## **GRANT APPLICATION SUMMARY SHEET**

Grant Name:	MWS-Acquisition/Demolition of Four (4) Repetitive Loss Properties 21-24
Department:	WATER & SEWER
Grantor:	U.S. DEPARTMENT OF HOMELAND SECURITY
Pass-Through Grantor (If applicable):	TENN. EMERG. MGMT.
Total Applied For: Metro Cash Match:	\$669,952.50 \$95,707.50
Department Contact:	Antonette M. Plummer 862-4582
Status:	NEW

### **Program Description:**

To purchase and demolition of four (4) homes, which lie in a designated floodplain area of Davidson county. The four (4) addresses are 3907 Crouch Drive, 3001 Hummingbird Drive, 1152 Tuckahoe Drive, and 3900 Tucker Road. Once acquired and demolished the four (4) properties will be designated area as restricted-use public land. The funding for the acquisition/demolition of these properties is 75% Federal, 12.5% State and 12.5% Local match.

### Plan for continuation of services upon grant expiration:

The project will be complete on or before the expiration of the approved grant.

APPROVED AS TO AVAILABILITY	APPROVED AS TO FORM AND
OF FUNDS:	LEGALITY:

Lewin (rmbo/tlo	3/19/2021	Tara ladd	3/22/2021
Director of Finance	Date	Metropolitan Attorney	Date
APPROVED AS TO RIS INSURANCE:	SK AND		
Balogun Coll	3/22/2021		
<b>Director</b> of Risk Manage	ement Date		
Services			

