

Petitioner’s/Representative’s Name:

Signature of Petitioner/Representative:

Petitioner’s/Representative’s E-Mail Address:

Petitioner’s/Representative’s Mailing Address:

Telephone: Fax:

Petition Request:

Physical Address:

Legal Description:

Assessor’s Parcel Identification No.:

Provide the following additional information:

□ Complete development plans (in duplicate) drawn to a common scale, showing the location, dimension and elevations of proposed landscape alterations, existing or proposed structures, and the location of the foregoing in relation to areas of special flood hazard.

□ Information as to the elevation in relation to mean sea level of the lowest floor (including basement) of all new and substantially improved structures; elevation in relation to mean sea level to which any nonresidential structure shall be floodproofed; and a certificate from a Colorado Professional Engineer or architect that the nonresidential floodproofed structure meets the floodproofing criteria of Section 17.06.08 (B), Oak Creek Land Use Code.

□ Description of the extent to which any watercourse will be altered or relocated as a result of proposed development

□ Legal Description

□ Physical Address

□ Vicinity Map

□ Filing Fee $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Base fee is designed to cover the minimum staff hours has to process the application. Additional hours on the project will be assessed at $\_\_\_\_\_\_\_\_\_\_ per hour.)

□ The application fee must be paid in full to begin the application.

□ Proof of ownership, lease/deed and/or statement of authority or other documentation regarding the use of the property.

□ Other

The Applicant, by his/her signature below, agrees that he/she understands that the proposal submitted is subject to review by the Floodplain Administrator for application completeness and additional information may be required to have the application deemed complete. Upon the application being deemed complete, an administrative approval or denial shall be issued within thirty (30) days.

Signature of Applicant/Applicant’s Representative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Town Administrator/Clerk:

Application Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Application Deemed Complete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_