

## Federal Emergency Management Agency

Washington, D.C. 20472

JUL 22 1998

Mr. Michael D. Lhamon 906 Linden Avenue St. Marys, Ohio 45885 IN REPLY REFER TO:

Case No.: 98-05-5088A

Community: Auglaize County, Ohio

(Unincorporated Areas)

Community No.: 390761

Map Panel Affected: Auglaize County,

Ohio and Incorporated Areas Number: 39011C0090 C

Map Effective Date: September 6, 1989

218-70-RS

Dear Mr. Lhamon:

We reviewed your request dated June 14, 1998, for a Letter of Map Amendment (LOMA). All required information for this request was received on June 22, 1998. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we determined that a portion of the property described below is located in a Special Flood Hazard Area (SFHA), 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); however, the structure on the property is not in the SFHA.

Property Description:

Lot 126, Block D, Southmoor Shores Subdivision, as described and

recorded in General Warranty Deed No. 06748, Volume 305, Page

215, filed in the Auglaize County Recorder's Office, on

October 9, 1997

Street Address:

126 Marbellow Court

Flooding Source:

Grand Lake St. Marys

This letter amends the above-referenced NFIP map to remove the structure from the SFHA. The structure is now located in Zone X (unshaded). Flood insurance coverage for the structure may be available under a low-cost policy (see enclosed document). Because portions of the property remain in the SFHA, any future construction or substantial improvement on the property remains subject to Federal, State, and local regulations for floodplain management.

An additional enclosed document provides information about LOMAs. If you have any questions about this letter, please contact Ms. Helen Cohn of our staff in Washington, D.C., either by telephone at (202) 646-3457 or by facsimile at (202) 646-4596.

Sincerely,

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

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Mitigation Directorate

Enclosures

cc: State Coordinator (w/o enclosures)
Community Map Repository

## FEDERAL EMERGENCY MANAGEMENT AGENCY ELEVATION INFORMATION

O.M.8. NO. 3067-0147 Expires July 31, 1997 FEMA USE ONLY

### PUBLIC BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average .63 hour 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. 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; and to the Office of Management and Budget, Paperwork Reduction Project (3067-0147), Washington, DC 20503.

This form must be completed by a licensed land surveyor or registered professional engineer. These forms

should not be used for requests involving Channelization, Bridges/Culverts, or Fill in the FEMA-Designated Floodway. Forms entitled Revisions to National Flood Insurance Program Maps (MT-2) should be used. The Elevtion Information Form must be included for all request, 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 maybe submitted in lieu of this form.

(See page 7 of instructions for details) 1. Community Name: AUGLANZE COUNTY, OHIO
2. Legal Description of Property: Lot 126, SOUTHMOOR SHORES BLOCK D 3. Flooding Source: GRAND LAKE ST. MARYS 4. Based on the FIRM, this property is located in Zone(s) A E 5. Is any portion of this property located in the regulatory floodway?

Are any structures (existing or proposed) located in the regulatory floodway?

Yes No releveling?\_\_\_\_ 7. What is the BFE for this property? (Provide elevation to nearest tenth of a foot and datum)\* 873.0 Elevation Datum 8. How was the BFE determined? (attach a copy of the Flood Profile or table from the FIS report, if appropriate, or other necessary supporting information including Forms 3 and 4 from forms entitled, "Revisions to National Flood Insurance Program Maps" (MT-2)). (If a flood profile for the 500-year flood was provided in the FIS Report, what is the 500-year flood elevation for this property? Elevation Datum (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? (Provide elevation to nearest tenth of a foot and datum)\*\_\_\_\_\_ Elevation \_\_\_\_\_ Datum

