

Village of Liverpool

310 Sycamore Street, Liverpool, NY 13088 Phone: (315) 457-3441, Fax: (315) 457-5119 Email: codes@villageofliverpool.org

Floodplain Development Permit Application

All applicable sections of this application must

OFFICE USE ONLY	
Permit Number:	Date Received:
Approved By:	Date Approved:
Date Notified:	Permit Fee: \$
Denied By:	Date Denied:
Reason Denied:	

be completed or the application	-			Reason Denie	ed:		
PROPERTY LOCATION & OWNER				J L			
PROPERTY ADDRESS					TAX MAP NO.		ZONING
PROPERTY OWNER		ADDRESS □ Same as above	ve		OWNER PHONE		
CITY		STATE	ZIP	OWNER EMAIL			
APPLICANT ☐ Same as above							
NAME					RELATIONSHIP TO OWNE	R	
ADDRESS					PHONE		
CITY		STATE	ZIP		EMAIL		
PROJECT DETAILS							
PROJECT TYPE	FIRM P	ANEL NUMBER		PROJECT IN OR A			OST OF ALL WORK
☐ Residential ☐ Commercial				☐ Lakeshor	e 🗌 Wetlands	\$	
DESCRIPTION OF PROPOSED WORK							
STRUCTURAL DEVELOPMENT							
PROJECT TYPE				STRUCTURE TYP	E		
☐ New Structure	□ Re	location		☐ Residenti	ial (1-4 Family) $\qquad \Box$	Commercial	
☐ Addition	□ De	emolition		☐ Residenti	ial (More than 4 Fami	ly)	
\square Alteration	☐ Re	placement		☐ Mixed Us	se (Residential & Com	mercial)	
OTHER DEVELOPMENT ACTIVITIES							
OTHER DEVELOPMENT ACTIVITIES CHOOSE ALL THAT APPLY							
☐ Excavation	☐ Fil	I		☐ Driveway	, Parking Lot, Street o	r Bridge Cons	struction
\square Grading	□ Dr	ainage Improvements	5		on (New or Expansion	_	
☐ Other (Please Specify):					, , , , , , , , , , , , , , , , , , , ,	,	
CONTRACTOR COMPANY NAME				NAME AND LICE			
COMPANY NAME				NAME AND LICE	NSE NOMBER		
ADDRESS				ADDRESS			
CONTACT NAME	PHONE			PROFESSION		PHONE	
FMAIL				RA P	PE U Other		
EMAIL				EMAIL			
APPLICANT CERTIFICATION							
I agree this permit is only for the w	ork des	scribed, and does not	grant p	ermission for a	additional or related v	vork that req	uires separate
permits. I hereby certify that the pr	ropose	d work is authorized b	y the o	wner, and that	t I am authorized by t	he owner to i	make this application
as his/her authorized agent. I agree				of the State of N	New York and the Villa	age of Liverpo	ool. All information on
this permit application is accurate							
Inspections Required: Applicant has required to verify compliance.	nereby	gives consent to the L	ocal Ac	dministrator or	his/her representativ	e to make re	asonable inspections
SIGN HERE		PRINT NAME			DATE		

Floodplain Development Permit Application Procedure Village of Liverpool

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A)	Comple	te all applicable sections of this application.
B)	Sign and	d date the bottom of the application.
C)		the following required items with your completed application: nay not be applicable to your project)
		A copy of the property survey.
		A site plan showing the location of all existing structures, water bodies, adjacent roads, lot dimensions and proposed development.
		Development plans, drawn to scale, and specifications, including where applicable: details for anchoring structures, proposed elevation of lowest floor (including basement), types of water resistant materials used below the first floor, details of floodproofing of utilities located below the first floor and details of enclosures below the first floor
		Also,
		Subdivision or other development plans (If the subdivision or other development exceeds 50 lots or 5 acres, whichever is the lesser, the applicant <u>must</u> provide 100-year flood elevations if they are not otherwise available).
		Plans showing the extent of watercourse relocation and/or landform alterations.
		Top of new fill elevationFt. NGVD (MSL).
		Floodproofing protection level (non-residential only) Ft. NGVD (MSL). For floodproofed structures, applicant must attach certification from registered engineer or architect.
		Other:
		Contractor Insurance Certificates with Village of Liverpool as certificate holder:
		General Contractor's Liability Insurance Certificate
		General Contractor's Workman's Compensation Insurance Certificate or exemption
		 Please Note: ACORD forms, while acceptable proof of General Liability Insurance, are NOT acceptable as proof of NYS Worker's Compensation Insurance or Disability Benefits Insurance coverage! General Contractor's Disability Insurance Certificate
D)	Typical	applications take 3-5 days to review.

