



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	Auglaize County, Ohio (Unincorporated Areas)	A portion of Section 1, Township 6 South, Range 4 East, as described in Warranty Deed, Document No. 05169, recorded in Volume 300, Pages 0004 and 0005, filed on August 6, 1997, by the County Recorder, Auglaize County, Ohio
	COMMUNITY NO.: 390761	
AFFECTED MAP PANEL	NUMBER: 39011C0085C	
	NAME: Auglaize County, Ohio and Incorporated Areas	
	DATE: 09/06/1989	
FLOODING SOURCE: CLEAR CREEK		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 40.539, -84.343 SOURCE OF LAT & LONG: MAPBLAST! DATUM: NAD 83

DETERMINATION

LOT	BLOCK/SECTION	SUBDIVISION	STREET	OUTCOME WHAT IS REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NGVD 29)	LOWEST ADJACENT GRADE ELEVATION (NGVD 29)	LOWEST LOT ELEVATION (NGVD 29)
—	—	—	05751 Washington Pike	Structure	X (unshaded)	865.0 feet	867.7 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
ZONE A

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. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.

Matthew B. Miller

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration

Version 1.3.3

381703052479



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.

ZONE A (This Additional Consideration applies to the preceding 1 Property.)

The NFIP map affecting this property depicts an SFHA that was determined using the best flood hazard data available to FEMA, but without performing a detailed engineering analysis. The flood elevation used to make this determination is based on approximate methods and has not been formalized through the standard process for establishing base flood elevations published in the Flood Insurance Study. This flood elevation is subject to change.

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. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.

Matthew B. Miller

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration

Version 1.3.3

381703052479



Federal Emergency Management Agency

Washington, D.C. 20472

September 11, 2002

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

CASE NO.: 02-05-3764A
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 described in the enclosed document 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. Other attachments specific to this request may be included as referenced in the Determination/Comment document. 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. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.

Sincerely,

Matthew B. Miller

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration

LIST OF ENCLOSURES:

LOMA DETERMINATION DOCUMENT (REMOVAL)

cc: State/Commonwealth NFIP Coordinator
Community Map Repository
Mr. and Mrs. Bill Doenges



Federal Emergency Management Agency

Washington, D.C. 20472

July 23, 2002

Mr. Douglas Reinhart, P.E., P.S.
Auglaize County Engineer
1014 South Blackhoof Street
Wapakoneta, OH 45895

IN REPLY REFER TO:

CASE NO: 02-05-3764A

COMMUNITY: AUGLAIZE COUNTY, OHIO
(UNINCORPORATED AREAS)

COMMUNITY NO: 390761

216-AD

RE: SE1/4 OF SECTION 1, TOWN 6S, RANGE 4E; 05751 WASHINGTON PIKE

Dear Mr. Reinhart:

This is in response to your request for a Letter of Map Amendment for the property referenced above.

The Federal Emergency Management Agency (FEMA) uses detailed application/certification forms for revision requests or amendments to the National Flood Insurance Program (NFIP) maps. The forms provide step-by-step instructions for requestors to follow, and are comprehensive, ensuring that the requestors' submissions are complete and more logically structured. Therefore, we can complete our review more quickly and at lower cost to the NFIP. While completing the forms may seem burdensome, the advantages to requestors outweigh any inconvenience.

The following forms or supporting data, which were omitted from your previous submittal, must be provided:

- A Base Flood Elevation (BFE) has not been established by FEMA for the flooding source affecting the property described above. Possible sources for obtaining a BFE for the property may be the local district of the U.S. Army Corps of Engineers, State/Commonwealth agencies (i.e. Department of Natural Resources, Department of Environmental Quality, Department of Transportation, etc.), or the local community's Engineering, Planning, or Building Department. Additional information regarding BFEs is available in the FEMA publication "Managing Floodplain Development in Approximate Zone A Areas", and can be obtained by calling 1-800-480-2520. Please provide us with a BFE for the property referenced above. To discuss alternative sources for obtaining a BFE please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP).

Please note that if all of the required items are not submitted within 90 days of the date of this letter, any subsequent request will be treated as an original submittal and will be subject to all submittal procedures.

When you write to us concerning your request, please include the case number referenced above in your letter. All required items and questions concerning your request are to be directed to the following address:

FEMA LOMA Depot
PBS&J
12101 Indian Creek Court
Beltsville, Maryland 20705

If you have any questions concerning FEMA policy, or the NFIP in general, 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. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.

Sincerely,

A handwritten signature in black ink that reads "Matthew B. Miller". The signature is written in a cursive style with a horizontal line underlining the first name.

