



IBERIA PARISH GOVERNMENT  
300 IBERIA STREET, SUITE 400  
NEW IBERIA, LA 70560-4587  
TELEPHONE#: (337)365-8246  
www.iberiaparishgovernment.com

M. Larry Richard  
Iberia Parish President

***STEPS TO FOLLOW WHEN APPLYING FOR A PARISH OCCUPATIONAL LICENSE:***

1. Occupational license applications can be obtained at the Iberia Parish Courthouse; 300 Iberia Street; Suite 400; New Iberia, LA. or at [www.iberiaparishgovernment.com](http://www.iberiaparishgovernment.com).
2. Applicant must complete form in its entirety.
3. If a “new” business is opened between January 1<sup>st</sup> and June 30<sup>th</sup>, a fee of \$50.00 is payable before application is processed. After June 30<sup>th</sup>, a fee of \$25.00 is payable before application is processed. Please make sure all inspections are completed and form is signed by applicable persons.
4. In all instances, planning and zoning approval must be obtained before license can be processed. Please contact Planning and Zoning Department at 369-4438.
5. When handling food please follow these steps:
  - a. Contact the Sanitation Dept. at 337-492-5440 for inspection, it is located at 715 Weldon Street – A, New Iberia, LA 70560
  - b. Contact Fire Marshall’s Office at 1-800-256-5452 or 337-886-1273 to approve and inspect building.
6. Please contact our office if you have a change of address or telephone number.
7. License forms must be renewed on an annual basis. Deadline for renewal is March 1<sup>st</sup> of year. If renewed after March 1<sup>st</sup>, interest and penalties will be charged.

**IBERIA PARISH GOVERNMENT**  
**APPLICATION FOR OCCUPATIONAL LICENSE**  
(Please print clearly)

MAIL TO:  
IBERIA PARISH GOVERNMENT  
COURTHOUSE BUILDING SUITE 400  
300 IBERIA STREET  
NEW IBERIA, LOUISIANA 70560-4587  
PHONE 337-365-8246 FAX 337-369-4490

1. Name under which business is to be conducted:  
\_\_\_\_\_ Business Phone No. \_\_\_\_\_
2. Owner \_\_\_\_\_ Home Phone No. \_\_\_\_\_
3. Location of Business \_\_\_\_\_  
STREET AND NUMBER                      CITY                      STATE                      ZIP CODE                      PARISH
4. Mailing Address \_\_\_\_\_  
STREET AND NUMBER                      CITY                      STATE                      ZIP CODE                      PARISH
5. Nature of business \_\_\_\_\_  
Ex. Grocery store, dry goods, hardware, department store, mfg., wholesale, hotel, contractor, construction
6. Type of Ownership \_\_\_\_\_ Individual Proprietor    \_\_\_\_\_ Partnership    \_\_\_\_\_ Corporation
7. Names of all partners or principal officers if a corporation: \_\_\_\_\_  
\_\_\_\_\_
8. How many places of business of you operate within the Parish of Iberia? \_\_\_\_\_
9. Date started, or Date business opened? \_\_\_\_\_
10. If business has changed ownership, what is the name of the former owner? \_\_\_\_\_  
Former Trade Name \_\_\_\_\_

**I AGREE TO ABIDE BY THE LIMITATIONS OF THE APPROPRIATE DEPARTMENTS LISTED BELOW. I UNDERSTAND THAT APPROVAL IS CONTINGENT UPON COMPLIANCE WITH THE APPROPRIATE REGULATIONS FOR MY TYPE OF BUSINESS. FAILURE TO COMPLY MAY RESULT IN PENALTIES.**

**SIGN HERE \_\_\_\_\_ TITLE \_\_\_\_\_**

**FOR OFFICE USE ONLY:**

**ACCOUNT NUMBER \_\_\_\_\_ TYPE OF BUSINESS CODE \_\_\_\_\_ DATE BUSINESS BEGAN \_\_\_\_\_**

**CLERK \_\_\_\_\_**