

MAUMEE RIVER BASIN COMMISSION
ACQUISITION (FLOOD BUYOUT) COST-SHARE ASSISTANCE PROGRAM
APPLICATION FORM

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PART 1 (To Be Completed by Property Owner)

Homeowner's Information

Name: _____

Telephone No. (day): _____

Telephone No. (home): _____

Email Address: _____

Cell No.: _____

Property's Location

Property Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different from property address): _____

Parcel ID: _____ Township: _____ Range: _____ Section: _____

_____ Property is located in corporate limits of: _____ (City / Town) within _____ County, Indiana

Zoning Information

Structure Use (check one):

_____ Single Family Residential

_____ Multi-family Apartment Building

_____ Manufactured / Mobile Home Unit

_____ Non-residential

_____ Other (Specify): _____

Structure Information

Structure Type: _____ One-Story _____ Two-Story _____ Split-Level _____ Manufactured Home

Foundation Type: _____ Basement _____ Crawl Space _____ Slab _____ Walkout Basement

Construction Date: _____ Pre-FIRM? _____ Yes _____ No

(*If yes, please include Flood Insurance Policy Number and copy of Declaration Page.) Policy # _____

Has Structure Sustained Flood Damage? _____ Yes _____ No Flood Insurance Claim(s) date(s): _____

(If yes, please include a narrative describing any prior damages due to flooding, including dates, costs, repair receipts, insurance claim report, photographs if available, & other relevant information). Attach additional pages if necessary.

Affirmation

I affirm that the above information is, to the best of my knowledge, accurate and true.

Applicant's Signature: _____ Date Signed: _____

MAUMEE RIVER BASIN COMMISSION
FLOODPROOFING / RETROFITTING COST-SHARE ASSISTANCE PROGRAM
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PART 2 (To Be Completed by Local Floodplain Administrator or MRBC)

Floodplain Information:

Source of Potential Flooding: _____ (River, Creek, Ditch, Stream)

Flood Zone: _____ AE _____ A _____ X-shaded _____ X

Flood Hazard Area: _____ Floodway _____ Floodway Fringe

Base Flood Elevation (BFE)*: _____ NAVD1988 _____ NGVD1929

Base Flood Elevation Source: _____

FEMA DFIRM - Map / Panel Number: _____ (attach copy with location marked))

Lowest Floor Elevation*: _____ NAVD1988 _____ NGVD1929

Lowest Adjacent Grade*: _____ NAVD1988 _____ NGVD1929

***Attach copy of FEMA Elevation Certificate if available.**

Eligibility for Acquisition

Is structure currently covered by a Flood Insurance Policy? _____ Yes _____ No

Has structure been previously covered by Flood Insurance? _____ Yes _____ No _____ Don't Know

Is structure regarded by FEMA as a Repetitive-Loss (RL) Property? _____ Yes _____ No

Is structure regarded by FEMA as a Severe Repetitive-Loss (SRL) Property? _____ Yes _____ No

Has the structure ever been Substantially Damaged?^ _____ Yes _____ No

^Damage exceeding 50% of structure Fair Market Value (FMV) except in Adams County / Decatur where Substantial Damage is 40%.

Is the property / structure identified in the Community's Multi-Hazard Mitigation Plan (MHMP)? _____ Yes^^ _____ No

^^(If yes, please provide page references in MHMP and date of current plan)

Current FMV of Structure \$ _____ Basis of FMV (appraisal, comparable, other) _____

Estimated Acquisition Cost (appraisals, legal, asbestos inspection / remediation, demolition, proj mgmt.) \$ _____

Basis for Estimate: _____

Project meets FEMA's BCA guidelines? _____ Yes _____ No Local Community supports project? _____ Yes _____ No

Community Cost-Share Commitment? _____ Yes _____ No; Amount \$ _____

Meets (check one) _____ MRBC Buyout Criteria _____ MRBC Floodproofing / Retrofitting Criteria

Information in Part 2 completed by: _____ Date: _____

PART 3 (To Be Completed by the Local Jurisdiction)

Local Government (appropriate department, EMA/DHS, plan commission, etc.) Concurrence

Name: _____, Title: _____

_____ Department / Commission: Community (County, City/ Town): _____

Signature: _____

Comments: _____

Please return completed application to: **Maumee River Basin Commission**
10347 Dawson's Creek Blvd, Ste B
Fort Wayne, IN 46825-1956