



FLOODPLAIN DETERMINATION

FEE: \$10.00 / parcel

MAKE CHECK PAYABLE TO ADAMS COUNTY

As of February 9,1994, the Adams County Planning & Zoning Committee adopted the following policy for Flood Insurance Rate Map (FIRM) and Flood Insurance Study Map (FISM) determination requests. Floodplain determinations of the FEMA Flood Hazard maps or Flood Insurance Study maps will be provided promptly when a written request is received by the Planning & Zoning Department with the legal description of the property. Please fill out Part A and Part C of this form and return to:

Adams County Planning & Zoning Department
P.O. Box 187
Friendship, WI 53934 Or Fax to: (608) 339-4504

Part A

Property Owner(s):
Computer Number: Parcel Number:
The Property located at: 1/4, 1/4, Sec., T, N, R, E
Lot: Block: CSM: Addition: Subdivision:
Address (if any):
Town of

Part B

The date of the FIRM index: November 16, 1990
Adams County Community Number: 550001
The property is located on panel number:
The property is located in FIRM zone:
The date of the FISM: November 16, 1990
The property is located on FISM:
The property is located in FISM zone:

The main building on the property:
is not located in a Special Flood Hazard Area:
is located in a Special Flood Hazard Area:
A determination of the building's exact location cannot be made on the FIRM / FISM.
The base flood elevation at the property is:

Federal law requires that a flood insurance policy be obtained as a condition of a federally backed mortgage or loan that is secured by the building. Flood insurance is available in Adams County.

Note: This determination is based on either the Flood Insurance Rate Map of the County or the Flood Insurance Study Map, both dated November 16, 1990. This letter does not imply that the referenced property will or will not be free from flooding or damage. A property not in a Special Flood Hazard Area may be damaged by a flood greater than that predicted on the FIRM or FISM or from a local drainage problem not shown on the map. This letter does not create liability on the part of the County, or any officer or employee thereof, for any damage that results from reliance on this determination.

Zoning Administrator Date

Part C

Send completed form to: Name: Fax:
Address: