

Federal Emergency Management Agency

Washington, D.C. 20472

May 20, 2005

MR. IVO KRAMER CHAIRMAN, AUGLAIZE COUNTY 201 SOUTH WILLIPIE STREET SUITE G11 COUNTY COURTHOUSE WAPAKONETA, OH 45895-0000

CASE NO.: 05-05-2175A
COMMUNITY: AUGLAIZE COUNTY, OHIO
(UNINCORPORATED AREAS)

COMMUNITY NO.: 390761

DEAR MR. KRAMER:

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 Revision based on Fill (LOMR-F) 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 LOMR-Fs. 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, 3601 Eisenhower Avenue, Suite 130, Alexandria, VA 22304-6439.

Sincerely,

Doug Bellomo, P.E., Chief

Hazard Identification Section, Mitigation Division Emergency Preparedness and Response Directorate

LIST OF ENCLOSURES:

LOMR-F DETERMINATION DOCUMENT (REMOVAL)

cc:

State/Commonwealth NFIP Coordinator Community Map Repository

Mr. Mike Shelby



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP REVISION BASED ON FILL DETERMINATION DOCUMENT (REMOVAL)

COMMU	NITY AND MAP PANEL INFORMATION	LEGAL PROPERTY DESCRIPTION
COMMUNITY	AUGLAIZE COUNTY, OHIO (Unincorporated Areas)	A portion of Section 19, Township 6 South, Range 4 East, as described in the Survivorship Deed recorded as Document No. 3292, in Volume 91, Pages 747 and 748, in the Office of the Recorder, Auglaize County, Ohio
	COMMUNITY NO.: 390761	747 and 740, in the Office of the Necolder, Augiaize County, Offic
	NUMBER: 39011C0090C	
AFFECTED MAP PANEL	NAME: AUGLAIZE COUNTY, OHIO AND INCORPORATED AREAS	
	DATE: 9/6/1989	
		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 40.507, -84.451 SOURCE OF LAT & LONG: PRECISION MAPPING STREETS 4.0 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)
_	_	_	22 Breezewood Lane	Structure	X (unshaded)	873.0 feet	873.1 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 Revision based on Fill 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 revises 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, 3601 Eisenhower Avenue, Suite 130, Alexandria, VA 22304-6439.

Doug Bellomo, P.E., Chief

Hazard Identification Section, Mitigation Division

Emergency Preparedness and Response Directorate Version 1.3.3

1029299.1LOMR-F-SL052162175



Federal Emergency Management Agency Washington, D.C. 20472

LETTER OF MAP REVISION BASED ON FILL DETERMINATION DOCUMENT (REMOVAL)

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

PORTIONS OF THE PROPERTY REMAIN IN	HE SFHA (This Additional Consideration applies to the preceding
Property.)	a section and the second and the proceeding

Portions of this property, but not the subject of the Determination/Comment document, may remain in the Special Flood Hazard Area. 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, 3601 Eisenhower Avenue, Suite 130, Alexandria, VA 22304-6439.

Doug Bellomo, P.E., Chief

Hazard Identification Section, Mitigation Division

Emergency Preparedness and Response Directorate Version 1.3.3

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Replaces all previous editions

Important: Read the instructions on pages 1	
SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:
BUILDING OWNER'S NAME MR. & MRS. MIKE SHELBY	Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, end/or Bldg. No.) OR P.O. ROUTE AND BOX N 22 BREEZE WOOD CN,	NO. Company NAIC Number
CITY ST. MARYS OH STATE	ZIP CODE 45885
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	73085
BUILDING USE (e.g., Residentia), Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary	essary.)
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM:	2/T
(" " " " " " " " " " " " " " " " " " "	s (Type): S Quad Map Other
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	ORMATION
B1. NEIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME	B3. STATE
City of St. MARYS 310022 # HUGUAIZE	UH
	ONE(S) B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 973.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in E	39.
FIS Profile FIRM Community Determined Control): COUNTY ENGINEER
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988	Other (Describe):
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pr Designation Date:	otected Area (OPA)? _ Yes
	V BBOULDED
SECTION C - BUILDING ELEVATION INFORMATION (SURVE C1. Building elevations are based on: Construction Drawings* Building Under Construction Drawings*	
A new Elevation Certificate will be required when construction of the building is complete.	truction _ Finished Construction
C2. Building Diagram Number (Select the building diagram most similar to the building for	which this certificate is being completed - see
pages 6 and 7. If no diagram accurately represents the building provide a sketch or photogram	raph.) SEE DRAWING ATTACHEL
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR	/AE, AR/A1-A30, AR/AH, AR/AO
Complete Items C3.a-i below according to the building diagram specified in Item C2. State the	e datum used. If the datum is different from
the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show to be leader to the BFE in Section B, convert the datum to that used for the BFE.	field measurements and datum conversion
calculation. Use the space provided or the Comments area of Section D or Section G, as ap Datum 672.04 Conversion/Comments 700 of M.H. Coversion	propriate, to document the datum conversion.
	and an area of the FIRM of the North Annual Control of the FIRM of the North Annual Control of the North Annual Co
Elevation reference mark used <u>SANLM.H. 264</u> Does the elevation reference mark a) Top of bottom floor (including basement or enclosure) 874.64 ft.	
b) Top of next higher floor - SEOND FLOOR 893.47 ft.	(m) 00
	Sisse (m)
☐ d) Attached garage (top of slab) 8.73.10 ft.	and Di
e) Lowest elevation of machinery and/or equipment	ше
servicing the building (Describe in a Comments area.) 874.69 ft.	(m) agranda (m)
☐ f) Lowest adjacent (finished) grade (LAG) 873./o ft.	' " (0) 1
☐ g) Highest adjacent (finished) grade (HAG)	(m) se
i) Total area of all permanent openings (flood vents) in C3.h _ WA sq. in. (sq. cm)	3
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION of the signed and sealed by a land surveyor, engineer, or architect authorized	
I certify that the information in Sections A, B, and C on this certificate represents my best efforts	to interpret the data available
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S.	Code Section 1001
CERTIFIER'S NAME BEAL G BOLLICENSEN	
TITLE ENGINEER COMPANY NAME	2 36 363
ADDRESS 285 S. OHIO ST. P.O. BOX 3 CITY MINISTER	STATE OH ZIP CODE 45865
SIGNATURE BING. Baumy DATE 2-10-04	TELEPHONE (419) 628-3364
FEMA Form 81-31, January 2003 See reverse side for continuation.	Replaces all previous editions

