

# FEMA FLOOD MAP APPEAL / PROTEST SUBMISSION FORM

**Appellant Information:**

Full Name(s) of Appellant(s): \_\_\_\_\_

Company/Organization/Entity (if applicable) \_\_\_\_\_

Name of Representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Certifying professional:**

Full name of professional: \_\_\_\_\_

Company/Organization/Entity (if applicable): \_\_\_\_\_

License No. \_\_\_\_\_ Registered Professional Engineer Licensed Land Surveyor

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Site information:**

Twp: \_\_\_\_\_ Range: \_\_\_\_\_ Section: \_\_\_\_\_

Subdivision name \_\_\_\_\_ Lot #: \_\_\_\_\_ PIN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Is this property unimproved? Yes No

Existing FIRM Map Panel Number(s): \_\_\_\_\_

Proposed FIRM Map Panel Number(s): \_\_\_\_\_

**Has the Property Received:**

Letter of Map Revision Case Number \_\_\_\_\_

Letter of Map Amendment Case Number \_\_\_\_\_

Letter of Map Revision-Fill Case Number \_\_\_\_\_

Letter of Map Revision-Removal Case Number \_\_\_\_\_

Development Permit Permit Number \_\_\_\_\_

**Nature of Appeal or Protest (check only one):**

Refer to FEMA's publication: "Appeals and Protests to National Flood Insurance Program Maps" available at <http://www.ci.lancaster.oh.us/726/2016-Tarhe-Run-Map-Update>

This is a protest of the horizontal location, or contour, of the flood zone boundary on the FIRMs.

This is a protest to correct the identification of a street name that is mislabeled on the FIRMs.

• *Include a copy of a city map showing the correct street name.*

This is an appeal of base flood elevation (BFE) determinations

• *Choose one: scientifically incorrect BFEs or technically incorrect BFEs*

This is an appeal or protest (choose one) of any other aspect of the FIRMs or of the FIS.

• *Provide general description here:* \_\_\_\_\_**IMPORTANT: TWO SETS OF DOCUMENTATION MUST ACCOMPANY THIS SUBMISSION FORM****Appellant's Statement and Signature:**

I, the undersigned, attest that all of the above is true and accurate to the best of my knowledge, and that the two sets of documentation being submitted to make this appeal or protest are identical.

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

Print Name: \_\_\_\_\_

Appeals should be submitted to:  
Floodplain Administrator  
City of Lancaster  
121 E. Chestnut Street  
Suite 100 Lancaster, OH 43130