

FOR OFFICIAL USE ONLY

Permit # _____

Fee received: _____ Date _____

TOWN OF CHENANGO
BROOME COUNTY, NEW YORK

PERMIT APPLICATION FOR DEVELOPMENT IN FLOOD HAZARD AREAS

- A. General instructions page 4 (Applicant to read and sign)
 - B. For assistance in completing or submittal of this application contact:
Scott Russell, Flood Plan Administrator, for the Town of Chenango
1529 NYS Rte 12
Binghamton, New York 13901
607-648-4809 #5
-

1. Name and address of applicant:

(First Name) (MI) (Last Name)
Street Address: _____
Post Office: _____ State: _____ Zip Code: _____
Telephone # _____ Email: _____

2. Name and address of owner (if different)

(First Name) (MI) (Last Name)
Street Address: _____
Post Office: _____ State: _____ Zip Code: _____
Telephone # _____ Email: _____

3. Engineer, Architect, Land Surveyor (If Applicable)

(First Name) (MI) (Last Name)

Project Location

Street Address: _____ Tax Map# _____

Name of distance and direction from nearest intersection or other landmark

Name of Waterway: _____

Project Description (Check all applicable boxes and see Page 4, Item 3)

Structures

Structure Type

- New Construction
- Addition
- Alteration
- Relocation
- Demolition
- Replacement

- Residential (1-4 family)
- Residential (More than 4 family)
- Commercial
- Industrial
- Mobile Home (single lot)
- Mobile Home (Park)
- Bridge or Culvert

Estimated value of improvements if addition or alterations: \$ _____

Other Development Activities

- Fill Excavation Mining Drilling Grading
- Watercourse alteration Water System Sewer System
- Subdivision (New) Subdivision (Expansion)
- Other (Explain)

CERTIFICATION

Application is hereby made for the issuance of a floodplain development permit. The applicant certifies that the above statements are true and agrees that the issuance of the permit is based on the accuracy thereof. False statements made herein are punishable under law. As a condition to the issuance of a permit, the applicant accepts full responsibility for all damage, direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless to the community from suits, actions, damages and costs of every name and description resulting from said project. Further, the applicant agrees that the issuance of a permit is not to be interrupted as a guarantee of freedom from risk of future flooding. The applicant certifies that the premises, structure, development, etc. will not be utilized or occupied until a Certificate of Compliance has been applied for and received.

Town of Chenango

Flood Hazard Development Permit

Administrative Action

Completed by Flood Plain Administrator

Proposed project located in ___ "A" Zone with elevation
___ "A" Zone without elevation
___ Floodway
___ Coastal High Hazard Area (V-Zone)

Bas flood elevation at site is : _____

Source documents:

Plan Review

Elevation to which lowest floor is to be elevated _____ ft. (NGVD)

Elevation to which structure is to be flood proofed _____ ft. (NGVD)

Elevation to which compacted fill is to be elevated _____ ft. (NGVD)

Action

___ Permit is approved, proposed development in compliance with applicable floodplain management standards.

___ Additional information required for review. Specify: (i.e. encroachment analysis)

___ Permit is conditionally granted, conditions attached.

___ Permit is denied, Proposed development not in conformance with applicable floodplain management standards. Explanation attached. A variance, subject to Public Notice and Hearing, is required to continue project.

Signature _____ Date _____
(Permit Issuing Officer)

This permit is valid for a period of one (1) year from the above date of approval.

Building Construction Documentation

The certified "As Built" elevation of lowest floor (including basement) of structure is _____ ft. (NGVD) Certification of required professional Engineer, Land Surveyor or other recognized agent, documenting these elevations is attached.

Town of Chenango

Broome County, New York

Development in Flood Hazard Areas
Instructions

1. Type or print in ink
 2. Submit _____ copies of all papers including detailed construction plans and specifications
 3. Furnish plans drawn to scale, showing nature, dimension and elevation of area in question: existing or proposed structures, fill, storage of materials, drainage facilities and the location of the foregoing. Specifically the following is required:
 - (A) NGVD (Mean Sea Level) elevation of lowest floor including basement of all structures.
 - (B) Description of alterations to any watercourse.
 - (C) Statement of techniques to be employed to meet requirements to anchor structures, use flood resistant materials and construction practices.
 - (D) Show new and replacement potable water supply and sewage systems will be constructed to minimize flood damage hazards.
 - (E) Plans for subdivision proposal greater than 50 lots or 5 acres (whichever is least) must provide base flood elevations if they are not available.
 - (F) Additional information as may be necessary for the Floodplain Administrator to evaluate application.
 4. Where a non-residential structure is intended to be made watertight below the base flood level, a registered professional engineer or architect must develop and or review structural design, specifications, and plans for the construction and certify that the design and methods for meeting the applicable provisions of the local flood plain management regulations.
 5. No work on the project shall be started until a permit has been issued by the Flood Plain Administrator.
 6. Applicant is hereby informed that other permits may be required to fulfill local, state and federal regulatory compliance.
 7. Applicant will provide all required elevation certifications and obtain a certificate of compliance prior to any use or occupancy of any structure or other development.
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ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE	
A1. Building Owner's Name					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Company NAIC Number:	
City		State		ZIP Code		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____						
A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number _____						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) _____ sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____						
c) Total net area of flood openings in A8.b _____ sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage _____ sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____						
c) Total net area of flood openings in A9.b _____ sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number			B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA						

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:	
City	State	ZIP Code	Company NAIC Number	

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: _____ Vertical Datum: _____

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ feet meters
- b) Top of the next higher floor _____ feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) _____ feet meters
- d) Attached garage (top of slab) _____ feet meters
- e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) _____ feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) _____ feet meters
- g) Highest adjacent (finished) grade next to building (HAG) _____ feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ feet meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name	License Number	Place Seal Here
Title		
Company Name		
Address		
City	State ZIP Code	
Signature	Date Telephone	

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:
City	State	ZIP Code	Company NAIC Number

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ . _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ . _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ . _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

Check here if attachments.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City State ZIP Code	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Photo One

Photo One

Photo One Caption

Photo Two

Photo Two

Photo Two Caption

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:
City	State	ZIP Code	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Photo One

Photo One

Photo One Caption

Photo Two

Photo Two

Photo Two Caption