REF. CASE # 04-05-240ZA

IMPORTANT: In these space	ces, copy the corresponding information	from Section A.	For Insurance Company Use:
BUILDING STREET ADDRESS ((Including Apt., Unjt, Suite, and/or Bldg. No.) OR		Policy Number
CITY	EUDOD LA STATE	ZIP CODE	Company NAIC Number
ST. MARG	S Oli	45885	
	TION D - SURVEYOR, ENGINEER, OR AR		
	tion Certificate for (1) community official, (2)	insurance agent/company, and ((3) building owner.
COMMENTS			
FLOOD	ELEVATION AND BEN	CHMARK PROVI	DED
Rei	COUNTY ENGINEER		
	1		12/1 Charlebon 18
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NO	OT REQUIRED) FOR ZONE AO	Check here if attachments AND ZONE A (WITHOUT BFE)
For Zone AO and Zone A (with	nout BFE), complete Items E1. through E5.		
information for a LOMA or LON	MR-F, Section C must be completed.		
see pages 6 and 7. If no c	(Select the building diagram most sidiagram accurately represents the building,	provide a sketch or photograph.)	
E2. The top of the bottom floor	(including basement or enclosure) of the b	uilding is _ ft. (m) _ in	. (cm) above or below
	diacent grade. (Use natural grade, if availat with openings (see page 7), the next highe		h) of the building is
_ ft. (m) _lin. (cr	m) above the highest adjacent grade. Comp	olete Items C3.h and C3.i on from	t of form.
E4. The top of the platform of r	machinery and/or equipment servicing the b	uilding is ft. (m) ir	n. (cm) above or below
	dijacent grade. (Use natural grade, if availab ood depth number is available, is the top of		rdance with the community's
floodplain management or	dinance? Yes No Unknowr	n. The local official must certify the	nis information in Section G.
SEC.	TION F - PROPERTY OWNER (OR OWNE	R'S REPRESENTATIVE) CERTI	FICATION
The property owner or owner' (without a FEMA-issued or co the best of my knowledge.	s authorized representative who completes ommunity-issued BFE) or Zone AO must sig	Sections A, B, C (Items C3.h and n here. <i>The statements in Section</i>	a U3.i only), and E for Zone A ons A, B, C, and E are correct to
	NER'S AUTHORIZED REPRESENTATIVE'S NAI	ME	
ADDRESS	CIT	Y STATE	ZIP CODE
SIGNATURE	DA		
COMMENTS		1 kestedas l	
	SECTION C. COMMUNICATION	FORMATION (OPTIONS)	Check here if attachments
The local official who is authori	SECTION G - COMMUNITY IN ized by law or ordinance to administer the c		ent ordinance can complete
Sections A, B, C (or E), and G	of this Elevation Certificate. Complete the a	applicable item(s) and sign below	· ·
G1. [] The information in Sec	ction C was taken from other documentatior	that has been signed and embo	ssed by a licensed surveyor,
elevation data in the 0	who is authorized by state or local law to conments area below.)		
G2. A community official c	ompleted Section E for a building located in	Zone A (without a FEMA-issued	or community-issued BFE) or
Zone AO. G3. [] The following informat	tion (Items G4-G9) is provided for communit	v floodolain management purpos	es.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		PF COMPLIANCE/OCCUPANCY
		ISSUED	
G7. This permit has been issue G8. Elevation of as-huilt lowest	ed for: New Construction Substitution (including basement) of the building is	stantial Improvement	htt ft (m) Dation
G9. BFE or (in Zone AO) depth	n of flooding at the building site is:		64 ft. (m) Datum: © © ft. (m) Datum:
DOUGLAS RELL	JURART, P.E. P.S.	ZOOD PLAIN COORDINATED	2
	IGLAS REWHART, P.E. P.S.	TITLE FLECT PLAIN	Gerchisotor
	1/2 County	TELEDHONE	6520
SIGNATURE /		DATE 2/13/24	
COMMENTS	N-5	713/04	
<u> </u>			
,	·		Check here if attachments

