# FLOODPLAIN PERMIT
## APPLICATION

**TOWN OF MONROE**
**PLANNING & ZONING DEPARTMENT**
**7 Fan Hill Road, Monroe, CT 06468**
**Tel. (203) 452-2812**

***FOR OFFICE USE:***

**FP –** _____

**Permit Fee: $110.00** ($50 Town / $60 State)
*Payable to "Town of Monroe"* *

**Date Paid –** _____

***Include driver's license number and telephone number on fees paid with a personal check***

**Property Address**: _____ **Assessor Map #** _____, **Lot #** _____

**Applicant**: _____ **Email** _____ **Phone** _____

**Mailing Address**: _____

**Property Owner**: _____ **Email** _____ **Phone** _____

**Mailing Address**: _____

**Engineer/Architect**: _____ **Email** _____ **Phone** _____

**Mailing Address**: _____

**Elevations** (in feet NAVD 1988): ■ Floodplain _____ ■ Lowest Floor/Basement _____ ■ Floodproofing _____

**Flood Elevation Source:** FEMA Report _____ or by other _____

**Are any walls proposed to enclose space below base flood elevation?** □ **NO** □ **YES**

### Required Attachments

- Project Narrative detailing proposed development, including any proposed alteration or relocation of a watercourse.
- Attach list and status of other required Federal, State and local permits and approvals needed to implement the project.
- Two (2) bound sets of scaled plans not exceeding a sheet size of 24"x36" addressing the items in Zoning §6.6.3, including the following:
  - A2/T2 Survey of existing site conditions and building improvements; 2-foot contours; mapped floodplain and elevation data.
  - Proposed Site Plan/Grading Plan showing existing and proposed site and building alteration and development.
  - Proposed Flood Hazard Reduction Plan detailing the measures proposed to meet the criteria set forth in Zoning §6.6.4.

### Applicant /Owner Certification

The undersign hereby certify that this application is made as or on behalf of with the full authority of the owner(s) of the premises and all are aware of and understand the Monroe Zoning Regulations pertinent to the application, and affirm the statements and information provided as being accurate and true. Falsification, by misrepresentation or omission, or failure to comply with any conditions of permit approval, shall constitute a violation of the Monroe Zoning Regulations, subject to approval revocation or suspension. Further, the undersign hereby authorizes the Town of Monroe and its agents to access the premises during normal and reasonable business hours for the purpose of verification, inspection and enforcement of the Zoning Regulations as may be applicable to the application.

| _____ | _____ | _____ |
|---|---|---|
| *Print Owner Name* | *Owner Signature (required if not applicant)* | *Date* |
| _____ | _____ | _____ |
| *Print Applicant Name* | *Applicant Signature* | *Date* |

□ **Approved** □ **Approved with Conditions (see attached)** □ **Denied (see attached)**

□ **Approved Plan**

_____ *Plan Title* _____ *Engineer* _____ *Date* _____ *Notice to Proceed* _____ *Date*

□ **As-Built Complete**

_____ *Plan Title* _____ *Engineer* _____ *Date* _____ *Work Complete (Permit Issued)* _____ *Date*