



# FLOOD PLAIN DEVELOPMENT PERMIT APPLICATION

0405 Castle Creek Road, Suite 10 · Aspen, CO · 81611  
Phone: 970.920.5070 Fax: 970.920.5077

Permit # \_\_\_\_\_

Check # \_\_\_\_\_

Permit Fee: \$500.00 (non-refundable)
Revegetation/Restoration Bonding: \$ _____ (due at issuance of permit)

**WORK STARTED WITHOUT A PERMIT WILL BE CHARGED DOUBLE FEES**

**VALID PERMIT MUST BE KEPT ON SITE AT ALL TIMES**

THIS PERMIT IS REQUIRED FOR ANY WORK WITHIN THE DESIGNATED 100-YEAR FLOODPLAIN, INCLUDING BANK STABILIZATION, BRIDGES, DREDGING, INSTALLATION OF IRRIGATION EQUIPMENT, AND REVEGETATION.

1. Property Owner(s):

2. Applicant Name & Relation to Owner(s) (e.g., Project Architect):

3. Applicant Mailing Address:	3a. Applicant E-mail Address:
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4. Name of Project:	3b. Applicant Phone(s):
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5. Site Location:

6. Parcel Number:	6a. Zoning District:
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7. Flood Insurance Rate Map (FIRM) Floodplain District in Which the Project is Located:

7a. Panel #:	7b. Date of Floodplain Mapping:
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8. Description of Project:

9. Is any portion of the project complete?  YES  NO

9a. If yes, give reasons and date of construction.

10. Will the project disturb or result in the removal of any wetland or riparian vegetation?  YES  NO  
If yes, include a copy of your permit(s) from the U.S. Army Corps of Engineers. A mitigation & revegetation plan is also required if any wetland or riparian area is impacted by the project.

11. Permit Period Requested:

**12. Applicant/Owner(s) understands that issuance of a permit will be subject to compliance with specified terms and conditions. By Applicant's/Owner's(s) signature below, and by commencing work on the project, Applicant/Owner(s) agrees to comply with the terms and conditions of the permit, as issued.**

12a. Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

12b. Signature of Owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

Date Received:	Date Approved:	Environmental Health and Natural Resources Approval:	Land Management Approval (if necessary):
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**If Approved, See Below for Any Additional Terms and Conditions of Approval**

If Not Approved, Reasons for Denial:

**THIS FORM IS A PERMIT ONLY WHEN VALIDATED BY THE ENVIRONMENTAL HEALTH AND NATURAL RESOURCES DEPARTMENT**

**Additional Terms and Conditions of Permit (to be completed by EH/NR staff):**

\_\_\_\_\_ At the time of issuance of this permit you are required to post \$ \_\_\_\_\_ as financial security to ensure successful completion of your revegetation plan and/or restoration of the project site. These monies will be held for two growing seasons from the date of approval of this permit and will only be released at that time if a site visit by Pitkin County Environmental Health and Natural Resources and/or Land Management staff confirms that successful revegetation has been accomplished. Applicant is obligated to contact Pitkin County Environmental Health and Natural Resources (970.920.5070) to schedule the required two-year site visit. The monies will be forfeited if successful revegetation is not confirmed after two growing seasons, or if Applicant fails to timely schedule the required site visit.

\_\_\_\_\_ Documentation of decreed water rights is required to be submitted prior to issuance of this permit.

\_\_\_\_\_ Documentation of State Engineer approval is required to be submitted prior to issuance of this permit (in connection with construction/repair/alteration of a jurisdictional size dam).

\_\_\_\_\_ Documentation of filing of a Notice of Intent to Construct a Non-Jurisdictional Water Impoundment Structure is required to be submitted prior to issuance of this permit (in connection with a non-jurisdictional size dam).

\_\_\_\_\_ Other: