

CITY OF APALACHICOLA
FLOODPLAIN MANAGEMENT
Permit Application

DATE: _____

APPLICANT NAME: _____

ADDRESS: _____

CITY, STATE & ZIP CODE)

PHONE: _____

EMAIL: _____

ADDRESS OF JOB: _____

PARCEL I.D. _____

DESCRIPTION OF DEVELOPMENT (MUST INCLUDE SITE PLAN)

RESIDENTIAL: _____ COMMERCIAL: _____ NEW STRUCTURE: _____

SUBSTANTIAL IMPROVEMENT: _____

FLOOD ZONE INFORMATION:

PANEL NO: _____ FIRM ZONE: _____ BFE: _____

GRADE ELEVATION: _____

ELEVATION OF LOWEST HORIZONTAL SUPPORTING MEMBER OF STRUCTURE: _____

AND/OR TOP OF THE BOTTOM FLOOR: _____ (PER PLANS)

SQUARE FEET OF ENCLOSURE BELOW BFE: _____ (PER PLANS)

*NOTE: IF ADDITIONAL INFORMATION REQUESTED, APPLICANT HAS 30 DAYS FROM DATE OF REQUEST TO REPLY OR A NEW FILL PERMIT APPLICATION & FEES WILL APPLY.

FLOOD ZONE DISCLOSURE NOTICE

I/We _____, have been made aware by the City of Apalachicola Building Department that my/our property is located in a 100 year flood zone based on FEMA Maps dated February 5, 2014. My/our property may be affected by the changes to the FIRM Maps, which took effect in 2014. My/our property may be adversely affected by these changes and could result in higher Base Flood Elevation Requirements and/or higher insurance premiums.

STREET ADDRESS: _____

PARCEL I.D.: _____

EFFECTIVE FLOOD ZONE: _____

PRELIMINARY FLOOD ZONE: _____

Attach information sheet for this parcel which indicates both the effective and preliminary flood zones for this parcel.

Owner Signature Date

Materials used for enclosure below BFE:

Solid wall/Breakaway wall _____, Flow through Vents _____(sf of vent openings_____),

Screen wire, Lattice or Louvers_____.

Type of foundation: _____
(Pile support, Concrete block stem wall, other)

**See City of Apalachicola Land Development Code Ordinance 2013-02 for complete regulations*

OWNER/APPLICANT STATEMENT

I hereby certify, affirm, and swear that I am the owner or the authorized agent for the owner of the property for which this permit is requested. The information provided herein is true and correct to the best of my knowledge. I release the City of Apalachicola from all responsibility for damages incurred as a result of the permitted activity.

Signature of Applicant Date

Application meets all requirements for the flood zone designation _____

Floodplain Administrator Date

(email to: towens@cityofapalachicola.com or drop off in City drop box)

CITY OF APALACHICOLA
FLOODPLAIN MANAGEMENT
Inspection Report

Foundation meets the requirement for the flood zone designation: _____

Under construction elevation certificate has been submitted and meets elevation standards for flood zone: _____

Enclosures below the BFE are designed/constructed as required by the flood plain management ordinance: _____

Final elevation certificate has been submitted and all aspects of the structure meet designated flood zone requirements: _____

All mechanical/AC equipment meet the required elevation for the designated BFE:

Final inspection on structure meets all requirements designated in the City of Apalachicola Floodplain Management ordinance 2013-02: _____

Floodplain Administrator

Date