00 of Construction Cost	\$ _____
Flood Plan Review Fee	\$45.00	\$ _____
Plan Review Fee	\$75.00	\$ _____
Total Permit Fee		\$ _____

CERTIFICATION

I, _____, certify that I am the authorized agent for the owner of the subject property. I have read and understand the above stipulations and agree to comply with all codes and regulations as set forth in the City of New Roads Code of Ordinances.

Authorized Signature: _____ Date: _____

City of New Roads – Electrical or Solar Panels Permit Application

Permit & Inspection Department
211 West Main Street
New Roads, LA 70760

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- This form does not allow deviations from permitting procedures, local ordinances, or adopted codes.

PROJECT INFORMATION (Please Print)

Owner of Property: _____ Phone No.: _____

Address of Proposed Site: _____

CONTRACTOR INFORMATION (Please Print)

Contractor: _____ Phone No.: _____

Address: _____ License No.: _____

PERMIT FEE SCHEDULE

Item	Permit Cost	Total Amount
0–1500 sq. ft.	\$180.00	\$ _____
1501–2500 sq. ft.	\$225.00	\$ _____
Over 2500 sq. ft.	\$280.00	\$ _____
Electrical Upgrade Outside	\$50.00	\$ _____
Reconnect Inspection Fee	\$25.00	\$ _____
Remodeling	\$75.00	\$ _____
Generator Installation	\$75.00	\$ _____
Solar Panels	\$75.00	\$ _____
Commercial 400-Amp Service	\$350.00 + \$25.00 per sub-panel	\$ _____
Total Permit Fee		\$ _____

CERTIFICATION

I, _____, certify that I am the authorized agent for the owner of the subject property. I have read and understand the above stipulations and agree to comply with all codes and regulations as set forth in the City of New Roads Code of Ordinances.

Authorized Signature: _____ Date: _____

City of New Roads – Mechanical Permit Application

Permit & Inspection Department
211 West Main Street
New Roads, LA 70760

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- This form does not allow deviations from permitting procedures, local ordinances, or adopted codes.

PROJECT INFORMATION (Please Print)

Owner of Property: _____ Phone No.: _____

Address of Proposed Site: _____

CONTRACTOR INFORMATION (Please Print)

Contractor: _____ Phone No.: _____

Address: _____ License No.: _____

RESIDENTIAL PERMIT FEE SCHEDULE (New | Renovation | Addition | Townhouse)

Item	Quantity	Permit Cost	Total Amount
Per Component		\$30.00 component	\$
Per Register		\$2.00 register	\$
Complete Change Out		\$100.00 each	\$
Existing Townhouse			
Per Component		\$30.00 component	\$
Total Permit Fee			\$

COMMERCIAL PERMIT FEE SCHEDULE (New | Renovation | Addition | Townhouse)

Item	Quantity	Permit Cost	Total Amount
Minimum		\$100.00	\$
Per Ton		\$10.00 ton	\$
Per Register		\$5.00 register	\$
Total Permit Fee			\$

CERTIFICATION

I, _____, certify that I am the authorized agent for the owner of the subject property. I have read and understand the above stipulations and agree to comply with all codes and regulations as set forth in the City of New Roads Code of Ordinances.

Authorized Signature: _____ Date: _____

City of New Roads – Plumbing Permit Application

Permit & Inspection Department
211 West Main Street
New Roads, LA 70760

NOTICE TO CONTRACTORS

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- All work must be readily accessible for inspection by the Building Official or authorized representative.
- This form does not allow deviations from permitting procedures, local ordinances, or adopted codes.

PROJECT INFORMATION (Please Print)

Owner of Property: _____ Phone No.: _____

Address of Proposed Site: _____

CONTRACTOR INFORMATION (Please Print)

Contractor: _____ Phone No.: _____

Address: _____ License No.: _____

PERMIT FEE SCHEDULE

Qty.	Item	Cost (Each)	Total		Qty.	Item	Cost (Each)	Total
	Bathtub	\$6.00	\$			Bidet	\$6.00	\$
	HW Heater	\$6.00	\$			Roof Drain	\$6.00	\$
	Lavatory	\$6.00	\$			Receptor	\$6.00	\$
	Shower Bathtub	\$6.00	\$			Sprinkler Heads ≤ 20	\$15.00	\$
	Kitchen Sink	\$6.00	\$			Sprinkler Heads 20-100	\$25.00	\$
	Water Closet	\$6.00	\$			Sprinkler Heads ≥ 100	\$50.00	\$
	Washing Machine	\$6.00	\$			Standpipes	\$25.00	\$
	A/C Drain	\$6.00	\$			Sewer Tie-In	\$6.00	\$
	Gas Outlet	\$6.00	\$			Urinal	\$6.00	\$
	Dishwasher	\$6.00	\$			Garbage Disposal	\$6.00	\$
	Floor Drain	\$6.00	\$			Drinking Fountain	\$6.00	\$
	Service Sink	\$6.00	\$			Minimum Permit	\$75.00	\$
						TOTAL PERMIT FEE		\$

CERTIFICATION

I, _____, certify that I am the authorized agent for the owner of the subject property. I have read and understand the above stipulations and agree to comply with all codes and regulations as set forth in the City of New Roads Code of Ordinances. Authorized Signature: _____ Date: _____

