



MAUMEE RIVER BASIN COMMISSION
LARRY K. GILBERT AGRICULTURAL LAND USE CONVERSION PROGRAM
APPLICATION FORM



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

Desired Program Alternate (check one or more):

- Floodplain Land Acquisition
- Floodplain Conservation Easement Program
- Vegetative Filter Strip Grant
- Floodplain Wetland Reserve Grant
- Floodplain Woodland Reserve Grant

Has the site been previously flooded? Yes No (If yes, please include a narrative describing any prior damages due to flooding including extent of flooding, dates, costs, etc.)

Affirmation

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

Applicant's Signature: _____ Date Signed: _____

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 Floodway Floodway Fringe
 Base Flood Elevation (BFE)*: _____ NAVD1988 _____ NGVD1929
 Base Flood Elevation Source: _____ FEMA DFIRM - Map / Panel Number: _____

Eligibility

- The property appears to be appropriate for the desired program alternate.
- The property does not appear to be appropriate for the desired program alternate.
- The most appropriate MRBC program alternate for this property appears to be (please specify): _____

Requested / appropriate land area subject to this application is _____ acres.
 Estimated Cost for the recommended program alternate: \$ _____
 Basis for Estimate: _____
 Information in Part 2 completed by: _____ Date: _____

PART 3 (To Be Completed by the Local Jurisdiction)

Local Government (appropriate department, 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