



**Certificate of Occupancy**  
**Office of Zoning Administration**  
**CITY OF SHREVEPORT, LA**

DATE OF ISSUANCE: February 29, 2024

CERTIFICATE NO: 24-139-COC

*THIS CERTIFICATE IS ISSUED IN COMPLIANCE WITH THE PROVISIONS OF ALL ORDINANCES OF THE CITY OF SHREVEPORT PERTINENT THERETO.*

NAME OF BUSINESS: PROPRIUM SOLUTIONS SPECIALTY PHARMACY  
ADDRESS: 3710 YOUREE DR  
PHONE: (318)-422-9354  
TYPE OF BUSINESS: PHARMACY  
*(NOTE: MUST BE A USE LISTED IN THE ZONING ORDINANCE)*

PROPERTY ZONED: C-UC

CASE NO. IF APPLICABLE: 23-181-C

REMARKS:  
NOT A SEXUALLY ORIENTED BUSINESS

EXPIRES, IF APPLICABLE:

OTHER COMMENTS:

OWNER OF BUSINESS: DOUGLAS RIMMER

REGINALD P. JORDAN

ISSUING OFFICIAL (TYPED)

SIGNATURE OF ISSUING OFFICIAL

*THIS CERTIFICATE IS NOT AN OCCUPATIONAL LICENSE (PLACE IN A CONSPICUOUS PLACE)*

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**CITY OF SHREVEPORT, LA**  
**(KEEP FOR FUTURE REFERENCE)**

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IF YOUR BUSINESS CLOSED DURING THE YEAR PLEASE NOTIFY: CITY OF SHREVEPORT, REVENUE DIVISION, P.O. BOX 30002, SHREVEPORT, LA 71130

A NEW CERTIFICATE OF OCCUPANCY MUST BE OBTAINED FROM THE ZONING OFFICE; AND IF A "LIQUOR LICENSE" WAS ISSUED, PLEASE NOTIFY THE SHREVEPORT POLICE DEPARTMENT, ABO OFFICE, IF ANY OF THE FOLLOWING OCCUR:

1. CHANGE THE NAME OF THE BUSINESS
2. CHANGE OWNERSHIP
3. MOVE OR OPEN A NEW LOCATION
4. EXPAND SERVICES OR FACILITIES AT THE PRESENT LOCATION