### Grants Tracking Form

Pre-App	plication	0	Application	۲	Award Accept	tance O	Cont	tract Amendm	ient C		
	Departr	nent	Dept. No.			Contac	ct .			Phone	Fax
VATER & S	EWER	-	065	Antonette M. Pl	ummer					862-4582	862-4926
Grant N	lame:		MWS-Acauisitic	on/Demolition of I	our (4) Repetiti	ve Loss Pror	perties 2	1-24			
Granto			· ·	HOMELAND SECURIT	· / ·		•	Other:			
	Period Fr	om.	03/01/21		(applications only) A	nticipated Apr	lication [		02/01/21		
	Period To		02/28/24	-	(applications only) A			5410.	04/20/21		
		•			(applications only) A						
	g Type:		FED PASS THRU	•		Multi-Depa				<ul> <li>If yes, list</li> </ul>	below.
ass-Th			TENN. EMERG. MGM1			Outside Co		t Project:	✓		
Award '	Туре:		COMPETITIVE			Total Awar	'd:		\$669,952.50	_	
Status:			NEW	•		Metro Casi	h Match	:	\$95,707.50	_	
Metro C	Category	:	New Initiative	•		Metro In-K	ind Mate	ch:			
CFDA #	ŧ		97.039			Is Council	approva	al required?	<b>V</b>		
Proiect	Descrip	tion:				Applic. Submi	itted Elec	tronically?			
			ice after expirati or before the exp	•							
ixed A	mount o	•	ns of determinin	or g match:	10.0%	% of Gra	nt		Other:		
Fixed A	mount o	of \$	ns of determinin		10.0%	% of Gra	nt		Other:		
Fixed A Explana	ation for	f \$ "Other" mear		g match:		% of Gra	nt		Other:		
Fixed A Explana For this	ation for ation For	f \$ "Other" mean 'Y, how much	of the required	g match:	h match:	% of Gra		37039		TB	3D
Fixed A Explana For this s alrea	ation for ation for Metro F dy in dep	f \$ "Other" mean 'Y, how much partment bud	of the required	g match:			Fund	37039	Business Unit	TB	
Fixed A Explana For this s alrea s not b	Amount o ation for S Metro F Idy in dep oudgeted	f \$ "Other" mean Y, how much partment bud ?	of the required	g match: local Metro cas	h match: All		Fund Propose	ed Source of I	Business Unit Match:	TB MWS/Sto	
Fixed A Explana For this s alrea s not b Indicate	Amount o ation for S Metro F Idy in dep oudgeted	f \$ "Other" mean Y, how much partment bud ?	of the required	g match: local Metro cas	h match: All		Fund Propose	ed Source of I	Business Unit		
Fixed A Explana For this s alrea s not b ndicate Other:	Amount o ation for Metro F Idy in dep Judgeted e Match /	f \$ "Other" mean "Y, how much partment bud ? Amount & So	of the required get? urce for Remain	g match: local Metro cas	h match: All in Budget Belo	ow)	Fund Propose Request	ed Source of I ted from Cont	Business Unit Match: a. Match Fund:		
Fixed A Explana For this s alrea s not b ndicate Other: Number	Amount o ation for a Metro F ady in dep oudgeted e Match A r of FTEs	f \$ "Other" mean "Y, how much partment bud ? Amount & So s the grant wi	of the required get? urce for Remain Il fund:	g match: local Metro cas	h match: All in Budget Belo	ow) I	Fund Propose Request	ed Source of I ted from Cont positions add	Business Unit Match: a. Match Fund:	MWS/Sto	
Fixed A Explanation For this s alrea s not b ndicate Other: Number Departr	ation for ation for s Metro F dy in dep udgeted e Match / r of FTEs mental In	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant wi idirect Cost R	of the required get? urce for Remain II fund: tate	g match: local Metro cas ing Grant Years	h match: All in Budget Belo 0.00 20.50%	ow) i Actual nun Indirect Cor	Fund Propose Request nber of st of Gra	ed Source of I ted from Cont positions add ant to Metro:	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30	prmwater
Fixed A Explanation For this s alrea s not b ndicate Dther: Number Departr Indirec	ation for ation for dy in dep udgeted e Match / r of FTEs mental In ct Costs :	f \$ "Other" mean "Y, how much partment bud ? Amount & So s the grant wi idirect Cost R allowed?	of the required get? urce for Remain II fund: Cate O Yes () No	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0%	ow) I Actual nun Indirect Cos Ind. Cost R	Fund Propose Request nber of st of Gr. equeste	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto	prmwater
Fixed A Explanation For this s alrea s not b ndicate Dther: Number Departr Indirect If "No",	ation for ation for dy in dep udgeted e Match A r of FTEs mental In ct Costs a please at	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant wi idirect Cost R allowed? ttach documen	of the required get? urce for Remain II fund: tate	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0%	ow) I Actual nun Indirect Cos Ind. Cost R	Fund Propose Request nber of st of Gr. equeste	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30	prmwater
