

SINGLE FAMILY HOME SPECIAL FLOOD HAZARD AREA (SFHA) PERMIT FORM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

111 EAST ERIE STREET, CHICAGO, IL 60611 www.MWRD.org

APPLICABILITY:

This permit form may be used in lieu of a standard Watershed Management Permit only if the construction consists of either:

- Newly proposed single family home located in or within 100 feet of the regulatory floodplain; or
- Single family home foundation expansion located in or within 100 feet of the regulatory floodplain.

If the proposed work includes: (1) a public sewer extension (2) residential subdivision, or (3) an impact to a wetland or ringrian environment

| | Watershed Management Permit form must be used. | ii, (2) lesidelidal sub | iivisioii, oi (3) aii i | impact to a wettand of riparian environment, | | | |
|----|--|-------------------------|------------------------------|---|--|--|--|
| 1. | PROJECT INFORMATION New C | | ☐ Foundation | * | | | |
| | Description of Project: | | | | | | |
| | Street Address of Project: | | | | | | |
| | Municipality (Township, if unincorporated): | | | | | | |
| | Parcel Area: acres Related MWRD Permit Number, if known: | | | | | | |
| 2. | SPECIAL FLOOD HAZARD AREA (SFHA | A) INFORMATIO | N | | | | |
| | A. Indicate the Flood Zone located on the parcel along with the Federal Emergency Management Agency (FEMA) Flood Insurance Rate Map (FIRM) Panel number(s) and Map Revised date(s), and submit a copy of the FIRM: | | | | | | |
| | \square Zone A (BFE not defined) \rightarrow Par | nel No: | | Date: | | | |
| | \square Zone AE (BFE defined) \rightarrow Par | | | | | | |
| | B. Based on the FIRM panel above, indicate all applicable conditions that apply to the proposed work: | | | | | | |
| | ☐ Building footprint is within the floodplain ☐ Regulatory floodway is located on parcel | | | | | | |
| • | | | | | | | |
| 3. | BASE FLOOD ELEVATION (BFE) A. Indicate the BFE (round to nearest tenth of a foot) and name of waterway: | | | | | | |
| | BFE:ft, NAVD88 Waterway: | | | | | | |
| | B. Submit the profile and indicate the source of the BFE for the subject parcel: | | | | | | |
| | ☐ Flood Insurance Study (FIS) ☐ MWRD Detailed Watershed Plan ☐ Project-Specific Floodplain Study | | | | | | |
| 4. | FLOODPLAIN PROXIMITY | | | | | | |
| | Submit an exhibit that delineates the BFE on the applicable, the limits of the regulatory floodway. Is | the building footprint | within the BFE by | y elevation? | | | |
| | \square Yes \rightarrow Continue to Item 5 (indicate A | for Item 7) | \square No \rightarrow S | kip to Item 7 (indicate B for Item 7) | | | |
| 5. | ELEVATION OF SINGLE FAMILY HOME WITHIN FLOODPLAIN (MUST BE 2 FEET ABOVE BFE) | | | | | | |
| | A. Indicate the lowest floor elevation for the proposed work (round to nearest tenth of a foot):ft, NAVD88 | | | | | | |
| | B. Indicate the lowest entry elevation for the proposed work (round to nearest tenth of a foot):ft, NAVD88 | | | | | | |
| 6. | COMPENSATORY STORAGE (EQUAL TO AT LEAST 1.1 TIMES VOLUME LOST BELOW BFE) | | | | | | |
| υ. | Does the proposed work include fill within the floodplain? | | | | | | |
| | Yes → Provide quantities below | ap.m | \bigcap No \rightarrow C | Continue to Item 7 | | | |
| | | | _ | | | | |
| | Floodplain Fill (CF) | Compensatory Sto | | CF) | | | |
| | $0 - 10 \text{ year}$ | 0-10 | | * Must be at least 1.0 times floodplain fill | | | |
| | 10 – 100 year | 10 - 1 | 100 year* | musi ve ui ieusi 1.0 ilmes fiooapidin fili | | | |
| | Total | Total | | ** Must be at least 1.1 times floodplain fill | | | |

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SINGLE FAMILY HOME

| WMO Permit Number: | |
|--------------------|--|
| | |

SPECIAL FLOOD HAZARD AREA (SFHA) PERMIT FORM

| 7. | CERTIFICATION BY PROFESSIONAL ENGINEER OR PROFESSIONAL LAND SURVEYOR A. Permit for Development Within the Floodplain (AS-BUILTS REQUIRED) I hereby certify that this permit application, drawings, and data submitted with this application, have been examined by me and are found to be in compliance with all applicable requirements of the Watershed Management Ordinance, and the development is elevated above the FPE and is protected against flooding. | | | | | | |
|--|--|---|--|---|--|--|--|
| | I hereby certify that thi development is located on NOTE: Development located on NOTE: | outside the floodplain by elevation a cated outside the floodplain by eleva in the proximity of the floodplain | d data submitted with this applica and not subject to the requirements ation is not subject to the floodplain | tion, have been examined by me and the of the Watershed Management Ordinance. provisions of the Watershed Management 2 feet above the BFE and follow FEMA | | | |
| | Certified by: | | | | | | |
| | Municipality or Engin Address: | | | Zip: | | | |
| | Name: P.E. Title: | | | | | | |
| | | | | Email: | | | |
| | SEAL | | | Date: | | | |
| 8. | PERMITTEE (MUNI | | | (PROPERTY OWNER) | | | |
| υ. | Name: | | | (INOIENTI OWNER) | | | |
| | Title: Phone: | | | Phone: | | | |
| | | | | | | | |
| | Address: | | Address: | | | | |
| | City: | Zip: | City: | Zip: | | | |
| | Signature: | Date: | Signature: | Date: | | | |
| fou req 2. I an cor 3. I age | 8-4055 or the Authorized andation survey for appro- uired constitutes a violation EXPIRATION: This Pern expired permit is deemed additions so warrant, an ext REVOCATION: In issuin ent. Any incorrect statement immediately become nu | Municipality after foundation is in val prior to construction of framing on of the Watershed Management Conit will expire if construction has no construction without a permit. Contension may be granted. In this Permit, the MWRD has relies ents or misrepresentations will be call and void. This Permit is subject to the attach | nstalled for verification of lowest ag or structure. Failure to give advact or started within one (1) year from a struction must be completed within ed upon the statements and represe cause for revocation of this Permit, the special conditions. | Contact the MWRD Field Office at (708) floor and lowest entry elevations. Submit ance notice and make written submittal as a the date of issuance. Construction under in three (3) years from date of issuance. If intations made by the Applicant or his/her and all rights of the Applicant hereunder | | | |
| | | | EVIEW and APPROVAL IIZED MUNICIPALITY USE OF | NLY | | | |
| P | Permit Review and Approv | val by: DISTRICT | ☐ Authorized Municipality | | | | |
| P | ermit Approved by: | | | Date: | | | |
| | | | REPORT and APPROVAL IZED MUNICIPALITY USE O | NLY | | | |
| 1 | . TIME SCHEDULE: | (A) Verbal telephone notice receiv | /ed:(B)] | Final inspection date: | | | |
| 2 | . INSPECTION: | Lowe | est floor elevation per issued permiest entry elevation per issued permiling (cut and fill) per issued permit | it: Yes No | | | |
| 3 | . COMMENTS: | Visua | al Inspection Only – No Work In F | Floodplain | | | |
| | | BEEN INSPECTED AND IS HERI | EBY APPROVED | Data | | | |

MWRD Area Engineer/Field Supervisor or Authorized Municipality

MWRD Area Inspector or Authorized Municipality