



# FLOODPLAIN DEVELOPMENT PERMIT APPLICATION

**Community Services**  
**405-670-7314**  
3701 SE 15th Street  
Del City OK 73115  
[www.cityofdelcity.com](http://www.cityofdelcity.com)  
Fax: 405-670-7368

**SECTION 1: APPLICANT INFORMATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT: WORK: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

RELATIONSHIP TO PROPERTY: \_\_\_\_\_

**SECTION 2: PROPERTY INFORMATION**

ADDRESS: \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT: WORK: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

*FLOODING INFORMATION:* FLOOD ZONE: \_\_\_\_\_ FLOODING SOURCE: \_\_\_\_\_

*MAPPING INFORMATION:* MAP PANEL: \_\_\_\_\_ EFF. DATE: \_\_\_\_\_ BFE: \_\_\_\_\_

**SECTION 3: PROJECT INFORMATION**

**PROPOSED COST:** \_\_\_\_\_

**PROPOSED WORK:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 4: APPLICANT CERTIFICATIONS**

I hereby certify that the information provided herein is true to the best of my knowledge. I understand that providing false or misleading information may lead to revocation of this permit and is an offense subject to criminal prosecution, with a maximum penalty of a fine or deferral fee in lieu of fine not to exceed \$750 and/or imprisonment for not more than 60 days, plus applicable costs. \_\_\_\_\_ (initial)

I further certify that I understand that causing development to occur without a permit within an area of special flood hazard is a violation of city ordinance and federal law and may lead to criminal prosecution and/or civil regulatory action. \_\_\_\_\_ (initial)

I further certify that I understand that additional action may be required after issuance of this permit, including obtaining required inspections and/or submitting required documents. I understand that failure to take required action in a timely manner may be grounds for issuance of a "stop work" order, revocation of this permit, denial of a Certificate of Occupancy, termination of utility services, or other administrative action. \_\_\_\_\_ (initial)

I certify that I have read and understand the requirements for development within an area of special flood hazard contained in Chapter 16, Article IV of the Del City Code of Ordinances and in Chapter 44, Section 59.1 et seq. of the Code of Federal Regulations. \_\_\_\_\_ (initial)

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**(FOR STAFF USE ONLY)**

**SECTION 5: APPLICATION REVIEW**

APPLICATION COMPLETE: _____	CRITICAL FACILITY: _____	SECTION 404 PERMIT REQ: _____
FLOOD ZONE VERIFIED: _____	DESIGN EC REQUIRED: _____	ZERO-RISE REQUIRED: _____
BFE VERIFIED: _____	DETENTION REQUIRED: _____	CLOMR REQUIRED: _____
COST VERIFIED: _____	COMP. STORAGE REQUIRED: _____	PREVIOUS PERMIT COSTS: _____
CITY PERMIT SUBMITTED: _____	ENGINEERED FILL REQUIRED: _____	SI/SD REVIEW: _____
	ENGINEERED FOUNDATION: _____	

**REVIEW NOTES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(FOR STAFF USE ONLY)**

**SECTION 6: APPLICATION ACTION**

**DECISION**

- APPROVED
- DENIED
- RETURN FOR RESUBMISSION

**FEE:**

- \$0 CHANNEL MAINTENANCE ONLY
- \$25 SINGLE RESIDENTIAL LOT
- \$100 MULTIPLE RESIDENTIAL LOTS
- \$100 SINGLE NON-RESIDENTIAL LOT
- \$500 MULTIPLE NON-RESIDENTIAL LOTS
- \$1,000+ CLOMR, CHANNEL ALTERATION, OR ZERO-RISE

**STAFF SIGNATURE:** \_\_\_\_\_

**FURTHER ACTION REQUIRED:**

- APPLICANT TO SUBMIT ADDITIONAL DOCUMENTATION (SEE COMMENTS)
- APPLICANT TO CALL FOR INSPECTION ONCE GRADE IS ESTABLISHED
- APPLICANT TO SUBMIT ELEVATION CERTIFICATE BEFORE FINISHED FLOOR IS Poured
- APPLICANT TO SUBMIT ELEVATION CERTIFICATE ONCE FINISHED FLOOR IS Poured AND ALL EQUIPMENT SET
- OTHER \_\_\_\_\_

**CONDITION OR COMMENTS:**

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