



City of New Orleans Healthy Homes Program

Online Application Guide

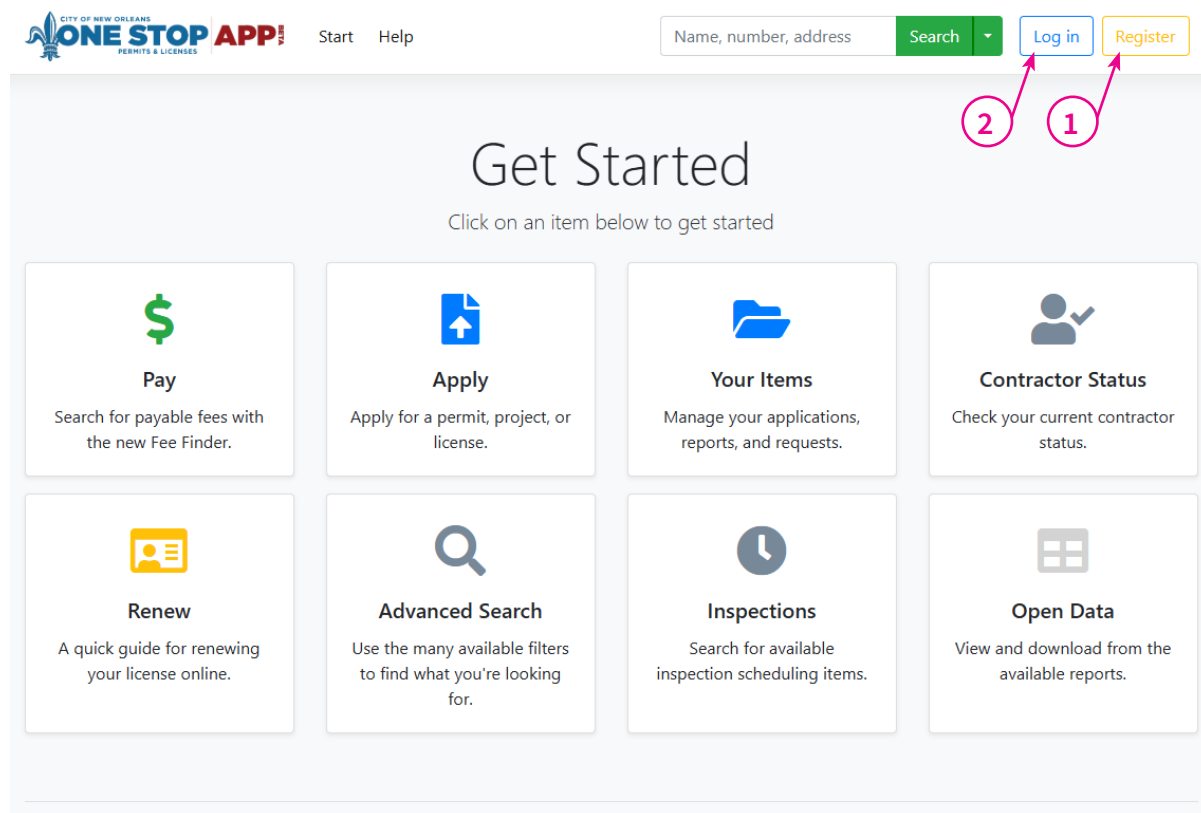
This is a guide to the online application, showing all of the information you need to fill out a Healthy Homes Certificate of Compliance application on OneStop. To begin, log on to onestopapp.nola.gov (or scan the QR code).

For more information, visit <https://nola.gov/next/healthy-homes/>.



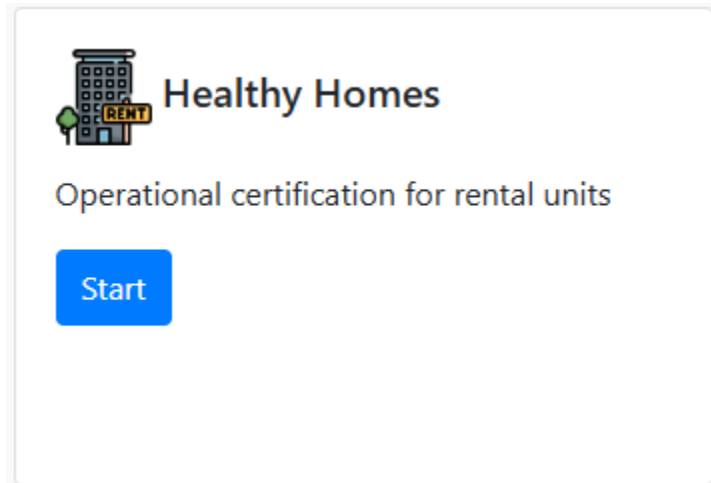
Before you begin...