For this s alrea s not b ndicate Dther: Number Departr Indirec If "No", Draw do	Metro F ation for dy in dep udgeted e Match / r of FTEs mental In ct Costs o please at own allo	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant wi idirect Cost R allowed? ttach documen	of the required get? urce for Remain Il fund: tate Yes () No tation from the gr	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0%	ow) I Actual nun Indirect Cos Ind. Cost R	Fund Propose Request nber of st of Gr. equeste	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30	prmwater
Fixed A Explanation for this s alrea s not b ndicate Dther: Number Departr Indirec If "No", Draw do	Metro F ation for dy in dep udgeted e Match / r of FTEs mental In ct Costs o please at own allo	f \$ "Other" mean outher" mean partment bud ? Amount & So s the grant windirect Cost R allowed? ttach documen wable?	of the required get? urce for Remain Il fund: tate Yes () No tation from the gr	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0%	ow) I Actual nun Indirect Cos Ind. Cost R	Fund Propose Request nber of st of Gr. equeste	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30	prmwater
Fixed A Explanation For this s alrea s not b indicate Other: Number Departer Indirec (If "No", Draw do	Metro F ation for dy in dep udgeted e Match / r of FTEs mental In ct Costs o please at own allo	f \$ "Other" mean outher" mean partment bud ? Amount & So s the grant windirect Cost R allowed? ttach documen wable?	of the required get? urce for Remain Il fund: tate Yes () No tation from the gr	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al	ow) I Actual nun Indirect Cos Ind. Cost R Ilowable. See	Fund Propose Request nber of st of Gr. equeste	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30	prmwater
For this Explanation For this s alrea s not b indicate Other: Number Oppartr Indirect Indirect Indirect Indirect Indirect Indirect	ation for ation for dy in dep oudgeted e Match / r of FTEs mental In ct Costs a please at own allo or Comm	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant wi idirect Cost R allowed? ttach documen wable? unity-based F	of the required get? urce for Remain Il fund: tate Yes () No tation from the gr	g match: local Metro cas ing Grant Years % Allow.	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra	ow) I Actual nun Indirect Cos Ind. Cost R Ilowable. See	Fund Propose Request st of Gra- equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: or:	MWS/Sto \$156,960.30	in budg
Fixed A Explanation For this s alrea s not b ndicate Other: Number Oppartr Indirect If "No", Oraw do Metro o	Metro F ation for dy in dep udgeted e Match / r of FTEs mental In ct Costs o please at own allo	f \$ "Other" mean outher" mean partment bud ? Amount & So s the grant windirect Cost R allowed? ttach documen wable?	of the required get? urce for Remain Il fund: tate Yes () No tation from the gr	g match: local Metro cas ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al	ow) I Actual nun Indirect Cos Ind. Cost R Ilowable. See	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant	Business Unit Match: . Match Fund: ed:	MWS/Sto \$156,960.30 \$0.00	in budg Ind. Cos Neg. fro
For this For this s alrea s not b ndicate Dther: Number Departr Indirec If "No", Draw do Metro o	Metro F Metro F May in dep udgeted Match A r of FTEs mental In ct Costs o please at own allo or Comm	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant wi idirect Cost R allowed? ttach documen wable? unity-based F	of the required get? urce for Remain II fund: Cate Yes  No tation from the gr	g match: local Metro cas ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: or:	MWS/Sto \$156,960.30 \$0.00	in budge in budge
For this For this s alrea s not b ndicate Dther: Numbe Departr Indirec If "No", Draw de Metro o	Metro Fiscal Year	f \$ "Other" mean "Y, how much partment bud ? Amount & So s the grant wi iddirect Cost R allowed? ttach documen wable? unity-based F Federal Grantor	I of the required get? urce for Remain II fund: Rate O Yes O No tation from the gr Partners: State Grantor	g match: local Metro cas ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: ed: or: or:	MWS/Sto \$156,960.30 \$0.00 Indirect Cost to Metro	in budge in budge Ind. Cos Neg. froi Grantoi
