

PURPOSE OF A FLOODPLAIN PERMIT

Residents and commercial entities in Piqua receive discounted flood insurance rates by participating in the National Flood Insurance Program through FEMA. In order to continue to receive low rates, both construction and non-construction activity to take place within the 100-year floodplain must be reviewed by the City Planner via a floodplain permitting process. Please contact the Development Department to verify whether your site is in the 100-year floodplain before submitting a Floodplain Permit application.

SUBMITTAL REQUIREMENT CHECKLIST

<input type="checkbox"/> Application	<input type="checkbox"/> Site Plan	<input type="checkbox"/> \$50 Fee (Cash or Check)
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APPLICANT INFORMATION	<input type="checkbox"/> Primary Contact	<input type="checkbox"/> Billing Contact
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Company Name:

Contact Person First Last Name:

Mailing Address:

Phone Number:	Email:
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OWNER INFORMATION

First Last Name:

Mailing Address:

Phone Number:	Email:
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PROJECT LOCATION	Address Assignment Request	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Street Address:	Parcel ID Number:
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Zoning District:	Current Use:
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ACTIVE CODE COMPLIANCE CASE		
Is there an active code compliance case on this site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes: Is this application related to the code violation?	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A

Planning Commission, Board of Zoning Appeals, City Commission	
Is this application associated with any past or future action by a board or commission? Some examples – a variance, a Special Use Permit, a recent rezoning, etc. Please describe.	

HISTORICAL RESOURCE INFORMATION		
Does the project contain a designated historic resource or is it located within a designated historic district?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

PROJECT INFORMATION - Attach additional page(s) if necessary.	Estimated Project Cost:
Briefly describe the nature of the project:	
Start Date:	End Date:

ACKNOWLEDGMENT AND AUTHORIZATION	
The undersigned acknowledges that the information provided herein is accurate to the fullest extent of their knowledge.	
_____	_____
Applicant Name	Date
_____	_____
Applicant Signature	Title