

# Request for FP&C Louisiana Building Code for State Owned Buildings and FP&C Roofing Review

Project Number: \_\_\_\_\_ Agency Name: \_\_\_\_\_  
Project Name: \_\_\_\_\_ Agency Address: \_\_\_\_\_  
Project Location: \_\_\_\_\_  
Site Code: \_\_\_\_\_ Agency Contact: \_\_\_\_\_  
Building ID: \_\_\_\_\_ Email: \_\_\_\_\_

## To be completed by the Agency

The following information is attached and the Agency requests that FP&C submit the subject project for review for the Louisiana Building Code for State owned buildings and FP&C Roofing review (as applicable).

**CHECK BOX AS APPLICABLE (THE FOLLOWING REQUIRE ATTACHMENTS):**

☐ Final Construction Documents (Plans and Specifications) (Digital submittal is **Required**)

**COMPLETE THE FORM BELOW:**

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Campus: \_\_\_\_\_

City: \_\_\_\_\_ State: LA Zip: \_\_\_\_\_

Construction Documents Date of Issuance: \_\_\_\_\_

Construction Area (Square Feet): \_\_\_\_\_ Total Valuation: \$ \_\_\_\_\_ ☐ New ☐ Remodel ☐ Addition

Agency Point of Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

**Architect/Engineer of Record Contact Information:**

Architect/Engineer of Record: \_\_\_\_\_

Registration/License No: \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Agency: \_\_\_\_\_  
(Agency Signature\*)

Date: \_\_\_\_\_

**\*Agency Signature certifies that all provisions of the CEA have been met.**

\_\_\_\_\_  
(Type or Print Name)

## To be completed by FP&C and returned to the Agency

☐ FP&C concurs

☐ FP&C does not concur

Reason: \_\_\_\_\_

(Agency must resolve and then submit another Request for FP&C Louisiana Building Code for State Owned Buildings Review)

☐ FP&C concurs, with exceptions (see attachment)

FPC Project Manager: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Remit to: **FPC-CEA @la.gov**

7/16/2025