

**CITY OF MARGATE  
REQUEST FOR FLOOD ZONE DETERMINATION**

Date: .....

To: Department of Environmental and Engineering Services  
Please provide a flood zone determination for the property described below:

**Property Information:**

*Please print clearly, and provide all information. Incomplete or unreadable requests cannot be processed.*

Name .....

Address .....

City .....Margate..... State .....FL..... Zip Code.....

Phone ..... Fax .....

Legal Description: (if available).  
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**Flood Determination Response Methods (check only one):**

- Phone Message
- Letter (send via facsimile machine number listed)
- Letter (send via US Mail to address listed)

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**If the Letter is to be sent to a different address or company, please provide this information on the form below. Please print clearly, and provide all information. Incomplete or unreadable requests cannot be processed.**

Name .....

Company .....

Address .....

City ..... State..... Zip Code.....

Phone ..... Fax .....

\_\_\_\_\_  
Signature of Applicant

*The determination made shall be based on the Flood Insurance Rate Map (FIRM) for the City of Margate, Florida. Determinations do not imply the referenced property will or will not be free from flooding or damage. Properties not in Special Flood Hazard Areas may be damaged by a flood greater than that predicted on the FIRM or from a local drainage condition not shown on the map. This determination will not create liability on the part of the city, or any officer or employee thereof, for any damage that results from reliance on this determination.*

**Return Completed form to:**

City of Margate, Department of Environmental & Engineering Services  
901 NW 66<sup>th</sup> Avenue, Suite A  
Margate, FL 33063  
or **FAX to:** (954) 978-7349

*Office use only:*

Logged Sent Faxed  
Completed