Return Name & Address:

_____

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TITLE NOTIFICATION - SPECIAL FLOOD HAZARD AREA
Pursuant to SCC 14.34.110

Property Owner: FLORES JOE L
Legal Description: Sec 28 Twp 35 Range 4
Property I.D. #: P100542   **Tax Account #:** 4558-000-015-0004
Parcel Address or Location: 10664 DISTRICT LINE ROAD
Flood Hazard Zone: A7   **Firm Panel #:** 530151 0235   D
Base Flood Elevation: 42 M.S.L. or DEPTH   **Building Permit BP02-1180**

Notice: This parcel is located in a "Special Flood Hazard Area" as identified on the Flood Insurance Rate Map (FIRM) and as adopted by Skagit County. This parcel is subject to periodic flooding and may also be prone to other hazards caused by flooding. The Flood Disaster Protection Act of 1973 and the National Flood Insurance Reform Act of 1994 mandate the purchase of flood insurance as a condition of Federal or Federally related financial assistance for acquisition and/or construction of buildings in Special Flood Hazard Areas. Skagit County participates in the National Flood Insurance Program (NFIP) thereby making all properties eligible for flood insurance.

All new construction or substantial improvements to structures are subject to Skagit County Building Codes per SCC Title 15 and Skagit County Flood Damage Prevention Ordinance Title 14. Any building determined to be in violation of state or local floodplain management regulations or ordinances cannot be covered by flood insurance nor can an existing policy be renewed where violations occur. The Skagit County Planning and Permit Center maintains information related to state and local regulations, flood protection measures, flood hazard zones and in some cases potential flood depths.

Property Owner's signature _____

State of Washington, County of Skagit,
On this ___15___ day of ___October___, year of ___2002___ before me

___Judy Y Zavala___ Notary Public, personally appeared
_____ known to me to be the
person whose name is subscribed to this instrument, and acknowledged
that he/she executed it.

Witness my hand and official seal:
Notary's Signature _____ Notary Public in and for the State of Washington
residing at ___Burlington___ My Commission expires: ___10-1-05___