

## SPECIAL FLOOD HAZARD AREA LOCATION REQUEST FORM

In accordance with Executive Order V(2006), the Illinois Department of Public Health is required to ensure that construction projects located in Special Flood Hazard Areas meet the requirements of the State Flood Plain Regulations and the National Flood Insurance Program (NFIP) before a permit is issued. In order to determine if the proposed project is within a Special Flood Hazard Area, the information requested on this form must be completed. This form does not need to be completed if the construction project only involves such items as water wells, septic tanks, underground utilities, light poles, pavilions, playground equipment, and sidewalks or driveways built at grade as specified in Statewide Permit Number 6 (dated September 15, 1993 revised September 25, 2002) or Regional Permit Number 3 (dated July 25, 1990 revised May 15, 2003) whichever is applicable, issued by the Illinois Department of Natural Resources, Offices of Water Resources. However, the applicant may still need to meet NFIP or local flood plain regulations concerning these projects.

1. Requestor: \_\_\_\_\_  
(Name) (Address)

\_\_\_\_\_  
(City) (State) (Zip Code) (Telephone Number)

2. Project Location: \_\_\_\_\_  
(Address) (City) (State)

\_\_\_\_\_  
(County) (Township) (Section) (Attach a local street map with project location clearly indicated)

3. Description of Proposed Construction: \_\_\_\_\_

4. The following information must be completed by someone with a Flood Insurance Rate Map such as a building official or loan officer:

**THE PROPERTY DESCRIBED ABOVE IS LOCATED IN A SPECIAL FLOOD HAZARD AREA. Yes \_\_\_\_\_ No \_\_\_\_\_**

Name of map used: \_\_\_\_\_ Panel Number: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Official: \_\_\_\_\_ Title: \_\_\_\_\_

Business: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip Code) (Telephone Number)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** This finding only means that the property in question is or is not in a Special Flood Hazard Area as designated on the map noted above. It does not constitute a guarantee that the property will or will not be flooded or be subject to local drainage problems.

5. If **“NO”** was checked above in Part 4, return this form to the Illinois Department of Public Health, Division of Environmental Health, 525 West Jefferson Street, Springfield, IL 62761, so that review of the plans may proceed.

If **“YES”** was checked above in Part 4, submit a copy of this form along with the detailed plans to the local governing jurisdiction and a location map, site plan and plat of survey to the appropriate office of the Illinois Department of Natural Resources, Office of Water Resources. For projects located in Cook, DuPage, Kane, Lake, McHenry, and Will counties, submit the information to the Illinois Department of Natural Resources, Office of Water Resources, 2050 West Stearns Road, Bartlett, IL 60103, Telephone (847)608-3100, extension 2025. The required information for projects in all other counties shall submit the information to the Illinois Department of Natural Resources, Office of Water Resources, One Natural Resources Way, Springfield, IL 62702-1271, Telephone (217)782-3863.

### IMPORTANT NOTICE

THIS STATE AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED UNDER PUBLIC ACTS 77-1472, 77-1473, 78-715, AND 78-1149. DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION COULD RESULT IN A FINE UP TO \$1,000. THIS FORM HAS BEEN APPROVED BY THE FORMS MANAGEMENT CENTER.