



# Federal Emergency Management Agency

Washington, D.C. 20472

January 17, 2001

MR. DOUGLAS REINHART  
AUGLAIZE COUNTY ENGINEER  
1014 SOUTH BLACKHOOF STREET  
WAPAKONETA, OH 45895

CASE NO.: 01-05-630A  
COMMUNITY: AUGLAIZE COUNTY, OHIO  
(UNINCORPORATED AREAS)  
COMMUNITY NO.: 390761

DEAR MR. REINHART:

This is in reference to a request that the Federal Emergency Management Agency (FEMA) determine if the property is located within an identified Special Flood Hazard Area, the area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood), on the effective National Flood Insurance Program (NFIP) map. Using the information submitted and the effective NFIP map, our determination is shown on the attached Letter of Map Amendment (LOMA) Determination Document. This determination document provides additional information regarding the effective NFIP map, the legal description of the property and our determination.

Additional documents are enclosed which provide information regarding the subject property and LOMAs. Please see the List of Enclosures below to determine which documents are enclosed. If you have any questions about this letter or any of the enclosures, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, 12101 Indian Creek Court, Beltsville, MD 20705.

Sincerely,

*Matthew B. Miller*

Matthew B. Miller, P.E., Chief  
Hazards Study Branch  
Mitigation Directorate

**LIST OF ENCLOSURES:**

LOMA DETERMINATION DOCUMENT (REMOVAL)

cc: State/Commonwealth NFIP Coordinator  
Community Map Repository  
Mr. Richard L. Hudson



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## LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	Auglaize County, Ohio (Unincorporated Areas)	Lots 15 through 17, Section N, Sandy Beach Allotment, as described in the Survivorship Deed, recorded in Volume 365, Pages 829 and 830, filed for record on June 1, 1999, by the Recorder, Auglaize County, Ohio
	COMMUNITY NO.: 390761	
AFFECTED MAP PANEL	NUMBER: 39011C0080C	
	NAME: Auglaize County, Ohio and Incorporated Areas	
	DATE: 09/06/1989	
FLOODING SOURCE: GRAND LAKE ST. MARYS		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 40.546, -84.454 SOURCE OF LAT & LONG: MAPBLAST! DATUM: NAD83

### DETERMINATION

LOT	BLOCK/SECTION	SUBDIVISION	STREET	OUTCOME WHAT IS REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NGVD29)	LOWEST ADJACENT GRADE ELEVATION (NGVD29)	LOWEST FLOOR ELEVATION (NGVD29)	LOWEST LOT ELEVATION (NGVD29)
15-17	N	Sandy Beach Allotment	Rainbow Drive	Structure	X (unshaded)	873.0 feet	874.0 feet	—	—

**Special Flood Hazard Area (SFHA)** - The SFHA is an area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood).

**ADDITIONAL CONSIDERATIONS** (Please refer to the appropriate section on Attachment 1 for the additional considerations listed below.)

PORTIONS REMAIN IN THE SFHA

This document provides the Federal Emergency Management Agency's determination regarding a request for a Letter of Map Amendment for the property described above. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we have determined that the structure(s) on the property(ies) is/are not located in the SFHA, an area inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood). This document amends the effective NFIP map to remove the subject property from the SFHA located on the effective NFIP map; therefore, the Federal mandatory flood insurance requirement does not apply. However, the lender has the option to continue the flood insurance requirement to protect its financial risk on the loan. A Preferred Risk Policy (PRP) is available for buildings located outside the SFHA. Information about the PRP and how one can apply is enclosed.

This determination is based on the flood data presently available. The enclosed documents provide additional information regarding this determination. If you have any questions about this document, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, 12101 Indian Creek Court, Beltsville, MD 20705.

*Matthew B. Miller*

Matthew B. Miller, P.E., Chief  
Hazards Study Branch  
Mitigation Directorate

Version 1.3.2

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# Federal Emergency Management Agency

Washington, D.C. 20472

## LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

### ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

#### **PORTIONS OF THE PROPERTY REMAIN IN THE SFHA (This Additional Consideration applies to the preceding 1 Property.)**

This Determination Document has removed the subject of the determination from the Special Flood Hazard Area (SFHA). However, portions of the property may remain in the SFHA. Therefore, any future construction or substantial improvement on the property remains subject to Federal, State/Commonwealth, and local regulations for floodplain management.

This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, 12101 Indian Creek Court, Beltsville, MD 20705.

