

**WICHITA COUNTY TEXAS
FLOOD PLAIN MANAGEMENT
DEVELOPMENT PERMIT APPLICATION FORM**

Section 1: General Provisions

1. No work of any kind may start until a permit is issued.
2. The permit may be revoked, all work must cease until permit is re-issued.
3. If revoked, all work must cease until permit is re-issued.
4. Development shall not be used or occupied until a Certificate of Compliance is issued.
5. The permit will expire if no work is commenced within six months of issuance.
6. Applicant is hereby informed that other permits may be required to fulfill local, state and federal regulatory requirements.
7. Applicant hereby gives consent to the Local Administrator or his/her representative to make reasonable inspections required to verify compliance.
8. Applicant is the person who is the owner and/or has legal authority to act on behalf of on or more of the owners.
9. ***THE APPLICANT HEREBY CERTIFIES THAT ALL STATEMENTS HEREIN AND IN ATTACHMENTS TO THIS APPLICATION ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND ACCURATE.***

APPLICANT'S SIGNATURE: _____ DATE: _____

Section 2: Proposed Development (To be completed by APPLICANT)

APPLICANT'S NAME:

ADDRESS: _____

TELEPHONE: _____

BUILDER'S NAME:

ADDRESS: _____

TELEPHONE: _____

ENGINEER'S NAME:

ADDRESS: _____

TELEPHONE: _____

PROJECT LOCATION: _____

To avoid delay in processing the application, please provide enough information to easily identify the project location. Provide the street address, lot number or legal description (attach) and the distance to the nearest intersecting road. A sketch attached to this application showing the project location would be helpful:

Description: _____

A. STRUCTURAL DEVELOPMENT

<u>Activity</u>		<u>Structure Type</u>	
<input type="checkbox"/>	New Structure	<input type="checkbox"/>	Residential (<i>1-4 Family</i>)
<input type="checkbox"/>	Addition	<input type="checkbox"/>	Residential (<i>More than 4 Family</i>)
<input type="checkbox"/>	Alteration	<input type="checkbox"/>	Non-residential Flood proofing? Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/>	Relocation	<input type="checkbox"/>	Combined use (<i>Residential & Commercial</i>)
<input type="checkbox"/>	Demolition	<input type="checkbox"/>	Manufactured/Mobile Home In Manufactured Home Park? Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/>	Replacements	<input type="checkbox"/>	Other: _____

ESTIMATED COST OF PROJECT \$ _____

B. OTHER DEVELOPMENT ACTIVITIES:

<input type="checkbox"/> Clearing	<input type="checkbox"/> Fill	<input type="checkbox"/> Mining	<input type="checkbox"/> Drilling	<input type="checkbox"/> Grading
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<input type="checkbox"/>	Excavation (<i>Except for Structural Developed Checked Above</i>)
<input type="checkbox"/>	Watercourse Alteration (<i>Including Dredging and Channel Modifications</i>)
<input type="checkbox"/>	Drainage Improvements (<i>Including Culvert Work</i>)
<input type="checkbox"/>	Road, Street or Bridge Construction
<input type="checkbox"/>	Subdivision (<i>New or Expansion</i>)
<input type="checkbox"/>	Individual Water or Sewer System
<input type="checkbox"/>	Other: (<i>Please Specify</i>) _____

AFTER completing SECTION 2,
 APPLICANT should submit form to the Local Administrator for review.

SECTION 3: Floodplain Determination (To be completed by Local Administrator)

The proposed development is located on FIRM Panel No. _____ Dated: _____

The Proposed Development:

<input type="checkbox"/>	Is NOT located in a Special Flood Hazard Area. (Notify the applicant that the application review is complete and NO FLOODPLAIN DEVELOPMENT PERMIT IS REQUIRED.)
<input type="checkbox"/>	Is NOT located in a flood hazard area and is exempted from permitting.
<input type="checkbox"/>	Is partially located in the Special Flood Hazard Area, but building/development is not.
<input type="checkbox"/>	Is located in a Special Flood Hazard Area FIRM zone designation is _____.
<input type="checkbox"/>	FIRM zone designation is _____.
<input type="checkbox"/>	“100-Year” flood elevation at the site is: _____ ft. NGVE (MSL)
<input type="checkbox"/>	Unavailable
<input type="checkbox"/>	Is located in the floodway.
	FBFM Panel No. _____ Dated: _____

If different from the FIRM panel and date, See SECTION 4 for Additional Instructions.