| 11. If this request is to remove the SFHA designation from proposed lowest adjacent grade; that is, the lowest grounearest tenth of a foot and datum)* 873.3  If fill has been/will be placed to elevate the structure(s) elevation of the lowest floor, including basement and/ottenth of a foot and datum)*  If any of the above elevations were computed based on a conversion factor?  FIS Datum = Local Datum | nd touching the structure? (Provide elevation to  NCVO 29'  ElevationDatum  on this property, what is the existing or proposed r attached garage? (Provide elevation to nearest  ElevationDatum  datum different than the effective FIS, what is the |
|--|--|
| *For multiple lots/structures, complete the appropr<br>Individual Lot Breakdown form, identifying the elev-<br>10, and 11, please note a map (certified by a license<br>may be required to relatethe ground elevations and<br>indicate whether it reflects "as-built" or "proposed" co   | ation for each lot/structure. To support items 9,<br>d surveyor or registered professional engineer)<br>locations of structures or lots. The map should  |
| 14. All information submitted in support of this request is cethat any false statement may be punishable by fine or imprisonn Section 1001.  Name: JAMES W. GEESLIN  |  |
|  | print or type)   |
| Tille: PROFESSIONAL SURVEYOR   |  |
| (piease j  | print or type)   |
| Registration No. 7764  | Expiration Date 12-31-98   |
| StateOH10  | TEOF O   |
| Telephone Number: (419) 586-6155   | JAMES O  |
| Signature  | GEESLIN 7764 O  GISTERE  |
| (6) 5 / 98<br>Date   | Seal (Optional)  |

# FEDERAL EMERGENCY MANAGEMENT AGENCY PROPERTY INFORMATION

O.M.B. Burden No. 3067-0147 Expires July 31, 1997 FEMA USE ONLY

#### PUBLIC BURDEN DISCLOSURE NOTICE

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| form may be completed by the property owner, registered land<br>neer  |  |
|---|--|
| Community Name: AUGLANZE COUNTY   | County: State: OH10  |
| Community Number: 390761  | Panel or Map Number: O090 C  |
| Effective Date: 9-6-89  |  |
| Street Address of Property: 126 MARBELLOW C   | OULT   |
| SOUTHMOOR SHORES SUBDIVISION  |  |
| Description of Property Lot and Block (if a street address cannot b   | pe provided):  |
| Are you requesting that the SRHA decignation he removed from (  | a) all of the land within the bounds of the  |
| Are you requesting that the SFHA designation be removed from (a property, (b) a portion of land within the bounds of the property (m the structure(s) on the property? (Answer "a," "b," or "c")  | netes and bounds description is required), or  |
| property, (b) a portion of land within the bounds of the property (m  | netes and bounds description is required), or gle commercial structure or lot, (c) multiple  |
| property, (b) a portion of land within the bounds of the property (methe structure(s) on the property? (Answer "a," "b," or "c")  | gle commercial structure or lot, (c) multiple ture, what was the date of construction?   |
| property, (b) a portion of land within the bounds of the property (method structure (s) on the property? (Answer "a," "b," or "c") C.  Is this request for (a) a single residential structure or lot, (b) a single structures or lots? (Answer "a", "b" or "c") C.  Is this request prior to the transfer of ownership of the property in | netes and bounds description is required), or gle commercial structure or lot, (c) multiple ture, what was the date of construction? Management of the property of the propert |
| property, (b) a portion of land within the bounds of the property (methe structure(s) on the property? (Answer "a," "b," or "c")  | gle commercial structure or lot, (c) multiple ture, what was the date of construction? Man question from a developer to an individual (Answer "a" or "b") Q  |
| property, (b) a portion of land within the bounds of the property (methe structure(s) on the property? (Answer "a," "b," or "c")  | gle commercial structure or lot, (c) multiple ture, what was the date of construction? Management of the description is required), or the description is required.   |