*Matthew B. Miller*

Matthew B. Miller, P.E., Chief  
Hazards Study Branch  
Mitigation Directorate

FEDERAL EMERGENCY MANAGEMENT AGENCY  
PROPERTY INFORMATIONO.M.B. No. 3067-0147  
Expires April 30, 2001

## PAPERWORK REDUCTION ACT

Public reporting burden for this form is estimated to average 1.63 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, S.W., Washington, DC 20472, Paperwork Reduction Project (3067-0147).

This form may be completed by the property owner, registered land surveyor, or registered professional engineer.

1. Community Name of NFIP map panel on which the property is located: Auglaize County, Ohio  
County \_\_\_\_\_ State: \_\_\_\_\_  
Map/Panel Number: 39011 C 0080 C  
Effective Date: 9-6-89
2. Street Address of the Property: \_\_\_\_\_
3. Legal description of Property, Lot and Block (if a street address cannot be provided):  
LOTS 15, 16, 17 ; SECTION N, SANDY BEACH
4. Are you requesting that the SFHA designation be removed from (a) all of the land within the bounds of the property, (b) a portion of land within the bounds of the property (a certified metes and bounds description and map of the area to be removed are required), or (c) the structure(s) on the property? (Answer "a," "b," or "c") C
5. Is this request for (a) a single structure, (b) a single lot, (c) multiple structures, (d) multiple lots? (Answer "a," "b," "c," or "d") a
6. What is the type of construction? (a) crawl space; (b) slab on grade; (c) basement; (d) other (explain). (Answer "a" "b," "c" or "d") b
7. Is this request prior to the transfer of ownership of the property in question from a developer to an individual property owner?  
☐ Yes ☒ No
8. Is this request for (a) existing conditions, or (b) proposed project? (Answer "a" or "b") a
9. Has fill been placed on the property to elevate the ground elevations on the property, to elevate a structure(s), or to elevate the ground elevations around a structure(s)? No If yes, when? \_\_\_\_\_
10. For proposed projects, will fill be placed to elevate this land or structure(s)? N/A
11. If known, list the case number and/or the street address of previous request(s) that have been submitted to FEMA for this property or adjacent properties? NONE
12. One of the following documents is required for all cases:  
I have enclosed the following documents in support of this request:  
☐ a. Copy of the subdivision Plat Map (with recordation data and stamp of the Recorder's Office)  
OR  
☒ b. Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other suitable map showing the surveyed location of the property with respect to local streets and watercourses. (If the plat map and property deed are available, then both should be submitted.)

(For these maps a map scale must be provided and they should not be reduced or enlarged)

PLEASE REFER TO THE INSTRUCTIONS FOR THE APPROPRIATE MAILING ADDRESS

In addition, the following documents should be enclosed as applicable:

- ☒ c. Copy of the effective FIRM panel on which the property location has been accurately plotted, including a copy of the FIRM Title Block (if the request is for more than one lot/structure, this location must be certified by a licensed land surveyor or registered professional engineer).
- ☐ d. A map showing the location of any structures existing or proposed for the property (*certified by a licensed land surveyor or registered professional engineer*).
- ☐ e. Metes and bounds description and accompanying map of the portion of the property to be removed from SFHA, certified by a licensed land surveyor or registered professional engineer (only if the request is for a portion of land within the bounds of the property, not the entire lot or the structure(s) only).
- ☒ f. Form 2 Elevation Information Form or a FEMA NFIP Elevation Certificate may be submitted in lieu of the Elevation Information Form (*for structures/property located in Zone AO see instructions for further guidance*).
- ☐ g. Form 4 Community Acknowledgment of Request Involving Fill Form (*only if fill has been or will be placed*)
- ☐ h. Form 3 Certification of Fill Placement Form (*only if fill has been or will be placed and the request is not for an existing single residential structure*).
- ☐ i. Additional information: \_\_\_\_\_  
(please specify)

13. ☒ PAYMENT ENCLOSED

Processing fee (see instructions for processing fees and exemptions)

L.O.M.A.

(Type of request)

\$ 0

(amount enclosed)

Check or money order only. Make check or money order payable to: **National Flood Insurance Program**. If paying by Visa or Mastercard, please refer to the Credit Card Information form which follows this form.

14. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Applicant's Name: Richard L. Hudson

(please print or type)

Company: \_\_\_\_\_

Mailing Address: P.O. Box 357

St. Marys OH 45885

(please print or type)

Daytime Telephone Number: 419 394 4258 Fax Number: 419 394 4209

11/15/00

Date

Richard L. Hudson

Signature of Applicant (required)

## ELEVATION INFORMATION

## PAPERWORK REDUCTION ACT

Public reporting burden for this form is estimated to average 0.63 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, S.W., Washington, DC 20472, Paperwork Reduction Project (3067-0147).

This form must be completed by a registered professional engineer or licensed land surveyor. This form should not be used for requests involving channelization, bridges/culverts, or Fill in the FEMA-Designated (regulatory) Floodway; forms entitled Revisions to National Flood Insurance Program Maps (MT-2) should be used instead. The Elevation Information Form must be included for all requests, unless the request is for a determination in which the FIRM already shows the property to be CLEARLY outside the SFHA. Cases in which the determination for the property or structure is uncertain will require the submittal of elevation data to provide a definitive determination. If an Elevation Certificate has been completed for the subject property, it may be submitted in lieu of this form.

(See instructions for details)

1. Community Name: AUGLAIZE COUNTY, OHIO
2. Legal Description of Property: LOTS 15, 16, 17, SECTION N., SANDY BEACH
3. Flooding Source: GRAND LAKE ST. MARYS
4. Based on the FIRM, this property is located in Zone(s): AE
5. Is any portion of this property located in the regulatory floodway? ☐ Yes ☒ No  
Are any structures (existing or proposed) located in the regulatory floodway? ☐ Yes ☒ No
6. Is this area subject to land subsidence or uplift? ☐ Yes ☒ No  
If Yes, what is the date of the current releveing? \_\_\_\_\_

For items 7-11, multiple lots/structures, complete the appropriate column(s) of the Summary of Elevations - Individual Lot Breakdown Form (MT-1 Form 5), identifying the elevations for each lot/structure. To support items 9, 10 and 11, please note: a map (certified by a licensed surveyor or registered professional engineer) may be required to relate the ground elevations and locations of structures or lots to the SFHA. The map should indicate whether it reflects "as built" or "proposed" conditions.

7. What is the BFE for this property? (Provide elevation to nearest tenth of a foot and datum) Please refer to the seperately published Flood Insurance Study (FIS).  
873.0 Elevation NGVD 29 Datum (NGVD 1929, NAVD 1988 or other)

8. How was the BFE determined? (Attach a copy of the Flood Profile or Summary of Elevations Table from the FIS report, if appropriate, a copy of a letter from a State agency establishing a BFE, or other necessary supporting information including Forms 3 and 4 from forms entitled, "Revisions to National Flood Insurance Program Maps" (MT-2). )  
F.I.R.M.

9. If this request is to remove the SFHA designation from a parcel of land or lot(s), what is the existing or proposed elevation of the lowest grade; that is, the lowest ground on the property or within the metes and bounds description of the portion being removed? (Provide elevation to nearest tenth of a foot and datum)  
\_\_\_\_\_  
Elevation \_\_\_\_\_ Datum \_\_\_\_\_

PLEASE REFER TO THE INSTRUCTIONS FOR THE APPROPRIATE MAILING ADDRESS

10. If this request is to remove the SFHA designation from a structure(s), what is the elevation of the existing or proposed lowest adjacent grade; that is, the lowest ground touching the structure, including any attached decks or garages? (Provide elevation to nearest tenth of a foot and datum) 874.0 Elevation NGVD 29 Datum
11. If fill has been/will be placed to elevate the structure(s) on this property, what is the existing or proposed elevation of the lowest floor, including basement, crawl space and/or attached garage? (Provide elevation to nearest tenth of a foot and datum) N/A Elevation \_\_\_\_\_ Datum \_\_\_\_\_
12. Are the measurements in items 9-11 based on (a) proposed or (b) existing conditions? b
13. If any of the above elevations were computed based on a datum different than the effective FIS, what is the conversion factor? FIS Datum = Local Datum +/- N/A feet
14. Has a Summary of Elevations-Individual Lot Breakdown Form been completed for this request? ☐ Yes ☒ No
15. All information submitted in support of this request is correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Name (please print or type): JAMES W. GEESLIN

Title (please print or type): PROFESSIONAL SURVEYOR

Registration No.: 7764 Expiration Date: 12-31-01

State: OHIO

Telephone Number: (419) 586-6155

James W. Geeslin  
Signature

11-14-00  
Date

Seal (Optional)