Before you begin, you must register for a OneStop account. To register, click the yellow “Register” button at the top right hand of the screen (see arrow 1, below). You must create a user name and password. Be sure to write it down so you can remember it later. The email address you register with must be an active email that you check regularly in case City staff contact you for additional information. If you already have a OneStop account, select “Log In” (arrow 2, below).



Once you have registered and logged in, click “Apply” to begin your Healthy Homes application.

Navigate to “Healthy Homes,” and click on the blue “Start” button.



Applicant Details

If you have completed the registration, your applicant information will appear in the gray boxes. This is the information for the applicant, and is the primary point of contact for the application. The person who applies is responsible for replying to requests by City staff for more information. Please be sure to list an active email address and phone number.

Applicant Details

If the information in this section needs updating, please visit the [account management page](#) and save any updated information.

Applicant Details

Full Name

Email

Phone Number

Mailing Address

Address

Address 2

City

State

Zip Code

Address

This is the address of the property that you will be registering. It should be the same address as the lot of record where you are registering your property. If you are registering units on separate lots of record, you will need to start a separate application for each separate lot of record.

Address

Indicate the main address or common address for the property if multiple units are at the location. *

123 Main St

Enter Location

This address locator tool uses the City of New Orleans Master Address Database to identify your project location. The locator may be unable to find your address if you entered the address incorrectly in the address locator. If you are having difficulty, try searching for “Saint” instead of “St.” or “Ave” instead of “Avenue.”

Description

Provide a brief description of the rental property here, i.e. “owner-occupied shotgun double,” “120 apartments in a mixed-use building,” etc.

Description

Type a description for this license here.

Description *

Initial Question - Healthy Homes

Indicate if the property is owned by a corporation or LLC.

Initial Questions - Healthy Homes

Is this owned by a corporation or LLC? *

Yes

No

Save and Continue

When you have completed the initial steps for this application, select the blue “Continue” button. This will create your Draft application and save it to your account. You will receive a “reference code” viewable on the next page. At this point the application is still incomplete and more information is needed.

Save and Continue

Continue

Location - Business

This is an optional field. You do not need to fill it out, unless you have an occupational license associated with this rental property. It is OK to leave blank.

Location - Business	
City Occupational License Number	City of New Orleans business license number

Healthy Homes - Owner

If you indicate that the owner is an LLC, provide the name of a natural person associated with the ownership of the property.

Healthy Homes - LLC/Corp
Agent for Service of Process Name *

Healthy Homes - Owner

This is information for the Property Owner that will appear on the Certificate of Compliance. The Owner Address must be a physical address, not a PO Box.

Healthy Homes - Owner

Property Owner Name *

Owner Address *

Owner City *

Owner State *

Owner Zip *

Owner Email Address *

Owner Phone *

Healthy Homes - Operator

This is information for the Property Manager or other person that is responsible for responding to requests for repairs. This person will appear on the Certificate of Compliance. The Operator Address must be a physical address, not a PO Box.

Healthy Homes - Operator

Operator Name *

Operators may be property managers or other persons that the lessee should contact to request repairs or to raise issues regarding the condition of the rental housing unit

Operator Address *

Operator City *

Operator State *

Operator Zip *

Operator Email *

Operator Phone *

Healthy Homes - Dwelling Units

Fill out the following boxes. For “Dwelling Units,” indicate the TOTAL number of dwelling units, both rental and non-rental units, located on the property.

For “Rental Units,” indicate the number of rental units ONLY. Rental units are units that are currently rented OR advertised as “For Rent” OR are anticipated to be rented within 365 days of the application. Rental units include all short-term rental units.

For “Total Number of Buildings” indicate how many individual structures are on this lot of record that you are registering.

Healthy Homes - Dwelling Units	
Total Number of Dwelling Units *	Indicate the total number of dwelling units, both rental and non-rental units, located on the property.
Total Number of Rental Units *	Indicate the total number of rental units on the property.
Total Number of Buildings *	Indicate the total number of buildings containing dwelling units on the property.