| c. Copy of the effective FIRM panel on which the property location has been accurately plotted (If the request is for more than one lottstructure, this location must be certified by a licensed land surveyor or registered professional engineer)  d. A map showing the locations of any structures existing on or proposed for the property (certified by licensed land surveyor or registered professional engineer)  e. Metes and bounds description and accompanying map (only if the request is for a portion of land with the bounds of the property, not structure(s) only)  f. Elevation Information form  g. Community Acknowledgment form (only if fill has been/will be placed)   | ✓<br>✓            | <ul> <li>a. Copy of the Plat Map (with recordation data) with recorder's seal</li> <li>OR</li> <li>b. Copy of the Deed (with recordation data), accompanied by a tax assessor's map, plat map or other suitable map showing the surveyed location of the property with recorder's seal (For these maps a map)</li> </ul> |
|--|-------------------|--|
| b. Copy of the Deed (with recordation data), accompanied by a tax assessor's map, plat map or other suitable map showing the surveyed location of the property with recorder's seal (For these maps a macula must be provided and they should not be reduced or enlarged)  c. Copy of the effective FIRM panel on which the property location has been accurately plotted (If the request is for more than one lodstructure, this location must be certified by a licensed land surveyor or registered professional engineer)  d. A map showing the locations of any structures existing on or proposed for the property (certified by licensed land surveyor or registered professional engineer)  e. Metes and bounds description and accompanying map (only if the request is for a portion of land with the bounds of the property, not structure(s) only)  f. Elevation Information form  g. Community Acknowledgment form (only if fill has been located)  h. Certification of Fill Compaction form (only if fill has been located)  i. (Type of request)  PAYMENT 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.  j. Additional information: (please specify)  12. All documents submitted in support of this request are correct to the best of my knowledge. I understand that false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section Applicant's Name: MICHAGE D. LINDEN AVE  S.T. MARYS O H. 45885 | √<br>             | b. Copy of the Deed (with recordation data), accompanied by a tax assessor's map, plat map or other suitable map showing the surveyed location of the property with recorder's seal (For these maps a m  |
| c. Copy of the effective PIRM panel on which the property location has been accurately plotted (If the request is for more than one lottstructure, this location must be certified by a licensed land surveyor or registered professional engineer)  d. A map showing the locations of any structures existing on or proposed for the property (certified by licensed land surveyor or registered professional engineer)  e. Metes and bounds description and accempanying map (only if the request is for a portion of land with the bounds of the property, not structure(s) only)  f. Elevation Information form  g. Community Acknowledgment form (only if fill has been will be placed)  h. Certification of Fill Compaction form (only if fill has been will be placed and the request is not for a single residential structure)  Initial fee (see page 7 of instructions for initial fees and exemptions)  i. (Type of request)  PAYMENT  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.  j. Additional information: (please specify)  12. All documents submitted in support of this request are correct to the best of my knowledge. I understand that false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section Applicant's Name: MICHAEL D. LIMBER AVE  S.T. MARYS O.H. 45885  |                   | dente nemot of his assessment of   |
| licensed land surveyor or registered professional engineer)   e. Metes and bounds description and accempanying map (only if the request is for a portion of land with the bounds of the property, not structure(s) only)   f. Elevation Information form     g. Community Acknowledgment form (only if fill has been/will be placed)   h. Certification of Fill Compaction form (only if fill has been/will be placed and the request is not for a single residential structure)   Initial fee (see page 7 of instructions for initial fees and exemptions)   i.   | SMALL LOVOR       | c. Copy of the effective FIRM panel on which the property location has been accurately plotted (If the request is for more than one lot/structure, this location must be certified by a licensed land surveyor cregistered professional engineer)  |
| e. Metes and bounds description and accempanying map (only if the request is for a portion of land with the bounds of the property, not structure(s) only)  f. Elevation Information form  g. Community Acknowledgment form (only if fill has been/will be placed)  h. Certification of Fill Compaction form (only if fill has been/will be placed and the request is not for a single residential structure)  Initial fee (see page 7 of instructions for initial fees and exemptions)  i. (Type of request)  PAYMENT 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.  j. Additional information: (please specify)  12. All documents submitted in support of this request are correct to the best of my knowledge. I understand that false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section Applicant's Name: MICHAEL J. LHAMEJ (please print or type)  Mailing Address: 906 LINDED AJE  ST. MARYS, OH 45885  | 701               | d. A map showing the locations of any structures existing on or proposed for the property (certified by licensed land surveyor or registered professional engineer)  |
| g. Community Acknowledgment form (only if fill has been/will be placed)  h. Certification of Fill Compaction form (only if fill has been/will be placed and the request is not for a single residential structure)  Initial fee (see page 7 of instructions for initial fees and exemptions)  i. (Type of request) (amount enclosed)  PAYMENT 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.  j. Additional information: (please specify)  12. All documents submitted in support of this request are correct to the best of my knowledge. I understand that false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section Applicant's Name: MICHAEL D. LHAMEN  Mailing Address: 906 LINDEN AUE  ST. MARYS, OH 45885  |                   | e. Metes and bounds description and accompanying map (only if the request is for a portion of land with  |
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| Applicant's Name:  MICHAEL D. LIAMON  (please print or type)  Mailing Address:  906 LINDEN AVE  ST. MARYS, OH 45885  |                   |  |
| Daytime Telephone Number: 419-586-0848   | false<br>Applican | t's Name: MICHAEL D. LITAMEN (please print or type)  |
| THOUSEHOUS PERCHANGE INCHES.   |                   | - 1- 1-11  |