



Floodplain Development Permit Application
City of Pendleton - Planning Department
500 SW Dorion Ave, Pendleton, OR 97801
541-966-0204 • Fax: 541-966-0251
www.pendleton.or.us

Attach a copy of the Flood Elevation Certificate & Site Plan

LOCATION / DESCRIPTION OF SUBJECT PROPERTY		
Property Address:		
Map and Tax Lot:		
APPLICANT INFORMATION		
Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
OWNER INFORMATION		
Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
DESCRIPTION OF WORK		
STRUCTURAL DEVELOPMENT (Check all that apply)		
<input type="checkbox"/> Dwelling	<input type="checkbox"/> New	<input type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Remodel
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> New	<input type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Remodel
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other Structural Development <input type="checkbox"/> Relocation	
OTHER DEVELOPMENT ACTIVITIES (Check all that apply)		
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Electrical	<input type="checkbox"/> Plumbing
<input type="checkbox"/> Fill / Excavation / Grading (Amount: _____ cu. yds.)		
<input type="checkbox"/> Vegetation / Tree / Debris Removal		
<input type="checkbox"/> Stream Bank Alteration / Stabilization		
<input type="checkbox"/> Fence / Retaining Wall		
<input type="checkbox"/> Other Development Activity (specify)		
<input type="checkbox"/> Floodproofing (provide description of type and location of floodproof materials)		
SUBSTANTIAL IMPROVEMENT / SUBSTANTIAL DAMAGE		
a) Cost to repair structure to pre-damage condition:	\$ _____	
b) Cost of <u>all</u> proposed improvements (not just repair):	\$ _____	

Applicant Signature:

OFFICE ONLY	
c) Sub-total of a + b:	\$ _____
d) Current Market Value of Structure:	\$ _____
e) Sub-total / Market Value x 100:	_____ %

If line e) is 50% or greater, the project is a substantial improvement.
Substantial Improvement: ☐ Yes ☐ No ☐ New Structure

Department Use Only	
Permit No.	Date:
This project has final land-use approval:	

EXISTING STRUCTURE INFORMATION	
What year was the structure constructed? _____	
OTHER REQUIRED STATE / FEDERAL PERMITS	
Required for proposed work?: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Requiring Agency(ies):	
Permits approved?: <input type="checkbox"/> Yes <input type="checkbox"/> No	
FIRM PANEL INFORMATION	
Community: Umatilla County	Community No: 41059C
Panel Number: _____	Effective Date: September 3, 2010
Flood Zone(s) on Subject Property:	
Flood Zone at Project Site:	
Is the Project Site in a Floodway? <input type="checkbox"/> Yes <input type="checkbox"/> No	

DEPARTMENT USE ONLY	
ELEVATION & VENTING INFORMATION (For Structures)	
Base Flood Elevation (BFE): _____ <input type="checkbox"/> NGVD 29 <input type="checkbox"/> NAVD	
Lowest Floor Elevation: _____ <input type="checkbox"/> NGVD 29 <input type="checkbox"/> NAVD	
First Habitable Floor Elevation: _____ <input type="checkbox"/> NGVD 29 <input type="checkbox"/> NAVD	
Enclosed Area Below First Habitable Floor: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Area Enclosed: _____ square feet	
Number of Flood-Specific Vents: _____	
Total Area of Flood-Specific Vents: _____ square inches	
Total Area of Flood-Specific Vents: _____ square inches	
Mechanical Equipment Elevation: _____ <input type="checkbox"/> NGVD 29 <input type="checkbox"/> NAVD	
ASSOCIATED PERMITS	
Elevation Certificate Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Elevation Certificate Submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Building Permits on record: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Land Use Applications Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Land Use Applications Submitted w/ BFE's on Plat: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Annexation Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Floodproofing Materials Utilized: <input type="checkbox"/> Yes <input type="checkbox"/> No	
LOMC/LOMA/LOMR/LOMR-F on record: <input type="checkbox"/> Yes <input type="checkbox"/> No	

PERMIT ISSUANCE	
Permit No. _____	
Issue: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Finished Floor Inspection Performed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Final Inspection Performed: <input type="checkbox"/> Yes <input type="checkbox"/> No	

PARTITIONS/SUBDIVISIONS/MASTER PLANS/PUD'S		
Greater than 49 lots or 5 acres:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes", are BFE's clearly identified on Plat:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is 100-Yr Floodplain or Floodway Delineated:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

WATERCOURSE RELOCATION AND/OR LANDFORM ALTERATIONS		
Plans Submitted for relocation/alteration:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Water Elevation Change:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Water Elevation Change: _____ feet	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease
Amount of Fill: _____ square feet / acres	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease
Top of New Compacted Fill Elevation: _____ feet	<input type="checkbox"/> NGVD	

ITEMIZATION OF CONSTRUCTION COSTS TO COMPLETE PROJECT

	Work Description	Cost of Materials	Cost of Labor	Comments
1	Foundation/ Footings/ Pilings			
2	Concrete Slab			
3	Masonry Work			
4	Rough Carpentry			
5	Roofing and Gutters			
6	Insulation / Weather Stripping			
7	Exterior Finish (stucco / siding)			
8	Finished Carpentry			
9	Drywall			
10	Cabinets (built-in)			
11	Floor Covering			
12	Plumbing			
13	Bathroom Fixtures			
15	Kitchen Fixtures			
15	Electrical and Lighting Fixtures			
16	Built-in Appliances (water heater, furnace)			
17	HVAC or Gas System			
18	Paint and Wallpaper			
19	Demolition and Removal			
20	Overhead and Profit			
21	Construction Supervision			
	GROSS TOTAL = Contract Price			