Healthy Homes - Rental Units

Please fill out information for **each individual dwelling unit** — both rental and non-rental.

For “Main Address” enter the root street address as applied to the unit (i.e. 123 Main St).

For “Unit Number,” enter the individual unit number if applicable (i.e. Apt 1A).

For “Is Rental Y/N” indicate whether the dwelling unit is a current rental unit. Rental units are units that are currently rented OR advertised as “For Rent” OR are anticipated to be rented within 365 days of the application. Rental units include all short-term rental units.

“Building Number” applies for multi-building properties; if there is only one building, please mark “1” in this space.

For “Floor” please list the level of entry for the unit.

Complete this section for each unit on the subject property. To add an additional unit, please select the green “Add Item” button. To delete an entry, select the “Delete” button.

For properties with more than 12 dwelling units, download, fill out, and upload the Excel list provided under “optional submittal.”

Healthy Homes - Rental Units

Main Address *	Unit Number *	Is Rental (Y/N) *
Bedrooms *	Building Number *	Floor *

Delete

Main Address *	Unit Number *	Is Rental (Y/N) *
Bedrooms *	Building Number *	Floor *

Delete

Add Item

Document Submittals

All properties registered must submit an **Attestation of Inspection** and a **Site Plan** showing the location of all dwellings. See next pages for those documents. Once completed, scan and upload them to the application under “Choose File.”

For properties with more than 12 units, download, complete, and upload the listing of all dwelling units on the property. If you would like to submit any additional documents, you may do so as well.

Document Submittals

Submit one or more document(s) relevant to the current application. Common documents include site plan/diagram, architectural drawing, elevation certificate, proof of insurance, and contract/quote for work.

Accepted file formats: pdf, jpg, png, tiff, txt, Microsoft Office. Maximum file size is 25MB

Applications will not be processed until all required documents have been submitted.

Upload the Attestation of Inspection. **Required**

Sign and upload this [Attestation of Inspection](#) affirming that all rental units on the property have been inspected and found in compliance with [minimum rental standards](#).

Choose File No file chosen

Upload a Site Plan showing location of all dwellings. **Required**

The Site Plan must show the location of all rental units on the property.

Choose File No file chosen

Upload a listing of all dwellings on property.

Complete and upload this [rental unit spreadsheet](#) if you have more than 12 dwelling units on the property.

Choose File No file chosen

Submit General Document(s)

Submit relevant documents to the current application. Accepted file formats: pdf, jpg, png, tiff, txt, Microsoft Office.

Choose File No file chosen

Add

Existing Documents:

Attestation of Inspection

All owners of rental properties must conduct an inspection of their rental units to ensure it meets the minimum rental standards. The inspection is a self-inspection; there is no coordination with city inspectors. Once the inspection has been completed, fill out, sign, scan and upload the form.



Healthy Homes
Supplement HH-03
(Online Application Only) 

HEALTHY HOMES CERTIFICATE OF COMPLIANCE APPLICATION

ACKNOWLEDGEMENT OF MINIMUM RENTAL STANDARDS

1. Each rental housing unit has an operable fire and smoke detection system and alarm. ☐ Yes ☐ No
2. Each rental housing unit has an operable carbon monoxide detection alarm with a long-life sealed battery. ☐ Yes ☐ No
3. Each rental housing unit has one or more bathtubs or showers, lavatories, flush-type water closets or toilets, and kitchen sinks. All such plumbing fixtures are maintained in a sanitary and good working condition and are properly connected to the public sewer system or to an approved private system if the public system is not available. ☐ Yes ☐ No
4. All kitchen sinks, lavatories, bathtubs and showers are supplied with hot and cold running water and are operable. ☐ Yes ☐ No
5. Water heating facilities are in good working condition, and capable of providing an adequate amount of water to be drawn at every required sink, lavatory, bathtub, and shower at a minimum temperature of 110 degrees Fahrenheit. ☐ Yes ☐ No
6. Each rental housing unit has heating facilities in good working order that can safely maintain a minimum room temperature of 68 degrees Fahrenheit in all habitable rooms, bathrooms, and toilet rooms. Cooking appliances cannot be used to provide space heating to meet the requirements of this section. ☐ Yes ☐ No
7. Each rental housing unit has a cooling system in good working order that can safely maintain a maximum temperature of 80 degrees Fahrenheit in all bedrooms, measured at a point three feet above the floor and two feet from exterior walls. ☐ Yes ☐ No
8. Each rental housing unit has a properly maintained electrical system, which is in a safe working condition and capable of performing its intended function. ☐ Yes ☐ No
9. If provided by the lessor, all mechanical appliances, operative fireplaces, solid-fuel-burning appliances and cooking appliances are properly installed and maintained in a safe working condition, and are capable of performing their intended functions. ☐ Yes ☐ No
10. Roofs, windows, and exterior doors are adequate to prevent dampness or deterioration in the walls or interior portions of the rental housing unit. No evidence of mold is present on the interior of the unit. The roof and flashing are sound, tight and free of defects that admit rain. ☐ Yes ☐ No
11. All interior surfaces are maintained free of significant cracking, decaying or other defective surface conditions. Holes in interior walls and floors are sealed as necessary. ☐ Yes ☐ No
12. Each rental housing unit and its exterior property is kept free from visible rodent harborage and infestation. ☐ Yes ☐ No

