



Vilas County Zoning & Planning

330 Court Street • Eagle River, WI 54521

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VILAS COUNTY FLOODPLAIN LAND USE PERMIT APPLICATION

OWNER AND PROPERTY INFORMATION			
Applicant/Owner Name:		Phone:	
Address:		Fax:	
City:	State:	ZIP Code:	
Engineer/Contractor Name:			
Address:		Fax:	
City:	State:	ZIP Code:	
I hereby certify that the proposed work is authorized by the owner of record and that I, acting as agent, have been authorized by the owner to make this application.			
Signature of Applicant			Date of Application
PROPOSED DEVELOPMENT INFORMATION			
Address: _____			
Computer Parcel #: _____ Town of _____			
Legal Description: Gov't Lot _____, _____ 1/4 _____ 1/4, Section ____, T__ N, R__ E			
Lot / Unit ____ Block _____			
Subdivision/Condominium: _____			
The proposed development:			
<input type="checkbox"/> Is located in the Floodfringe _____ or Floodway _____ H & H required: yes or no			
<input type="checkbox"/> Is subject to a LOMA or LOMC. Case # _____ RFE _____			
<input type="checkbox"/> Is located in a Special Flood Hazard Area (SFHA) FPE _____ (RFE +2')			
FIRM Panel _____		FIRM Zone: _____	
1% chance flood elevation at most upstream corner of site: _____			ft (NGVD 88)
DEVELOPMENT TYPE AND UTILITY INFORMATION			
Construction or Development Type:		Construction or Development Details:	
<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	Utilities:	
<input type="checkbox"/> Public Utility	<input type="checkbox"/> Government	Electric:	<input type="checkbox"/> Above-ground
			<input type="checkbox"/> Underground
<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition	Sewer	<input type="checkbox"/> Municipal <input type="checkbox"/> POWTS
<input type="checkbox"/> Floodproofing	<input type="checkbox"/> Alteration	Water	<input type="checkbox"/> Municipal <input type="checkbox"/> Private Well
<input type="checkbox"/> Repair or Replacement	<input type="checkbox"/> Demolition/ Moving	Additional Facilities:	
<input type="checkbox"/> Filling/Grading Excavating			

BRIEF PROJECT DESCRIPTION

Estimated Starting Date: _____
 Estimated Completion Date: _____
 Estimated Total Cost: \$ _____ (Estimate subject to Department review and verification. Estimated cost of project MUST include the following: All materials, labor, built-in appliances, overhead, and profit, repairs made to damaged parts of the building at the same time, building, electrical, plumbing, HVAC and demolition costs. Attach Estimated Cost of Improvement Worksheet and/or itemized list.)
 Project Description:

Note: If the proposed work involves the modification, alteration, reconstruction or improvement of any kind to an existing structure located within an identified flood-prone area, the building official will require the Equalized Assessed value for that structure in order to determine the extent of construction spending limits and flood proofing required.

Equalized Assessed Value of Structure: \$ _____ Percent Used _____ %
 Equalized Assessed Value Source: _____ (appraisal, assessed value, etc.)

SITE OR PLOT PLAN

REQUIRED FOR ALL APPLICANTS

Attach a CURRENT Plat of Survey or Site Plan showing the exact size and location of the proposed activity as well as any existing buildings, structures or appurtenances, Special Flood Hazard Areas, fill and areas subject to LOMA or LOMC.

REQUIRED WHEN APPLICABLE

Accurately delineate any area that is subject to flooding and the location of any existing stream improvements or protective works. Provide adequate documentation showing the extent of protection provided by such improvements or works. Submit copies of all plans and construction specifications for any proposed stream improvement or protective works as well as all State and Federal approvals and permits.

NOTE: Any property mapped within the 1 % chance Flood Recurrence Interval must submit an accurate survey indicating the location of the floodplain boundary (*floodway/floodfringe*) as it relates to the property including topographic survey.

AS-BUILT ELEVATIONS

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 land surveyor (attach certification to this application).

Structure is: Elevated Floodproofed Vented N/A
 Elevation Certificate: Yes No (if yes, please attach)
 If floodproofed, describe method:
 Lowest Floor Elevation: _____ NGVD (88)
 Elevation of Garage Slab: _____ NGVD (88)
 Lowest Elevation of HVAC Equipment: _____ NGVD (88)

CERTIFICATE OF DESIGN AND CONSTRUCTION

This proposed design and construction of the referenced building, including foundations, floodproofing, and placement of the lowest floor, meet the applicable standards contained in the Vilas County Floodplain Zoning Ordinance. The methods used in making the necessary loading calculations and in selecting the appropriate design and construction materials reflect currently acceptable engineering practices. Any modifications to these specifications and plans will invalidate this certification.

I hereby certify that the proposed activity has been adequately designed to protect against flood damage and that the plans for the construction, development and improvement of the site are in compliance with all applicable rules and regulations concerning construction within an identified flood-prone area.

Seal

Signature of registered engineer or architect

Print Name

Address

Phone

Date

First Inspection Date:

Second Inspection Date:

Third Inspection Date:

Notes:

Notes:

Notes:

APPROVAL OR DISAPPROVAL

(Office Use Only)

Comments:

Approved Date _____ **Denied Date** _____

Deputy Zoning Administrator Signature _____