Fixed A Explanation For this s alrea s not b ndicate Dther: Number Departr Indirect	Metro Fiscal Year Metro Fresh Metro Fresh Metro Fiscal Year Fy21	f \$ "Other" mean Py, how much partment bud ? Amount & So s the grant wi iddirect Cost R allowed? ttach documen wable? unity-based F Grantor \$0.00	I of the required get? Urce for Remain II fund: Cate O Yes INO tation from the gr Partners: State Grantor \$0.00	g match: local Metro cas ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash \$0.00	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: or: or:	MWS/Sto \$156,960.30 \$0.00 Indirect Cost to Metro \$0.00	in budg in budg Ind. Cos Neg. fro Granto
Fixed A Explanation For this s alrea s not b ndicate Other: Number Oppartr Indirect	Metro Fiscal Year Metro Fiscal Year FY21 FY22 FY23 FY_	f \$ "Other" mean Py, how much partment bud Amount & So s the grant windirect Cost R allowed? ttach documen wable? unity-based F Federal Grantor \$0.00 \$0.00	of the required get? urce for Remain Il fund: tate Yes  No tation from the gr Partners: State Grantor \$0.00 \$0.00	g match: local Metro cas ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash \$0.00 \$0.00	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: or: or: Total Grant Each Year \$0.00 \$0.00 \$765,660.00 \$0.00	MWS/Sto \$156,960.30 \$0.00 Indirect Cost to Metro \$0.00 \$0.00	in budg in budg Ind. Cos Neg. fro Granto
For this s alrea s not b indicate Departr Indirect Indi Indirect Indirect Indirect Indirect Indirect Indirect Indirect I	Metro Fiscal Year Metro Fiscal Year FY21 FY22 FY23 FY_ FY_ FY_	f \$ "Other" mean Py, how much partment bud Amount & So s the grant windirect Cost R allowed? ttach documen wable? unity-based F Federal Grantor \$0.00 \$0.00	of the required get? urce for Remain Il fund: tate Yes  No tation from the gr Partners: State Grantor \$0.00 \$0.00	g match: local Metro cass ing Grant Years % Allow. rantor that indirec	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash \$0.00 \$95,707.50	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: ed from Grant tions)	Business Unit Match: Match Fund: ed: or: or: Total Grant Each Year \$0.00 \$0.00 \$765,660.00	MWS/Sto \$156,960.30 \$0.00 Indirect Cost to Metro \$0.00 \$0.00	
Fixed A Explana For this is alrea is not b indicate Other: Number Departr Indirec (if "No", Draw de Metro o Budget Year Yr 1 Yr 2 Yr 3 Yr 4 Yr 5	Metro Fiscal Year Metro Fiscal Year FY21 FY22 FY23 FY_ tal	f \$ "Other" mean Partment bud Amount & So a the grant windirect Cost R allowed? ttach documen wable? ttach documen wable? Etach documen wable? stach documen wable? ttach documen wable? stach documen stach documen	of the required get? urce for Remain Il fund: tate Yes  No tation from the gr Partners: State Grantor \$0.00 \$0.00 \$95,707.50	g match: local Metro cass ing Grant Years % Allow. antor that indirec Other Grantor	h match: All 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash \$0.00 \$95,707.50	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: d from Grant tions) Local Match In-Kind	Business Unit Match: Match Fund: ed: or: or: Total Grant Each Year \$0.00 \$765,660.00 \$0.00 \$0.00 \$0.00	MWS/Sto \$156,960.30 \$0.00 \$0.00 <b>Indirect</b> Cost to Metro \$0.00 \$0.00 \$156,960.30	Ind. Cos Neg. froi Grantoi
Fixed A Explanation For this s alrea s not b indicate Other: Number Departr Indirect If "No", Draw de Metro of Budget Year Yr 1 Yr 2 Yr 3 Yr 4 Yr 5	Metro F Metro F Mation for Mation for Mation for Mation for Mation Metro Fiscal Year Fy21 Fy22 Fy23 FY_ FY_ Ty21 FY_ Ty21 Fy22 Fy23 FY_ Ty21 Fy21 Fy21 Fy22 Fy23 Fy21 Fy21 Fy22 Fy23 Fy21 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy21 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy22 Fy23 Fy23	f \$ "Other" mean Y, how much partment bud ? Amount & So s the grant windirect Cost R allowed? ttach documen wable? ☑ unity-based F Federal Grantor \$0.00 \$0.00 \$574,245.00	of the required get? urce for Remain Il fund: Late O Yes  No tation from the gr Partners: State Grantor \$0.00 \$0.00 \$95,707.50	g match: local Metro cass ing Grant Years % Allow. antor that indirec Other Grantor	h match: All in Budget Belo 0.00 20.50% 0.0% t costs are not al Part Two Gra Local Match Cash \$0.00 \$95,707.50	o Match So (Fund, E	Fund Propose Request st of Gra equeste a Instruct	ed Source of I ted from Cont positions add ant to Metro: d from Grant tions)	Business Unit Match: Match Fund: ed: or: or: Total Grant Each Year \$0.00 \$765,660.00 \$0.00 \$0.00 \$0.00	MWS/Sto \$156,960.30 \$0.00 \$0.00 <b>Indirect</b> Cost to Metro \$0.00 \$0.00 \$156,960.30	Ind. Cos Neg. froi Grantoi

