

APPLICATION FOR FLOOD PLAIN CONSTRUCTION PERMIT
CITY OF FALMOUTH, KENTUCKY

Date of Application: _____ Received: _____

Name of Applicant: _____

Name of Owner, if different: _____

Address of Property: _____

Source of Title, Deed Book and Page, or attach a copy of your deed.

PVA Assessment Map Number: _____

Attach copy of PVA map showing property and nearest Public Street or road.

Attach copy of any recorded plat showing the property.

Attach names, addresses, and PVA map Numbers for all adjoining owners.

The City of Falmouth is the final administrative agency to determine the issuance of a Flood Plain Construction Permit in the City. Please attach the following, any and all:

1. Application and Permit from the Division of Water, Environmental Protection Cabinet, for the project.
2. Application, Zoning Permit, Development Plan, any Variance or Conditional Use Permit, and supporting Minutes from granting agencies for the project.
3. Application, Development Plan, Permit, and supporting Minutes from Three Rivers Health Department for the Project.
4. Utilities Plan and acceptance, or statement indicating provision of utilities upon approval for the project.
5. Clean Plan for the Project, reflecting all other administrative agency requirements, with buildings, public improvements, utilities, Flood Plain Boundary, and all other structures, showing property lines, set-backs, public streets or roads, adjoining property owners, and Mean Sea Level Elevations of all improvements.
6. If required by any of the above, a copy of the Flood Insurance Policy, or a statement indicating issuance on approval, construction, inspection, and approval.

7. Length of proposed construction project, _____ months,
And proposed start date: _____.

The undersigned applicant and owner hereby Certify to the City of Falmouth that the foregoing application is complete, true, and correct to the best of my knowledge.

Applicant Applicant

Owner, if different Owner, if different

Application must be accompanied by payment of the Application Fee in Full in the amount of \$ _____.