ATTESTATION

I state under penalty of perjury that the lessor or an agent for the lessor has conducted a reasonably recent inspection of the rental housing unit(s) on this application and found them to comply with the Minimum Rental Standards set forth in section 26-656 of the New Orleans Code of Ordinances.

I attest that the information on this application is true and correct to the best of my knowledge. I understand that the City of New Orleans is authorized to suspend or revoke a Certificate of Compliance issued under the provisions of its Municipal Code wherever a certificate is issued in error or on the basis of incorrect, inaccurate or any false statement or misrepresentation, or in violation of any ordinance or regulation or any of the provisions of the City of New Orleans Municipal Code, the Comprehensive Zoning Ordinance, the International Construction Code or International Fire Code as adopted by the City of New Orleans. Fines and penalties for misrepresentation of material facts will be assessed in accordance with City of New Orleans ordinances and State of Louisiana Revised Statutes.

I understand that any changes of ownership, including names, addresses, or information concerning the owner, applicant, or registered agent requires re-registration within 90 days.

I have read and understand the New Orleans Code of Ordinances Chapter 26 Article XIII Healthy Homes provisions, available on the City of New Orleans website (<https://nola.gov/next/healthy-homes/home>).

I attest that I have the authority of the current property owner(s) to apply for the this Certificate.

Applicant Signature _____

Applicant Name _____ Date _____



1340 POYDRAS ST, STE 800, NEW ORLEANS, LA 70112 • (504) 658-7100

Site Plan

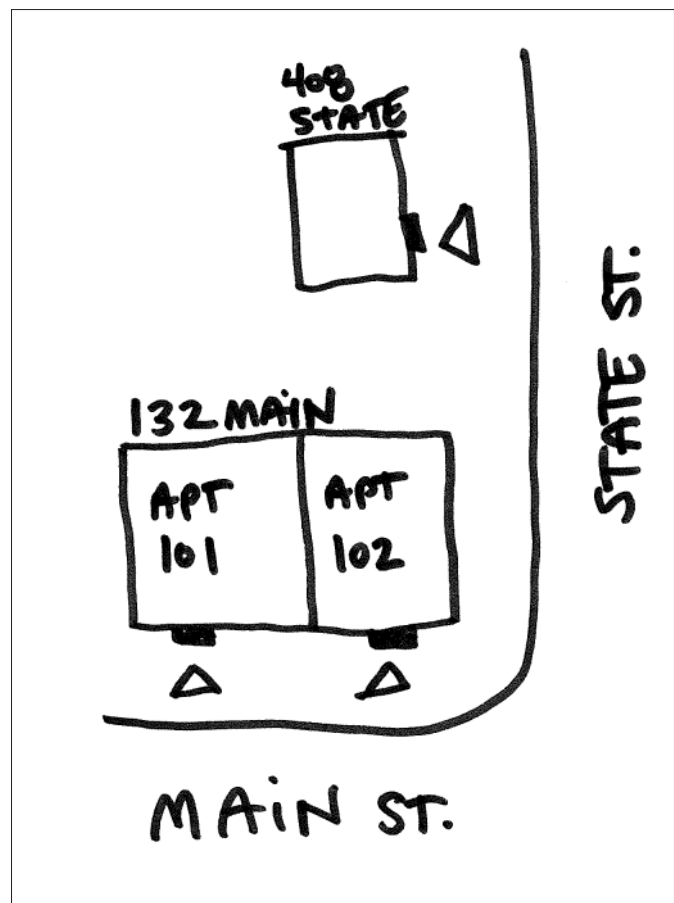
All rental properties registered with the City of New Orleans Healthy Homes program are required to include a site plan.

