

APPLICATION FOR A "SPECIAL FLOOD HAZARD AREA DEVELOPMENT PERMIT"  
CLINTON COUNTY ZONING DEPARTMENT  
850 FAIRFAX STREET  
CARLYLE, IL. 62231  
PHONE: (618) 594-6655 FAX: (618) 594-6006

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**CLINTON COUNTY, ILLINOIS  
FLOODPLAIN DEVELOPMENT PERMIT APPLICATION**

Application is hereby made for a FLOODPLAIN DEVELOPMENT PERMIT. The applicant understands and agrees that:

- the permit applied for, if granted is issued on the representations made herein;
- any permit issued may be revoked because of any breach of representation at which time all work shall cease until the permit is reissued or a new permit is issued;
- any permit issued on this application will not grant any right or privilege to erect any structure or use any premises described for any purposes or in any manner prohibited by the ordinances, codes, or regulations of the County;
- construction or addition to a structure also requires a County Zoning Certificate of Compliance;
- the applicant hereby gives consent to make reasonable inspections to enforce the provisions of the ordinance without first obtaining a search warrant;
- the permit will be posted in a conspicuous place on the premises, in plain view from a public road; and
- the permit will expire if no work is commenced within one year of issuance.

(Please Print)

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Owner (if not same as above): \_\_\_\_\_

1.) Property Location ( ¼ ¼ Section-Township-Range): \_\_\_\_\_

2.) Property Index Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

3.) Flood Insurance Rate Map panel number: \_\_\_\_\_

4.) Flood zone: \_\_\_\_\_ . Base Flood Elevation (ft.): \_\_\_\_\_

5.) Proposed lowest floor elevation (including basement) \_\_\_\_\_

6.) Description of proposed development project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