Contact:

trinity.weathersby@nashville.gov vaughn.wilson@nashville.gov

Rev. 8/5/03

5207

GCP Rec'd 03/19/21

GCP Approved 03/19/21



Tennessee Emergency Management Agency
Hazard Mitigation Application

Hazard Mitigation A	pplica	ation				
		IS SECTION FOR STA MA DISASTER NUMBER:	ATE USE ONLY 4476			
FEMA Identification Number:			Tennessee Poi			
Tennessee Identification Nur				itigation Officer ergency Management Agency		
Date SHMO Received Applica			3041 Sidco Driv	re		
Date Council Reviewed/Appr	oved:		Nashville, Tenn Office: (615) 74			
5% Initiative:			Fax: (615) 24			
FEMA Application Submittal I	Date: _					
NOTE: Applica	ation n	nust be submitted in du	plicate and all maps	and photos must be in color.		
I. PROJECT OVERVIEW						
01. Sub-Recipient Legal Name:	Metr	opolitan Government o	of Nashville and David	dson County		
02. Sub-Category/Public Entity Or	ganiza	tional Unit: <u>Metro Wa</u>	ater Services			
03. Sub-Recipient Type:	Loca	l Government				
04. Will this be new application,	, new o	construction or part of	an ongoing project?	New Application		
05. Is this a Phased project?	No					
06. Federal Share (75%)	\$	574,245.00				
Non-Federal Match (25%):	\$	191,415.00				
Total Estimated Cost:	\$	765,660.00				
II. GENERAL INFORMATION						
<b>01.</b> Select the project type:	200.	1 Acquisition Private R	eal Property - Riverii	ne		
Project Name/Title:	MWS	-Acquisition/Demolitio	n of Four (4) Repetit	ive Loss Properties		
02. Select the HMGP project cates	gory fro	om dropdown list:		R - Regular		
03. DUNS Number:			078217688			
04. In what County(s) is the project	ct loca	ted?	Davidson			
05. Tax ID Number:	62-0	694743	FIPS Code:	037-52004		
06. U.S. Congressional District:	5	Congressman Name:	Jim Cooper			
State Senatorial District:	19	Senator Name:	Brenda Gilmore			
State Legislative District:	54	Representative Name				
Qı	lestion	07 - Is for STATE USE ON	LY during application re	eview		
07. If approved, is a Large Project	Notifi	cation required?		Yes No		
information contained herein is true a	nd corre	ct to the best of my knowledge	e. The governing body of th	ntained in the program guidelines and that all e applicant has duly authorized the document, ne assistance documented in this application.		

 Scott Potter
 Director, Metro Water Services
 (615) 862-4505

 Docusion of Authorized Representative/Applicant Agent
 Title
 Telephone Number

 Scott Potter
 2/17/2021
 Date Signed

Also, the applicant understands that the project may proceed ONLY AFTER FEMA GRANT APPROVAL is obtained.

