



REQUEST FOR FLOOD ZONE DETERMINATION

Property Information

Please print clearly.

Owner's Name: _____

Property Address: _____

City: Margate State: Florida Zip Code: _____

Phone: _____ E-mail: _____

Legal Description (If Available):

Alternate Contact Information

If you would like the determination response sent to a mailing address other than the property address or to a company (for example, your flood insurance company), provide this information below. Please print clearly.

Company Name (If Applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Flood Zone Determination Response Method

Please indicate how the City of Margate should provide a response to your request.

Respond Using: ☐ Property Information

☐ Alternate Contact Information

Response Method (Select Only One): ☐ Mail

☐ E-mail

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 Flood Insurance Rate Map (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.

Applicant Signature

Date

Please return completed form to:

City of Margate

Department of Environmental & Engineering Services

901 NW 66th Avenue, Suite A, Margate, FL 33063

Or email form to: DEESAdmin@margatefl.com