FLOOD DEVELOPMENT PERMIT APPLICATION
City of Findlay, Zoning Office
304 Municipal Building, 318 Dorney Plaza
Findlay, Ohio 45840, (419) 424-7108; Fax (419) 424-7120

THIS APPLICATION MUST BE COMPLETED! LACK OF INFORMATION OR DETAILS ON PLANS WILL RESULT IN THE APPLICATION NOT BEING PROCESSED.

THE FOLLOWING ITEMS WILL NEED TO BE INCLUDED WITH THE PERMIT APPLICATION:

INSTRUCTIONS: Submit two (2) site plans drawn to scale if applicable. A project altering lot grades shall provide existing and proposed grading plan showing cut and fill. New construction, alteration, or addition shall submit a complete itemized estimate pertaining to all construction, repair, or improvement. All elevations must be determined by NAVD’88. Submit a tax card or appraisal to validate substantial improvement or substantial damage values.

Please Print

Address of Construction (unless new residence):

Lot Number & Subdivision Name: Furnish copy of plat if lot is in irregular in shape. (Not rectangular.)

Owner: Contractor:

Address: Address:

City, State, Zip: City, State, Zip:

Phone: Phone:

Applicant (if not owner): Day Phone: Other:

Existing use of building or land: Vacant Residential Business Industrial Other

Please check all applicable:

Proposed Construction

| New home | grading |
| 1st floor addition | basement |
| 2nd floor addition | business |
| parking lot | industrial |
| demolition | pool |
| shed | garage |
| repair/rebuild | multi-family |
| elevation | misc. |

Proposed Permit Holder

| owner | residential |
| contractor | business |
| applicant | industrial |
| other |

Proposed Use

| slab | basement |
| crawl space | below grade |
| preferred method at grade |

Proposed Conditions

Existing conditions

| slab | basement |
| crawl |

I, the undersigned, do hereby certify that all of the above statements are true to the best of my knowledge, and understand that any deviation, change, or alteration not included or shown on these plans will nullify the approval. I further understand that the permit issued is valid for one (1) year.

Signature: Date:

12/12

Date Received:
For office use only!

Flood Zone __________ Base Flood Elevation (B.F.E.) ___________ Floodway? Yes/No

Building Value ______________ Value of construction ______________

Substantial Improvement? ___ Yes ___ No Substantial Damage? ___ Yes ___ No

Number of Engineered Vents Required For Principal Area: ______________

Garage Area: ______________

Cut/Fill Volumetric Calculation: Cut __________ Fill __________

Notes of Review:

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Granted Denied by: __________________________ Date __________

Conditions and/or comments:

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Fee $ ______________

Revised 12/01/2011