There are many acceptable forms of a site plan. Site plans are a picture of the property itself showing **the general footprint of the building(s), where each residence is located within the property, the entry for each unit, and the street on which the building is sited.**

Applicants can submit site plans that are hand-drawn or computer-generated. Some larger properties with multiple buildings are likely to have existing site plans drawn by architects. However, please note: **Healthy Home applications do not require professionally drawn site plans. Hand sketches are acceptable.**

Useful Tips:

- Drawings should be simple and straightforward. Images and text are to be clear and legible.
- **Be sure to label the units** within the building, **show the entry point** of each unit, **label each building** (if your rental property has multiple structures), and **provide the street name.**
- For properties with multiple floors, provide a site plan for each floor. For properties with repeating floors, a ground floor plan and “typical” floor plans are sufficient.
- **Screenshots are acceptable if they are labeled legibly.** Drawings printed from the assessor’s page alone are not sufficient — if they are submitted, they must be labeled.



Once the site plan has been completed, scan and upload the drawing to the application.

Review and Submit

Once all information has been entered, select the Blue “Submit” button at the bottom of the page. Your application will not be submitted if any of the required documents or information is missing.

Review and Submit

Submit

If your application is missing information, you will be directed to the top of the screen and a red banner will appear, listing missing information. You must complete the indicated fields before you can submit your application.

- Please correct the following items:
- **Property Owner Name** is required
 - **Owner Address** is required

Digital Attestation

If the application is complete, the following dialog box will appear, asking for your digital signature.

Healthy Homes Attestation

I certify that all information contained in this document, and any attachments hereto, is true and correct to the best of my knowledge. I understand that the City of New Orleans is authorized to suspend or revoke a permit or license issued under the provisions of its Municipal Code to comply with the minimum rental standards set forth in [section 26-656](#) of the New Orleans Code of Ordinances wherever a license is issued in error or on the basis of incorrect, inaccurate, or any false statement or misrepresentation, or in violation of any ordinance or regulation. I understand that failure to comply with any of these standards and/or conditions shall be adequate grounds for denial, refusal to renew, revocation, or suspension of my certificate of compliance. I also understand that it is my obligation to update these plans with the Department of Safety and Permits anytime any changes to the plans occur, and that failure to update the plans is not a defense against violation charges related thereto.

I state under penalty of perjury that the lessor or an agent for the lessor has conducted a reasonably recent inspection of the rental housing unit and found it to comply with the minimum rental standards set forth in section 26-656 of the New Orleans Code of Ordinances.

