

FLOOD CONTROL PERMIT APPLICATION

For the Use of Right-Of-Way Right-Of-Entry Or Installation of Structures within 20' of or in a Flood Control Facility

Date:	
Applicant: Name	
Address	
	Phone Number
Representative:	
Address	
Email	Phone Number
Consultant: Firm	
Name	
Address	
Email	Phone Number
Flood Control Facility Affected Stream Alteration Permit No. (if required)	
Project Location: Address	Zip Code
	Subdivision
Parcel No.	

Project Description: (Describe in these spaces the prop construction, purpose intended, location by stationing of gates, etc. Use separate sheets if necessary, identif	s. Indicate passageway provided by means
engineering calculations. Attach drawings and sketche	
Signature (Applicant)	
Name	
Title	

Application will not be accepted if this form is not signed Acceptance of this application does not guarantee approval and issuance of a permit