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

QUESTION

1. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1960:

Age Group	Number of Children Placed
Under 1 year	1,200
1 to 2 years	1,800
2 to 3 years	2,500
3 to 4 years	3,200
4 to 5 years	4,000
5 to 6 years	4,800
6 to 7 years	5,500
7 to 8 years	6,200
8 to 9 years	7,000
9 to 10 years	7,800
10 to 11 years	8,500
11 to 12 years	9,200
12 to 13 years	10,000
13 to 14 years	10,800
14 to 15 years	11,500
15 to 16 years	12,200
16 to 17 years	13,000
17 to 18 years	13,800
Total	145,000

2. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1961:

Age Group	Number of Children Placed
Under 1 year	1,300
1 to 2 years	1,900
2 to 3 years	2,600
3 to 4 years	3,300
4 to 5 years	4,100
5 to 6 years	4,900
6 to 7 years	5,600
7 to 8 years	6,300
8 to 9 years	7,100
9 to 10 years	7,900
10 to 11 years	8,600
11 to 12 years	9,300
12 to 13 years	10,100
13 to 14 years	10,900
14 to 15 years	11,600
15 to 16 years	12,300
16 to 17 years	13,100
17 to 18 years	13,900
Total	150,000

3. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1962:

Age Group	Number of Children Placed
Under 1 year	1,400
1 to 2 years	2,000
2 to 3 years	2,700
3 to 4 years	3,400
4 to 5 years	4,200
5 to 6 years	5,000
6 to 7 years	5,700
7 to 8 years	6,400
8 to 9 years	7,200
9 to 10 years	8,000
10 to 11 years	8,700
11 to 12 years	9,400
12 to 13 years	10,200
13 to 14 years	11,000
14 to 15 years	11,700
15 to 16 years	12,400
16 to 17 years	13,200
17 to 18 years	14,000
Total	155,000

4. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1963:

Age Group	Number of Children Placed
Under 1 year	1,500
1 to 2 years	2,100
2 to 3 years	2,800
3 to 4 years	3,500
4 to 5 years	4,300
5 to 6 years	5,100
6 to 7 years	5,800
7 to 8 years	6,500
8 to 9 years	7,300
9 to 10 years	8,100
10 to 11 years	8,800
11 to 12 years	9,500
12 to 13 years	10,300
13 to 14 years	11,100
14 to 15 years	11,800
15 to 16 years	12,500
16 to 17 years	13,300
17 to 18 years	14,100
Total	160,000

5. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1964:

Age Group	Number of Children Placed
Under 1 year	1,600
1 to 2 years	2,200
2 to 3 years	2,900
3 to 4 years	3,600
4 to 5 years	4,400
5 to 6 years	5,200
6 to 7 years	5,900
7 to 8 years	6,600
8 to 9 years	7,400
9 to 10 years	8,200
10 to 11 years	8,900
11 to 12 years	9,600
12 to 13 years	10,400
13 to 14 years	11,200
14 to 15 years	11,900
15 to 16 years	12,600
16 to 17 years	13,400
17 to 18 years	14,200
Total	165,000

6. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1965:

Age Group	Number of Children Placed
Under 1 year	1,700
1 to 2 years	2,300
2 to 3 years	3,000
3 to 4 years	3,700
4 to 5 years	4,500
5 to 6 years	5,300
6 to 7 years	6,000
7 to 8 years	6,700
8 to 9 years	7,500
9 to 10 years	8,300
10 to 11 years	9,000
11 to 12 years	9,700
12 to 13 years	10,500
13 to 14 years	11,300
14 to 15 years	12,000
15 to 16 years	12,700
16 to 17 years	13,500
17 to 18 years	14,300
Total	170,000

7. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1966:

Age Group	Number of Children Placed
Under 1 year	1,800
1 to 2 years	2,400
2 to 3 years	3,100
3 to 4 years	3,800
4 to 5 years	4,600
5 to 6 years	5,400
6 to 7 years	6,100
7 to 8 years	6,800
8 to 9 years	7,600
9 to 10 years	8,400
10 to 11 years	9,100
11 to 12 years	9,800
12 to 13 years	10,600
13 to 14 years	11,400
14 to 15 years	12,100
15 to 16 years	12,800
16 to 17 years	13,600
17 to 18 years	14,400
Total	175,000

8. The following information was obtained from the records of the Department of Social Services, State of New York, regarding the number of children placed in foster care during the year 1967:

Age Group	Number of Children Placed
Under 1 year	1,900
1 to 2 years	2,500
2 to 3 years	3,200
3 to 4 years	3,900
4 to 5 years	4,700
5 to	



AUGLAIZE COUNTY

Engineering Department

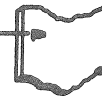
P.O. Box 59
1014 SOUTH BLACKHOOF STREET

WAPAKONETA, OHIO 45895

TELEPHONE (419) 738-3219 738-2713

FAX (419) 738-5426

email: augcoeng@augcoeng.com



Douglas Reinhart
COUNTY ENGINEER

CASE NO: 02-05-3764A

July 29, 2002

Attached please find the requested information on the
BFE in this area.