Print Name *

Email	Date & Time	Your IP Address
Patrick.Daurio@n	Monday, Decemb	10.8.80.164

Close

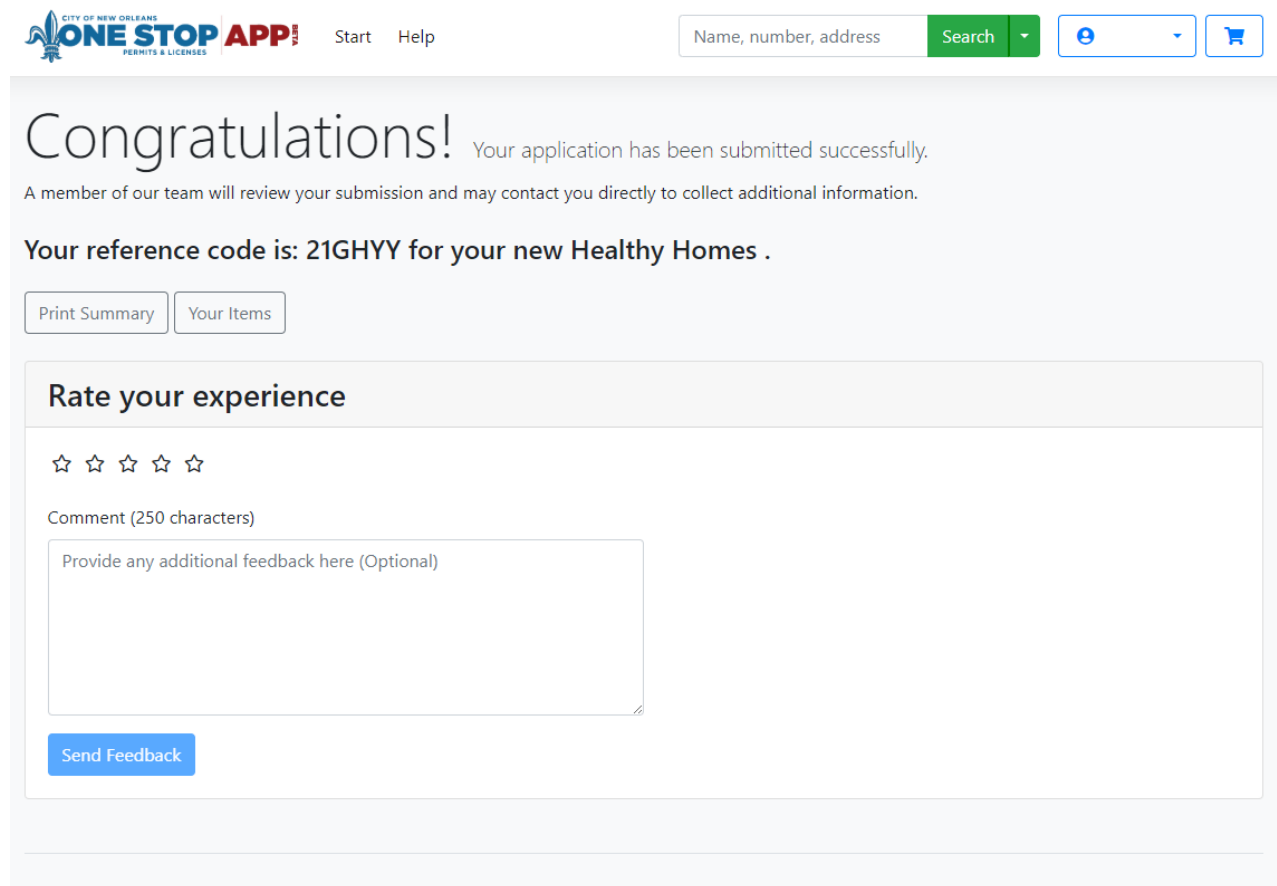
Submit

Print your name and select the Blue “Submit” button to complete your application.

Successful Submission

A successful application will show the following message. Congratulations! Your application has been submitted successfully.

You will be provided with a reference code to continue to track your application as it is processed. You will also receive an email from “noreply@nola.gov” stating your application has been submitted.



The screenshot shows the top navigation bar of the OneStop APP! website. It includes the City of New Orleans logo, the text 'ONE STOP APP! PERMITS & LICENSES', and links for 'Start' and 'Help'. A search bar with the placeholder 'Name, number, address' and a green 'Search' button is present, along with a user profile icon and a shopping cart icon. The main content area has a light gray background and features a large 'Congratulations!' heading. Below this, it states 'Your application has been submitted successfully.' and 'A member of our team will review your submission and may contact you directly to collect additional information.' The reference code '21GHYY' is displayed for 'Healthy Homes'. There are two buttons: 'Print Summary' and 'Your Items'. A section titled 'Rate your experience' contains a five-star rating system, a comment box with a 250-character limit, and a 'Send Feedback' button.

CITY OF NEW ORLEANS
ONE STOP APP!
PERMITS & LICENSES

Start Help

Name, number, address Search

Congratulations! Your application has been submitted successfully.
A member of our team will review your submission and may contact you directly to collect additional information.

Your reference code is: 21GHYY for your new Healthy Homes .

Print Summary Your Items

Rate your experience

☆ ☆ ☆ ☆ ☆

Comment (250 characters)

Provide any additional feedback here (Optional)

Send Feedback

A member of our team will review your application and may contact you directly to collect additional information or get clarification on your submission. Please be sure to check your email regularly while your application is being processed.

For additional information about the application process, please email healthyhomes@nola.gov or call (504) 658-7133.

If you are having specific issues with the OneStop application, please email onestopapp@nola.gov for troubleshooting tips.