



# FILLING OF LAND PERMIT

ENGINEERING DEPARTMENT  
(920) 262-4060

OFFICE USE ONLY	
Approval Date:	_____
Fee Due (per chart below):	_____
Cash/Check #:	_____
Approved by:	_____
Receipt #	_____

**\*To be accompanied by plans/drawing depicting the location and area for approval.**

Address of Property: \_\_\_\_\_ Date \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Applicant Phone: \_\_\_\_\_

Approximate quantity of fill (in cubic yards): \_\_\_\_\_ Approximate fill area \_\_\_\_\_ sq. ft.

The permit fee shall be: Up to 500 cu. yds. - \$30 or ½ acre.

More than 500 cu. yds. - \$150 or ½ acre.

The applicant stated above is hereby permitted for the filling of land at the above-mentioned subject address in accordance with the rules and regulations set forth in the City of Watertown Code Section 253-52.

Permit shall expire one (1) year from the approval date.

The land may be filled to a reasonable grade with suitable material other than flammable materials, fly ash, foundry refuse, and similar materials. No natural drainage channels shall be blocked. Hours of filling shall be confined to 7:00 A.M. to Sunset, Monday through Saturday.

No filling will be allowed in the river floodway or designated wetlands.

During the progress of filling, the applicant shall maintain the area in a sanitary manner. Roadways to and across the fill site shall be treated to prevent dust nuisances.

Property owner is responsible for the filling operation.

**Applicant is required to contact the Engineering Department at (920) 262-4060 to request inspection once the project is complete. Failure to do so, may cause enforcement action to be taken per Code Section 253-59 as set forth by the City of Watertown ordinances.**

# CERTIFICATE OF FLOODPLAIN COMPLIANCE

## FILLING OF LANDS

This document is to be completed whenever filling of land is occurring on a parcel that contains lands that are identified to have floodplains according to FEMA FIRM panels.

<b>SECTION A – PROPERTY INFORMATION</b>				
Property Owner's Name:				
Property Street Address (including Apt., Unit, Suite, and/or Bldg. No.):				
City:	State:	Zip Code:		
Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.):				
<b>SECTION B - FLOOD INSURANCE RATE MAP INFORMATION</b>				
NFIP Community Name & Community Number:		County Name:		State:
Map/Panel Number:	Suffix:	FIRM Index Date:	Flood Zones(s):	Base Flood Elevation(s):
Methodology to determine Base Flood Elevation (FIS Profile, Hydraulic & Hydrologic Study, NR 116.07(4), etc.):				
Elevation Datum used for BFE (NGVD 1929, NAVD 1988, etc.):				
<b>SECTION C - DETERMINATION</b>				
<p>1. Is/will the filling of land occur within Floodway boundaries? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  <b>If YES, stop immediately and begin CLOMR-F process</b></p> <p>2. Is/will the filling of land occur within the Flood Fringe boundaries? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  <b>If Yes, please answer the following:</b></p> <p style="margin-left: 20px;">a. Does/will the filling of land comply with 44 CFR 60.3(c)? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">b. Does/will the filling of land comply with DHS-FEMA's Technical Bulletin 10-01? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">c. Does/will the filling of land comply with Wisconsin Statute NR 116? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">d. Does/will the filling of land comply with Watertown Statute 532-16 &amp; 532-18? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p><b>If NO was answered for a-d, please see the Floodplain Administrator</b></p> <p>3. Is/will the filling of land occur within Other &amp; General Floodplain Districts? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  <b>If Yes, please answer the following:</b></p> <p style="margin-left: 20px;">a. Does/will the filling of land comply with 44 CFR 60.3(b)? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">b. Does/will the filling of land comply with DHS-FEMA's Technical Bulletin 10-01? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">c. Does/will the filling of land comply with Wisconsin Statute NR 116? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">d. Does/will the filling of land comply with Watertown Statute 532-16, 532-19 &amp; 532-20? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p><b>If NO was answered for a-d, please see the Floodplain Administrator</b></p> <p>4. Has/will there to be no filling of land within any of the FEMA FIRM panel Floodplain Districts <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  <b>If Yes, please provide the following:</b></p> <p style="margin-left: 40px;"><input type="checkbox"/> Site Plan compliant with Watertown Statute 532-31B(2)</p> <p style="margin-left: 40px;"><input type="checkbox"/> Site Plan compliant with Wisconsin Statute NR 115.05(1)(b)(1)</p>				

**SECTION D – ENGINEER CERTIFICATION**

This certification is to be signed and sealed by a professional engineer registered in the State of Wisconsin. *I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable under Watertown Statute 532-46 & 532-47.*

Were the latitude and longitude in Section A provided by a Professional Land Surveyor?  Yes  No

Certifier's Name:		License Number:		Place Seal Here
Title:				
Company Name:				
Address:				
City:	State:	Zip Code:		
Signature:	Date:	Telephone:		

Comments:

**SECTION E – PROPERTY OWNER (OR OWNER’S REPRESENTATIVE) CERTIFICATION**

Property Owner or Owner’s Authorized Representative’s Name:				
Address:		City:	State:	Zip Code:
Signature:		Date:	Telephone:	

Comments:

**Please provide ALL supporting documentation.**