AIR BARRIER AND INSULATION INSPECTION

Project Address: _____

Insulation Installer - Company Name: _____
 Company Address: _____
 Company Phone #: _____

TABLE N1102.4.2 AIR BARRIER AND INSULATION INSPECTION

VERIFIED DATE	COMPONENT	CRITERIA
	Air barrier and thermal barrier	Exterior thermal envelope insulation for framed walls is installed in substantial contact and continuous alignment with building envelope air barrier. Breaks or joints in the air barrier are filled or repaired. Air-permeable insulation is not used as a sealing material.
	Ceiling/attic	Air barrier in any dropped ceiling/soffit is substantially aligned with insulation and any gaps are sealed. Attic access (except unvented attic), knee wall door, or drop down stair is sealed.
	Walls	Comers and headers are insulated. Junction of foundation and sill plate is sealed.
	Windows and doors	Space between window/door jambs and framing is sealed.
	Rim joists	Rim joists are insulated and include an air barrier.
	Floors (including above garage and cantilevered floors)	Insulation is installed to maintain permanent contact with underside of subfloor decking. Air barrier is installed at any exposed edge of floor.
	Crawlspace walls	Insulation is permanently attached to walls. Exposed earth in unvented crawlspaces is covered with Class I vapor retarder with overlapping joints taped.
	Shafts, penetrations	Duct shafts, utility penetrations, knee walls and flue shafts opening to exterior or unconditioned space are sealed.
	Narrow cavities	Batts in narrow cavities are cut to fit, or narrow cavities are filled by sprayed/blown insulation.
	Garage separation	Air sealing is provided between the garage and conditioned spaces.
	Recessed lighting	Recessed light fixtures are airtight, IC rated and sealed to drywall. Exception-fixtures in conditioned space.
	Plumbing and wiring	Insulation is placed between outside and pipes. Batt insulation is cut to fit around wiring and plumbing, or sprayed/blown insulation extends behind piping and wiring.
	Shower/tub on exterior wall	Showers and tubs on exterior walls have insulation and an air barrier separating them from the exterior wall.
	Electrical/phone box on exterior wall	Air barrier extends behind boxes or air sealed type boxes are installed.
	Common wall	Air barrier is installed in common wall between dwelling units.
	HVAC register boots	HVAC register boots that penetrate building envelope are sealed to subfloor or drywall.
	Fireplace	Fireplace walls include an air barrier.

Signature of Approved Party Verification of the above Chart: _____

Date: _____

NOTE:

Signature acknowledges that he/she is an Independent Party other than the installer of the insulation company and assumes responsibility for its contents.

City of New Roads
Permit and Inspection Department
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New Roads, LA 70760

BLOWER DOOR TEST SHEET

HOUSE INFORMATION:

Permit # _____
Owner Name: _____
House Address: _____
City, State, Zip: _____
Superintendent: _____
Phone: _____
Email: _____

INSPECTOR INFORMATION:

Inspector: _____
Certifying Body: _____
Certification Number: _____
Expiration Date: _____

HOUSE TAKE-OFFS:

Conditioned Floor Area: _____ Conditioned House Volume: _____
Calculate house volume: Interior Floor Area x Ceiling Height = Total House Volume

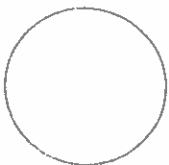
BLOWER DOOR TESTS:

Equipment: Minneapolis BD3 + DB-700 Manometer

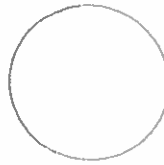
Calculate ACH₅₀: $\frac{CFM_{50} \times 60}{\text{House Volume}}$

DATE	RING	CFM ₅₀	ACH ₅₀
	<input type="checkbox"/> Open		
	<input type="checkbox"/> A		
	<input type="checkbox"/> B		

Blower Door Test (BDT) threshold: $\leq 7ACH_{50}$



PASS



FAIL

DATE: _____

SIGNATURE: _____ PRINTED NAME: _____

COMMENTS:

Total Duct Leakage Verification Form

Address: _____ _____ _____	Date: _____
Permit #: _____	

HVAC Installing Company _____

Address: _____ Phone # _____

Duct Tightness Testing Completed By: _____

Certification Number _____ National Certifying Body _____

Note: If all of the ductwork and air handler are in the conditioned space this test is not required.

Total Duct Leakage is accomplished by the use of a Duct Leakage Tester alone and makes no representation to Leakage to Outdoors.

Types of testing and Total Duct Leakage Test limits as described in IECC 2009 and adopted by the State of Louisiana.

- **RIWO Rough in With-Out** air handler installed is ≤ 4 CFM per 100 ft² CFA
- **RIW Rough in With** air handler installed is ≤ 6 CFM per 100 ft² CFA
- **PCW Post Construction With** air handler installed is ≤ 12 CFM per 100 ft² CFA

System Name	CFA	Type of test performed	CFM per 100 ft ² CFA	Pass/Fail

NOTE: This certificate shall be submitted to the Building Official/Code Official for approval and a copy made available to the homeowner for their records.