

SFHA DEVELOPMENT PERMIT

Application and Permit Form to Develop in a Special Flood Hazard Area

Applicant: _____ Contact: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Phone No.: _____ FAX No.: _____ Engineer of Record: _____

Address of Development: _____
 Type Development:
 _____ Subdivision _____ Residential Structure _____ Manufactured Home
 _____ Non-Residential Structure _____ Non-Structural Activity _____ Alteration of Watercourse

Brief Description of development proposal: _____

Is Plat/Plan information attached? Yes / No (If No, provide date for Plat/Plan submittal: _____)
 Is development site in a Floodway? Yes / No (If Yes, attach Certificate of No Increase in BFE.)
 The minimum Finished Floor Elevation of the proposed structure is: _____ feet (NGVD 1927). [MFFE]
 The elevation of Floodproofing of the proposed structure is: _____ feet (NGVD 1927). [MEFP]
 The Base Flood Elevation at the development site is: _____ feet (NGVD 1927). [BFE]

APPLICANT MUST PROVIDE THE INFORMATION REQUIRED BELOW

Type Development	Required	Information/Certification	Date Approved (by Floodplain Administrator)	Initials
Structures	Yes / No	Elevation Certificate Form	_____	_____
	Yes / No	Floodproofing Certificate Form	_____	_____
Subdivisions	Yes / No	Base Flood Elevation Data	_____	_____
	Yes / No	Certificate of Fill Compaction	_____	_____
Alteration of a Watercourse	Yes / No	Notification Requirements	_____	_____
	Yes / No	Assurance of Carrying Capacity	_____	_____
Floodways	Yes / No	Certificate of No Increase in BFE	_____	_____
Other	Yes / No	Grading Permit - City	_____	_____
	Yes / No	Detention Approval - City	_____	_____
	Yes / No	Corps of Engineers Approval	_____	_____
	Yes / No	State ADPC&E Approval	_____	_____
	Yes / No	As-Built Certification	_____	_____

CERTIFICATION BY APPLICANT

I, the undersigned, agree to comply with all applicable provisions of the Little Rock Municipal Code of Ordinances. I understand that conditional approval requires that I complete and submit the information identified above in order to obtain final permit approval. I understand that failure to complete and submit the necessary information will result in revocation of this SFHA Development Permit.

Signature and Title of Authorized Representative: _____ Date: _____

Conditional Approval: By: _____ Date: _____
Office of the City Engineer

Final Approval: By: _____ Date: _____
Office of the City Engineer