

FLOOD DEVELOPMENT PERMIT APPLICATION

Village of Arlington, Ohio
Municipal Building, 204 N. Main Street, P.O. Box 699
Arlington, OH 45841, (419) 365-5253; Fax (419) 365-5440

**THIS APPLICATION MUST BE COMPLETE!
LACK OF INFORMATION OR DETAILS MAY RESULT IN THE DELAY OF PERMIT
PROCESSING.**

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

If you have flood insurance: Damage estimate from your insurance adjuster OR certified appraiser OR one itemized contractor repair estimate AND an appraisal performed within the last 2 years.

If you DO NOT have flood insurance: Damage estimate from a certified appraiser OR one itemized contractor repair estimate AND an appraisal performed within the last 2 years.

Please Print

Property Address: _____

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): _____ Daytime Phone: _____

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

Existing conditions: Slab Basement Crawl space

Please check all applicable:

<u>Proposed Construction</u>	<u>Permit Holder</u>	<u>Proposed Use</u>	<u>Proposed Conditions</u>
<input type="checkbox"/> new home	<input type="checkbox"/> owner	<input type="checkbox"/> residential	<input type="checkbox"/> slab
<input type="checkbox"/> 1 st floor addition	<input type="checkbox"/> contractor	<input type="checkbox"/> business	<input type="checkbox"/> basement
<input type="checkbox"/> 2 nd floor addition	<input type="checkbox"/> applicant	<input type="checkbox"/> industrial	<input type="checkbox"/> crawl space
<input type="checkbox"/> parking lot			
<input type="checkbox"/> demolition			<input type="checkbox"/> below grade
<input type="checkbox"/> shed			<input type="checkbox"/> at grade (preferred)
<input type="checkbox"/> repair			
<input type="checkbox"/> grading			
<input type="checkbox"/> basement			
<input type="checkbox"/> business			
<input type="checkbox"/> industrial			
<input type="checkbox"/> pool			
<input type="checkbox"/> garage			

Estimated construction value \$ _____ Building value \$ _____

Describe work to be performed: _____

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 alter the approval so granted. I further understand that the permit issued is valid for one (1) year.

Signature: _____ Date: _____

For office use only!

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

Addition above B.F.E.? Yes / No 2nd floor addition requires 1st floor above B.F.E. OK Not

Location of: Furnace Air Conditioning Water Heater Washer/Dryer OK Not

Engineer/Architect Certification of Design: _____

LOMA/LOMR Applicable: _____

<u>Water Damage Location</u>	<u>Duration (approximate length of time)</u>	<u>Approximate Depth</u>
<input type="checkbox"/> Basement	_____	_____
<input type="checkbox"/> Crawl space	_____	_____
<input type="checkbox"/> 1 st floor	_____	_____
<input type="checkbox"/> 2 nd floor	_____	_____
<input type="checkbox"/> Other _____	_____	_____

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Notes of Review:

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Granted Denied by: _____ Date _____

Conditions and/or comments: _____

Application #: _____

Revised 2/12