- D
- All applicable inspections listed on the Building Permit are mandatory. Please call at least one day ahead to schedule inspections.
- F) Length of validity. Permits shall be valid for up to one year from date of issue. An extension may be granted provided that good cause is shown and an extension application is submitted prior to the end of the first year. An extension request may require review by the Zoning Board of Appeals. If at the end of two years substantial work has not been done, the permit shall expire and shall be null and void.
- G) Call 811 Before You Dig! You must call for a location request at least two working days but not more than 10 working days before any excavation starts.

Village of Liverpool

Floodplain Development Permit Application #: _____

Page 3 of 4

(TO BE COMPLETED BY FLOODPLAIN ADMINISTRATOR)

PART 1: FLC	ODPLAIN DETERMINATION
The Propos The The The 100-	ed development is located on FIRM Panel No, Dated ed Development: proposed development is reasonably safe from flooding. proposed development is in a flood prone area. Year flood elevation at the site is:Ft. NGVD (MSL)
SIGNED	DATE
PART 2: AD	DITIONAL INFORMATION REQUIRED
	A copy of the property survey. A site plan showing the location of all existing structures, water bodies, adjacent roads, lot dimensions and proposed development.
	Development plans, drawn to scale, and specifications, including where applicable: details for anchoring structures, proposed elevation of lowest floor (including basement), types of water resistant materials used below the first floor, details of floodproofing of utilities located below the first floor and details of enclosures below the first floor. Also,
	Subdivision or other development plans (If the subdivision or other development exceeds 50 lots or 5 acres, whichever is the lesser, the applicant <u>must</u> provide 100-year flood elevations if they are not otherwise available).
	Plans showing the extent of watercourse relocation and/or landform alterations.
	Top of new fill elevationFt. NGVD (MSL).
	Floodproofing protection level (non-residential only) Ft. NGVD (MSL). For floodproofed structures, applicant must attach certification from registered engineer or architect.
	Other:
_	
PART 3: PE	RMIT DETERMINATION
	mined that the proposed activity: A. Is B. Is not
	nce with provisions of Local Law #, (yr) is issued subject to the conditions attached to and made part of this permit.
SIGNED	DATE
If BOX A is o	hecked, the Local Administrator may issue a Development Permit upon payment of designated fee.

<u>If BOX B is checked</u>, the Local Administrator will provide a written summary of deficiencies. Applicant may revise and resubmit an application to the Local Administrator or may request a hearing from the Board of Appeals.

	ing date:		
Appe	eals Board Decision A	pproved? ☐ Yes ☐ No	
Cond	litions:		
PART 4: AS-BUI	LT ELEVATIONS (To be s	submitted by APPLICANT before Cert	rificate of Compliance is issued)
		vided for project structures. This sec r attach a certification to this applica	tion must be completed by a registered professional tion). Complete 1 or 2 below.
1.			ncluding basement (in Coastal High Hazard Areas, excluding piling and columns) is:FT.
2.	Actual (As-Built) Eleva	ation of floodproofing protection is _	FT. NGVD (MSL).
	NOTE: Any work perf	ormed prior to submittal of the abov	re information is at the risk of the Applicant.
PART 5: COMPL	LIANCE ACTION		
The LOCAL ADN			on inspection of the project to ensure compliance
The LOCAL ADN	MINISTRATOR will comp	d damage prevention.	on inspection of the project to ensure compliance DEFICIENCIES? ☐ YES ☐ NO
The LOCAL ADN with the comm	MINISTRATOR will compunity's local law for floo	d damage prevention. BY	DEFICIENCIES? YES NO
The LOCAL ADN with the comm	MINISTRATOR will compunity's local law for floo	d damage prevention. BY BY	DEFICIENCIES? YES NO
The LOCAL ADN with the comm	MINISTRATOR will compunity's local law for floo DATE DATE DATE	d damage prevention. BY BY	DEFICIENCIES? ☐ YES ☐ NO DEFICIENCIES? ☐ YES ☐ NO
The LOCAL ADN with the commit INSPECTIONS: PART 6: COMPLET THE LOCAL ADN	MINISTRATOR will compunity's local law for floo DATE DATE DATE DATE	BYBYBYBYBYBYBYBYBYBYBYBYBYBYBYBY_BY	DEFICIENCIES? ☐ YES ☐ NO DEFICIENCIES? ☐ YES ☐ NO
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Page 4 of 4