SIGNED: _____ **DATE:** _____

SECTION 4: Additional Information Required (To be completed by Local Administrator)

The APPLICANT must submit the documents checked below before the application can be processed:

<input type="checkbox"/>	A site plan showing the location of all existing structures, water bodies, adjacent roads, lot dimensions, and proposed development.
<input type="checkbox"/>	Development plans, drawn to scale, and specifications; include where applicable: details for anchoring structures, proposed elevation of lowest floor (including basement), types of water-resistant materials used below the first floor, details of flood proofing of utilities located below the first floor, and details of enclosures below the first floor.

Also:

<input type="checkbox"/>	Subdivision or other development plans. (If the subdivision or other development exceeds 50 lots or 5 acres, whichever is the lesser, the applicant must provide “100-Year” flood elevations if they are not otherwise available.)
<input type="checkbox"/>	Plans showing the extent of watercourse relocation and/or landform alterations.
<input type="checkbox"/>	Change in water elevation (in feet) meets ordinance limits on elevation increases: Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/>	Top of new compacted fill elevation _____ ft. NGVD (MSL).
<input type="checkbox"/>	Flood proofing protection level (non-residential only) _____ ft. NGVD (MSL). For flood proofed structures, applicant must attach certification from registered engineer or architect.
<input type="checkbox"/>	Certification from a registered engineer that the proposed activity in a regulatory floodway will not result in any increase in the height of the “100-Year” flood. A copy of all data and hydraulic/hydrologic calculations supporting this finding must also be submitted.
<input type="checkbox"/>	Other: _____

SECTION 5: Permit Determination (To be completed by Local Administrator)

I have determined that the proposed activity: A. IS B. IS NOT

In conformance with provision of Court Order# 21.0802.601 , 2 August 2021. The permit is issued subject to the conditions attached to and made part of this permit. This permit is valid for _____ from the date of issue.

SIGNED _____ DATE: _____

If Box **A** is checked, the Local Administrator may issue a Development Permit upon payment of designated fee.

If Box **B** is checked, the Local Administrator will provide written summary of deficiencies. APPLICANT may revise and resubmit an application to the Local Administrator or may request a hearing from Board of Appeals.

APPEALS: Appealed to Board of Appeals? YES NO

Hearing Date: _____

Appeals Board Decision – Approved? YES NO

Reasons/Conditions: _____

SECTION 6: As-Built Elevations (To be submitted by APPLICANT before Certifications of Compliance is issued)

The following information must be provided for structures that are part of this application. This section must be completed by a registered professional engineer or licensed land surveyor (or attach a certification to this application). Complete 1 and 2 below:

1. Actual (As-Built) Elevation of the top of the lowest floor, including basement is: _____ft. NGVD (MSL).
2. Actual (As-Built) Elevation of flood proofing protection is _____ft. NGVD (MSL).

SECTION 7: Compliance Action (To be completed by Local Administrator)

The Local Administrator will complete this section as applicable based on inspection of the project to ensure compliance with the community's local law for flood damage prevention.

INSPECTIONS:

DATE: _____	BY: _____	DEFICIENCIES? YES <input type="checkbox"/>	NO <input type="checkbox"/>
DATE: _____	BY: _____	DEFICIENCIES? YES <input type="checkbox"/>	NO <input type="checkbox"/>
DATE: _____	BY: _____	DEFICIENCIES? YES <input type="checkbox"/>	NO <input type="checkbox"/>

SECTION 8: Certificate of Compliance (To be completed by Certified Engineer or Architect)

Certificate of Compliance Issued: DATE: _____ BY: _____