

**REQUEST FOR FLOOD ZONE DETERMINATION**

DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ FAX #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

(if you prefer the determination to be sent via e-mail)

**PROPERTY INFORMATION**

SUBDIVISION: \_\_\_\_\_ LOT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TAX MAP #: \_\_\_\_\_

IDENTIFYING INFORMATION: \_\_\_\_\_

\_\_\_\_\_

For a flood zone determination, please send a check in the amount of \$10.00 made payable to York County to: York County Environmental Compliance, ATTN: Tammy Marian, PO Box 96, York, SC 29745.