

**SANTA CRUZ COUNTY FLOODPLAIN MANAGEMENT**  
**2150 North Congress Drive, Room #117**  
**Nogales, Arizona 85621**  
**Office: (520) 375-7830      FAX: (520) 375-7846**

**FLOOD HAZARD INFORMATION SHEET – CITY OF NOGALES**

**TO BE COMPLETED BY REQUESTOR (ALL INFORMATION MUST BE PROVIDED):**

Property Address : \_\_\_\_\_  
 Property Tax Code : \_\_\_\_\_  
 Township: \_\_\_\_\_ Range: \_\_\_\_\_ Section: \_\_\_\_\_  
 Legal Description : \_\_\_\_\_  
 Requestor Name : \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_  
 FAX : ( ) - \_\_\_\_\_

**RETURN MAILING ADDRESS AND POSTAGE MUST BE PROVIDED ON REVERSE**

TO BE COMPLETED BY SANTA CRUZ COUNTY      Received \_\_\_\_\_ Code \_\_\_\_\_

- |   | *STATUS |
|---|---------|
| 1. The property is located in a Special Flood Hazard Area (SFHA) on a National Flood Insurance Program (NFIP) Flood Insurance Rate Map (FIRM)   | _____   |
| <b>-NFIP community #</b> : <u>040091</u>  |         |
| <b>-FIRM panel #</b> : _____  |         |
| <b>-date of FIRM panel</b> : _____  |         |
| <b>-LOMR/LOMA date</b> : _____  |         |
| <b>-FIRM zone</b> : _____   |         |
| 2. The <b>main</b> structure on the property is located in the SFHA indicated in (1)<br><b>NOTE:</b> Federal law requires that a flood insurance policy be obtained as a condition of a federally-backed mortgage or loan that is secured by a building located within a SFHA | _____   |
| 3. The property is located in a <b>Locally Regulatory Floodplain</b>  | _____   |
| 4. The property is located in a mapped <b>FLOODWAY</b> , where most uses are prohibited by Federal Regulations and local ordinance  | _____   |

\*STATUS KEY: Y = Yes, N = No, P = Partially, NA = Not applicable

**The above information is based on the best data resources currently available. Be advised that flood hazard status is subject to change without individual notice. This letter does not imply that the referenced property will or will not be free from flooding or damage. A property indicated as not being in a floodplain may be damaged by a flood greater than that which is regulated or by a local drainage problem that has not been identified or is not regulated. This letter does not create liability on the part of the provider, or any officer or employee thereof, for any damage that results from reliance on this determination.**

\_\_\_\_\_  
 Santa Cruz County Floodplain Management Signature

\_\_\_\_\_  
 Date

**Note:**

**FLOODPLAIN USE PERMIT REQUIRED IF CHECKED**

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-----FOLD ALONG LINES TO MAIL-----

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