FEDERAL EMERGENCY MANAGEMENT AGENCY PROPERTY INFORMATION FORM

O.M.B. NO. 3067-0147 Expires September 30, 2005

PAPERWORK BURDEN DISCLOSURE NOTICE

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, reviewing, and submitting 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, SW, Washington DC 20472, Paperwork Reduction Project (3067-0147). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. Please do not send your completed survey to the above address.

or retain benefits under the National Flood Insurance Program. Please do not send your completed survey to the above address.				
request for a Letter of Map Amendment (LOMA).	ner, property owner's agent, licensed land surveyor, or registered professional engineer to support a , Conditional Letter of Map Amendment (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or I (CLOMR-F) for existing or proposed, single or multiple lots/structures. Please check the item below			
LOMA	A letter from FEMA stating that an existing structure or parcel of land that has not been elevated by fill (natural grade) would not be inundated by the base flood.			
CLOMA	A letter from FEMA stating that a proposed structure that is not to be elevated by fill (natural grade) would not be inundated by the base flood if built as proposed.			
LOMR-F	A letter from FEMA stating that an existing structure or parcel of land that has been elevated by fill would not be inundated by the base flood.			
CLOMR-F	A letter from FEMA stating that a parcel of land or proposed structure that will be elevated by fill would not be inundated by the base flood if fill is placed on the parcel as proposed or the structure is built as proposed.			
Fill is defined as material from any source placed to raise the ground to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. Fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in a Special Flood Hazard Area (SFHA) is considered natural grade.				
Has fill been placed on your property?	Yes No If yes, when was fill placed?			
Will fill be placed on your property?	Yes No If yes, when will fill be placed? 7/04 month/year			
22 BREEZE	s for multiple structures, please attach additional sheet): WOOD LANE, ST. MARYS, OHIO 45885 ubdivision) (if a street address cannot be provided):			
Are you requesting that the SFHA designat	ion be removed from (check one):			
the entire legally recorded	property?			
a portion of land within the certified by a licensed land	bounds of the property (a certified metes and bounds description and map of the area to be removed, discreption or registered professional engineer, are required)? What are the dates of construction? - Of The 8-04 completion			
4. Is this request for a (check one): single structure single lot multiple structures (How m	nany structures are involved in your request? List the number: ts are involved in your request? List the number:)			

REF CASE No: 04-05-2402A

In addition to this form (MT-1 Form 1), ALL requests must include the following:
Copy of the Plat Map for the property (with recordation data and stamp of the Recorder's Office) Copy of the Plat Map for the property (with recordation data and stamp of the Recorder's Office) Copy of the Plat Map for the property (with recordation data and stamp of the Recorder's Office)
Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses Enelose Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses Enelose Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and the local streets and the local streets and the local streets are considered by the local streets and the local streets are considered by the local
 Copy of the effective FIRM panel and/or Flood Boundary and Floodway Map (FBFM) (if applicable) on which the property location has been accurately plotted (property inadvertently located in the NFIP regulatory floodway will require Section B of MT-1 Form 3) Exclosive
Form 2 – Elevation Form. If an Elevation Certificate has already been completed for this property, it may be submitted in addition to Form 2. Enclose
Please include a map scale and North arrow on all maps submitted.
For LOMR-Fs and CLOMR-Fs, the following must be submitted in addition to the items listed above:
Form 3 – Community Acknowledgment Form
Processing Fee (see instructions for appropriate mailing address; or, visit http://www.fema.gov/mit/tsd/frm_fees.htm for the most current fee schedule)
Revised fee schedules are published periodically, but no more than once annually, as noted in the <u>Federal Register</u> . Please note: single/multiple lot(s)/structure(s) LOMAs are fee exempt. The current review and processing fees are listed below:
Check the fee that applies to your request:
\$325 (single lot/structure LOMR-F following a CLOMR-F)
\$425 (single lot/structure LOMR-F)
\$500 (single lot/structure CLOMA or CLOMR-F)
\$700 (multiple lot/structure LOMR-F following a CLOMR-F, or multiple lot/structure CLOMA)
\$800 (multiple lot/structure LOMR-F or CLOMR-F)
Please submit the Payment Information Form for remittance of applicable fees. Please make your check or money order payable to: National Flood Insurance Program.
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: Mie Hael T. SHELSY + Company: Please Print or Type Rosenwa E SHELSY
Mailing Address: 214 S. WAYNE ST. ST. MARYS, OH Daytime Telephone No.: WRK 419-394-3377
E-Mail Address: MShelby@Thomasshelby.com Fax No.: (optional)
Date 6-1-04 Signature of Applicant (required)
If you have any questions concerning FEMA policy, or the NFIP in general, please contact the FEMA Map Assistance Center toll free at 1-877-FEMA MAP (1-877-336-2627), or visit the Flood Hazard Mapping website at www.fema.gov/mit/tsd/.