FLOODPLAIN DEVELOPMENT PERMIT APPLICATION

FOR A WALLED AND ROOFED BUILDING

SECTION 1: GENERAL INFORMATION

| PERMIT #: | DATE: |
|--|--|
| Applicant: Address: | Telephone # |
| Property Owner: Address: | Telephone # |
| Location of Proposed Development: Legal description: | |
| Contractor: Address: | Telephone # |
| FLOODPLAIN DETERMINATION: | |
| Ground elevation(s) at the building site:_ | feet (msl) |
| Project location (check one only): Not located in the 100-y Floodplain (flood fringe Floodway (engineering | e, 100-year floodplain, A Zone, AE, AO, AH Zone) |
| Map information: FIRM Date: | |
| DEE D 1 C' | (msl) |
| Lowest floor must be elevated or floodar | roofed to: (msl) |

SECTION 2: BUILDING DEVELOPMENT

DESCRIPTION OF WORK:

(Check all that apply)

| Activity | Structure Type | |
|--|-------------------------|--|
| New Structure Re | esidential (1-4 Family) | |
| Addition Re | esidential (Multiple) | |
| Alteration M | anufactured Home | |
| Replacement C | ombined Use | |
| | on-Residential | |
| Remodel/Renovate | | |
| Other (explain): | | |
| Substantial Improvement? (50% or more of market value): \$ Existing market value of Structure? \$ Estimated Cost of project: (labor and materials) \$ ELEVATION OR FLOODPROOFING CERTIFICATION forms: FEMA form 81-31 ELEVATION CERTIFICATE; FEMA form 81-65 NON-RESIDENTIAL FLOODPROOFING CERTIFICATE Attach Certification(s) • Certificate signed by a registered professional engineer or registered land surveyor. • The certified as-built elevation of the lowest floor of the structure is feet (msl). • The certified as-built floodproofed elevation of the structure is feet (msl). | | |
| ADDITIONAL INFORMATION REQUIRED: Attach property description, building plans, blueprints, drawings, diagrams as available. | | |
| OTHER PERMITS NECESSARY??: Please list: | | |
| ACTION/APPROVAL: | | |
| The proposed development is in conformance with applicable floodplain standards. *PERMIT APPROVAL <u>IS CONDITIONED</u> ON RECEIVING AS-BUILT ELEVATION CERTIFICATIONS: | | |
| Signature (Local Administrator): | Date: | |
| | | |
| · - | | |
| Signature acknowledging Permit Compliance: | Date: | |
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