

City of Rockford, Illinois

Public Works Department
425 East State Street, Rockford, IL 61104
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Timothy Hanson
Director
Public Works Department

FLOOD HAZARD REDUCTION PERMIT APPLICATION
(To perform construction within a known floodplain)

(DATE OF APPLICATION)

(APPLICANT NAME) (PLEASE PRINT)

ENGINEER OR CONTRACTOR OR HOMEOWNER
(IS APPLICANT) (CHECK ONE BOX)

(IF REPRESENTIN A PROPERTY OWNER-GIVE NAME)

(APPLICANT ADDRESS) (PLEASE PRINT)

(ADDRESS)

(PHONE)

(PHONE) (FAX)

(APPLICANT SIGNATURE)

The above applicant hereby agrees to perform the work in accordance with the provisions and as set forth in Chapter 11-1/2 as revised, of the City of Rockford, Code of Ordinance. Traffic control will be in accordance with Chap. F of the Illinois Highway Standards Manual.

(DESCRIPTION OF WORK)

PLANS ATTACHED? IDNR PERMIT ATTACHED?

(LOCATION OF WORK - ATTACH LOCATION MAP)

CLOMA ATTACHED? IEPA PERMIT ATTACHED?

CLOMR ATTACHED? USACOE PERMIT ATTACHED?

(WORK IS LOCATED BETWEEN THESE TWO SIDE STREETS)

_____ THRU _____ a.m. _____ p.m.
(DATE WORK WILL BE DONE) (ESTIMATED WORK HOURS)

YES NO
(WILL TRAFFIC CONTROL BE PROVIDED?)

NOTE: SEPARATE PERMIT IS NEEDED IF GOING TO WORK WITHIN THE CITY STREET RIGHT-OF-WAY.

PROOF OF INSURANCE AND BOND WITH CITY REQUIRED

(\$25.00 Inspection fee) (INTERNAL PAY CODE 1010 61403)

(APPROVED BY) (PUBLIC WORKS DEPT.) (DATE OF APPROVAL) \$ _____ (FEE)

*SPECIAL CONDITIONS_