



Application Form Floodplain Development Permit

447 East Main, Vernal, Utah 84078
www.vernalcity.org

Phone 435-789-2255
FAX 435-789-2256

ALL MANMADE ALTERATIONS OR ACTIVITIES IN A FLOODPLAIN REQUIRE A PERMIT
NO WORK OF ANY KIND MAY START UNTIL PERMIT IS ISSUED
OTHER PERMITS FROM OTHER GOVERNMENT AGENCIES MAY BE REQUIRED

SITE INFORMATION	
Address:	
County Parcel Number(s):	
Acreage:	Current Zone:

TYPE OF PROJECT OR DEVELOPMENT	
Required Submittals:	<input type="checkbox"/> Detailed Site Plan (drawn to scale) <input type="checkbox"/> Plat Map (from county recorder's office)
Description (be specific):	

APPLICANT	
Name:	
Address:	Daytime Phone:
	Evening Phone:
FAX:	email:
I certify that all information, including any attachments, is correct to the best of my knowledge.	
Signature:	Date:

OWNER (for multiple owners, use Multiple Owner supplementary form 302b)	
Name:	
Address:	Daytime Phone:
	Evening Phone:
FAX:	email:
I consent to this application and to allow Vernal City staff to enter the property for related site inspections.	
Signature:	Date:

FOR OFFICE USE ONLY

Application Number _____ Date _____ By _____
Required Fee _____ Paid Cross Reference _____



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DETERMINATION: TO BE COMPLETED BY THE FLOODPLAIN MANAGER

Proposed development is located on FIRM panel number:	dated:
Proposed development: <input type="checkbox"/> is <input type="checkbox"/> is not located in the regulatory floodplain.	Zone:
Description:	

Additional Submittals Required:

Conditions:

<input type="checkbox"/> I have determined that the proposed development is not in compliance with Vernal City Code. (see conditions block for explanation)
<input type="checkbox"/> I have determined that the proposed development is in compliance with Vernal City Code. This permit is issued to proceed with the development as described and in accordance with any conditions listed above.
Floodplain Manager Signature: _____ Date: _____

I have determined that the proposed development has been completed in accordance with the stated conditions.
Floodplain Manager Signature: _____ Date: _____

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