The 865.00 elevation for this area has been established
for years. FEMA has approved letters of Map Amendmants in
this area in the past based on this elevation.

Thank you

ELEVATION INFORMATION

Expires April 30, 2001

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: 05751 WASHINGTON PIKE
ST. MARYS, OHIO 45885
3. Flooding Source: CLEAR CREEK
4. Based on the FIRM, this property is located in Zone(s): A
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 releveling? _____

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.

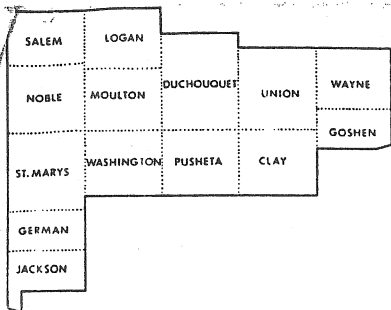
7. What is the BFE for this property? (Provide elevation to nearest tenth of a foot and datum) Please refer to the separately published Flood Insurance Study (FIS).
865.0 Elevation NGVD 29 Datum (NGVD 1929, NAVD 1988 or other)
8. How was the BFE determined? (Attach a copy of the Flood Profile or Summary 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).)

AUGLAIZE COUNTY ENGINEER. SEE CASE # 97-05-5158C

- ☒ 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



Auglaize County Sanitary Engineer

1014 SOUTH BLACKHOFF STREET • WAPAKONETA, OHIO 45895

PH. (419) 738-8945

DOUGLAS REINHART P.E.
SANITARY ENGINEER



Cliff & Vicki Thompson

October 20, 1997

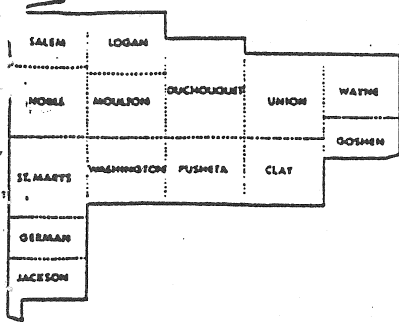
The attached survey by James Kent, P.S., drawing no. 2857, truly represents the parcel of ground owned by Cliff & Vicki Thompson, being East of Barrington road and North of Clear Creek in Section 1, St. Marys Township, Auglaize County, Ohio.

The 100-year flood elevation for this site has been certified by my department is 865.00. Said survey plat shows that the southern portion of the lot is within the flood zone "A", but where the proposed house is to be located, the north end of the lot is higher than the 865.00 elevation and is in zone "X", out of the flood plain as shown on FEMA flood map 39011C0085C.

Therefore, if a home is built on this property and located at the location as depicted by the attached drawing, this home will not be in the flood plain.

Douglas Reinhart, P.E., P.S.
County Sanitary Engineer
County Flood Plain Coordinator

cc: Thompson



Auglaize County Sanitary Engineer

1014 SOUTH BLACKHOOF STREET • WAPAKONETA, OHIO 45895

PH.(419)738-3219

DOUGLAS REINHART P.E.
SANITARY ENGINEER



May 19, 1993

Flood Plain Requirements for Tracts "D & E" as shown on attached plat.

Owner: Marjorie Jones

Location: Section 1, St. Marys Township

13145 (Lot D), Barrington Road, St. Marys, Ohio 45885

13115 (Lot E), Barrington Road, St. Marys, Ohio 45885

Restrictions for development of Lots D & E

100 YEAR FLOOD ELEVATION AT SPECIFIC SITE = 865.00

1. The lowest floor elevation (as built) of all structures shall be 866.00 (including basements)
2. Top of well casing elevation and sewage system elevations shall conform with requirements of Auglaize County Health Department to prevent contamination from flooding.
3. Minor filling can be completed on both tracts to bring existing elevations to above the 865.0 (100 year flood) elevation.
4. Tract "E" adjacent to Clear Creek can fill no more than 1' from existing elevations for the first 50' north of the existing top of ditch bank (any additional fill in this area could cause a potential in the floodway and create a backwater situation for existing homes upstream of the site).

Douglas Reinhart, P.E., P.S.

Auglaize County Sanitary Engineer

Auglaize County Flood Plain Coordinator

cc: FEMA

ODNR

St. Marys Township Trustees

Auglaize County Health Department

RECEIVED

MAY 28 1993

DIVISION OF WATER
FLOOD PLAIN MANAGEMENT

ADMINISTRATIVE

NOTE: The following is to be completed by the local floodplain administrator. All references to elevations are in feet mean sea level (m.s.l.). The term base flood elevation means the same as the 100-year elevation.

5. Is the proposed development located in _____ an identified floodway; X a flood hazard area where base flood elevations exist with no identified floodway; _____ an area outside of an identified floodway?

NOTE: Floodway development must demonstrate through hydrologic and hydraulic analysis, performed in accordance with standard engineering practice, that no increase in base flood elevation will result during occurrence of the base flood discharge. If base flood elevations exist with no floodway delineation, hydrologic and hydraulic analysis is required to demonstrate not more than one foot increase at any point to the water surface elevation of the base flood.

6. Does proposed development meet NFIP and local General Standards?
_____ Construction materials and methods resistant to flood damage.
_____ Anchored properly. _____ Utilities safe from flooding.
X Subdivision designed to minimize flood damage.

Specific Standards?

- X Encroachments - proposed action will not obstruct flood waters.
X Lowest floor elevated to or above BFE.
_____ Lowest floor floodproofed above BFE.

7. Base flood elevation (100-year) at proposed site 865 feet m.s.l.
Data source Bridge data supplied by Auglaize County Engineer and field survey performed by
Map effective date Gordon Geeslin, P.S.

8. Does the structure contain a No basement; _____ enclosed area used only for parking access or storage, other than basement, below the lowest floor?

9. For structures located in unnumbered A zones (no BFE available) the structure's lowest floor is _____ feet above the highest grade adjacent to the structure.

10. The certified as-built elevation of the structure lowest floor is will be 1.0 feet above m.s.l.*

11. The certified as-built floodproofed elevation of the structure's is will be 1.0 feet above m.s.l.*

NOTE: *Certificates of a registered engineer or land surveyor documenting these elevations are necessary if elevations are provided by applicant.

12. The proposed development is in compliance with applicable floodplain standards. PERMIT ISSUED ON 5-19-93 (see attached sheet for specific guidelines for proposed building).

13. The proposed development is not in compliance with applicable floodplain standards. PERMIT DENIED ON _____
Reason: _____

NOTE: All structures must be built with the lowest floor, including the basement, elevated or floodproofed to or above the base flood elevation (100-year) unless a variance has been granted. Only nonresidential structures may be floodproofed.

14. The proposed development is exempt from the floodplain standards per Section _____ of the Flood Damage Prevention Ordinance (Resolution) No. _____

Date: 5-19-93 Administrator's Signature: [Signature], P.E., P.S.

ELEVATION INFORMATION

O.M.B. No. 3067-0147
Expires April 30, 2001

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: 05751 WASHINGTON PIKE
ST. MARYS, OHIO 45885
3. Flooding Source: CLLAR CREEK
4. Based on the FIRM, this property is located in Zone(s): A
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 separately published Flood Insurance Study (FIS).
865.0 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).)

AUGLAIZE COUNTY ENGINEER. SEE CASE # 97-05-5158C

- ☒ 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) 867.7 Elevation NAD83 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 +/- _____ 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: 12.31.02

State: OHIO

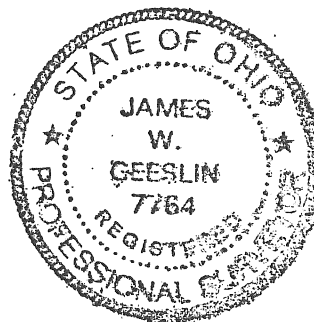
Telephone Number: (419) 678-7232

James W. Geeslin
Signature

6.20.02
Date

Seal (Optional)

Approved: Douglas Reinhart
Douglas Reinhart, P.E., P.S.
Auglaize County Flood Plain Coordinator



FEDERAL EMERGENCY MANAGEMENT AGENCY
PROPERTY INFORMATION

OMB 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
County State: OHIO
Map/Panel Number: 39011C0085 C
Effective Date: 9.6.89
2. Street Address of the Property: 05751 WASHINGTON PIKE, ST. MARYS,
3. Legal description of Property, Lot and Block (if a street address cannot be provided):
SEE ENCLOSED LEGAL DESCRIPTION
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") C
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?
97-05-5158 C
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: Tax Map / AERIAL PHOTO
(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: BILL & EDITH VOENGES Company: _____
(please print or type)

Mailing Address: 05751 WASHINGTON PIKE
ST MARYS OH 45885
(please print or type)

Daytime Telephone Number: 419 394 1043 Fax Number: _____

06.25.02

Date

Edith Voenges
Signature of Applicant (required)