### GENERAL INFORMATION (continued)

09. Does the Applicant have a current FEMA-approved Part 201 Sta	te/Tribal Hazaı	d Mitigation Pla	n ( <b>HMP</b> )?	Yes	
<b>10.</b> If yes, select the type of State/Tribal plan:	Standard	State Mitigation	Plan		
a. If yes, what is the approval date of the State/Tribal HMP?	a. If yes, what is the approval date of the State/Tribal HMP?				
b. If yes, what is the expiration date of the State/Tribal HMF	<b>?</b> ?		10/15/2023		
11. Does the State/Tribe have an approved HMGP Administrative P	lan for the disa	ster?	Yes		
a. If yes, what is the approval date of the HMGP Administrat	ive Plan?		09/28/2020		
12 Deveu as the Sub Designent have a surrent FEMA approved Le	al Upward Mitic	ation Dlan (UMD	222	Var	
<b>12.</b> Do you as the Sub-Recipient have a current FEMA-approved Loc				Yes	
<b>a.</b> If yes, what is the approval date of the local HMP?		May 12,			
<b>b.</b> If yes, what is the expiration date of the local HMP?		May 11,	2025		
<b>13.</b> If Yes, what is the name of the local Hazard Mitigation Plan?	Metropolitan	Nashville-Davids	on County		
<ol> <li>If your local plan has expired, will you be requesting an except due to extraordinary circumstances</li> </ol>	tion to the HMP	requirement	N/A		
a. Is the proposed project in mitigation plan strategies?			Yes		
<ul> <li>a. Is the proposed project in mitigation plan strategies?</li> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> </ul>	2, 7, 9, 12 & 29	Section/Part	Yes Chapter	5	
<b>b.</b> If yes, where in the mitigation plan strategies is	ge <u>12 &amp; 29</u>		Chapter	5 Yes	
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located?</li> <li>Page</li> </ul>	ge <u>12 &amp; 29</u>		Chapter		
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located?</li> <li>Page 15. Is the community a member of good standing with the National Page 15.</li> </ul>	ge <u>12 &amp; 29</u>		Chapter ?)?		
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> </ul>	ge <u>12 &amp; 29</u>		Chapter ?)? 07/26/1974		
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> </ul>	ge <u>12 &amp; 29</u> I Flood Insuranc	e Program (NFIF	Chapter ?)? 07/26/1974 037 470040		
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> <li>16. What is the Community Identification Number (CID)?</li> </ul>	ge <u>12 &amp; 29</u> l Flood Insuranc HA)? <u>Yes</u> If	e Program (NFIF	Chapter ?)? 07/26/1974 037 470040 IA Floodplain		
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> <li>16. What is the Community Identification Number (CID)?</li> <li>17. Is proposed project located in a Special Flood Hazard Area (SFI</li> </ul>	ge <u>12 &amp; 29</u> I Flood Insuranc HA)? <u>Yes</u> If (CBRS) unit and P	e Program (NFIF	Chapter ?)? 07/26/1974 037 470040 IA Floodplain	Yes	
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> <li>16. What is the Community Identification Number (CID)?</li> <li>17. Is proposed project located in a Special Flood Hazard Area (SFI 18. Is the proposed project located in a Coastal Barrier Resource System</li> </ul>	ge <u>12 &amp; 29</u> I Flood Insuranc HA)? <u>Yes</u> If (CBRS) unit and t rred?	ves, identify SFF	Chapter ?)? 07/26/1974 037 470040 HA Floodplain cted Area (OPA)?	Yes N/A N/A	
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> <li>16. What is the Community Identification Number (CID)?</li> <li>17. Is proposed project located in a Special Flood Hazard Area (SFI 18. Is the proposed project located in a Coastal Barrier Resource System If yes, has consultation with the Fish and Wildlife Service occur.</li> </ul>	ge <u>12 &amp; 29</u> I Flood Insuranc HA)? <u>Yes</u> If (CBRS) unit and f rred? lazard Area and	ves, identify SFF	Chapter ?)? 07/26/1974 037 470040 HA Floodplain cted Area (OPA)?	Yes N/A N/A	
<ul> <li>b. If yes, where in the mitigation plan strategies is the proposed project located? Page</li> <li>15. Is the community a member of good standing with the Nationa a. If yes, Date Established?</li> <li>b. If yes, what is your county code?</li> <li>16. What is the Community Identification Number (CID)?</li> <li>17. Is proposed project located in a Special Flood Hazard Area (SFI</li> <li>18. Is the proposed project located in a Coastal Barrier Resource System If yes, has consultation with the Fish and Wildlife Service occur</li> <li>19. If the location of the project is in an identified Special Flood H</li> </ul>	ge <u>12 &amp; 29</u> I Flood Insuranc HA)? <u>Yes</u> If (CBRS) unit and P rred? Jazard Area and	yes, identify SFF Otherwise Protection the structure re	Chapter ?)? 07/26/1974 037 470040 HA Floodplain cted Area (OPA)?	Yes N/A N/A	

### III. ADMINISTRATIVE INFORMATION (i.e. CONTACT INFORMATION) A. Application Prepared by:

A. /	applicat	ion Prepar	eu by.							
	Ms.	First Name	: Antone	tte			La	st Name: <mark>P</mark>	lummer	
	Title:	Administa	ative Servi	ice Officer 4		Organizati	ion:	Metro Wa	ter Service	es-Stormwater Division
	Street	Address: 1	1600 Secor	nd Avenue No	orth					
	City:	Nashville			State:	ΓN			Zip Code:	37208
	Phone:	(615) 862-	4582	Fax: (615)	862-4929	Mobile:			E-mail:	Antonette.Plummer@nashville.gov
		-		t is the perso	on respon	sible for c	oordi	nating the	implemen	tation of this proposal, if approval
	Ms.	First Name	: Antone	tte			La	st Name: P	lummer	
	Title:	Administr	rative Serv	vice Office 4		Organizati	ion:	Metro Wa	ter Service	es-Stormwater Division
	Street	Address: 1	1600 Secor	nd Avenue						
	City:	Nashville			State:	ΓN			Zip Code:	37208
	Phone:	(615) 862-	-4582							Antonette.Plummer@nashville.gov
				act is the pe	erson that	: can addr	ess q	uestions or	concerns	in the Primary Point of Contact's
	Mr.	First Name	: Tom				La	st Name: P	alko	
	Title:	Assistant	Director,	Stormwater		Organizati	ion:	Metro Wa	ter Service	25
	Street	Address: 1	1600 Secor	nd Avenue						
	City:	Nashville			State:	ΓN			Zip Code:	37208
	Phone:	(615) 862-	4510	Fax: (615)	862-4929	Mobile:	(615)	456-6870	E-mail:	Tom.Palko@nashville.gov

### D. Financial Point of Contact:

Ε.

The Financial Point of Contact is the person that can address questions/clarification of financial concerns, i.e., banking account, Edison automatic deposits, etc.

Ms.	First Name:	Amanda				Last Name:	Deaton-Moy	/er	
Title:	Assistant D	irector-Bu	isiness	& Finance	Organizatior	n: Metro W	ater Service	25	
Street	Address: 16	00 Second	l Avenu	le					
City:	Nashville			State:	TN		Zip Code:	37208	
Phone:	(615) 862-42	782	Fax: (	615) 862-4929	Mobile:		E-mail:	<u>Amanda.Deaton-</u> <u>Moyer@nashville.gov</u>	
	ed Applicant								
		-		IST be the cl ons or payme		e officer, m	ayor, etc.	This person must be able to sign	
Mr.	First Name:	Scott A.				Last Name:	Potter		
Title:	Director				Organization	: Metro W	ater Service	25	
Street Address: 1600 Second Avenue									
City:	Nashville			State:	TN		Zip Code:	37208	
Phone:	(615) 862-4	505	Fax: (	615) 862-4929	Mobile:		E-mail:	Scott.Potter@nashville.gov	

IV.	IV. HAZARDS TO BE MITIGATED											
a. 9	a. Select the primary hazard the proposed project will mitigate:											
		Drought		Flood		Mud/Landslide		Snow				
		Earthquake		Freezing		Mud/Landslide		Tornado				
		Fire		Land Subsidence		Severe Storm(s)		Windstorms				
		Other (list)										
<b>b.</b> 5												
		Biological		Earthquake		Land Subsidence		Special Events				
		Chemical		Fire		Mud/Landslide		Terrorist				
		Civil Unrest		Fishing Losses		Nuclear		Tornado				
		Crop Losses	$\square$	Flood		Severe Ice Storm		Toxic Substances				
		Dam/Levee Break		Freezing		Severe Storm(s)		Windstorms				
		Drought		Human Caused		Snow		Other (list below)				

# V. HISTORY OF HAZARD

**01.** Describe, in detail, the history of natural hazards in the proposed area. Include damage history, source and type of problem, frequency of events (s), severity of damage, etc. \*Please refer to Application Guidance Handbook for further guidance.

The four (4) properties Metropolitan Government of Nashville and Davidson County (Metro), Stormwater (SW) is proposing to acquire and demolish are located in the Whites Creek (3) and North Fork Ewing Creek (1) floodplain in Davidson County. The four (4) properties, respectively, are 1) 3907 Crouch Drive, Nashville, TN 37207, 2) 3001 Hummingbird Drive, Nashville, TN 37218, 3) 1152 Tuckahoe Drive, Nashville, TN 37207, and 4) 3900 Tucker Road, Nashville, TN 37218. Three (3) properties are in the Haynes Estates community located between Whites Creek Pike and Clarksville Pike and are located in the Whites Creek floodplain. One (1) property is in the Bellshire Trace community located between Brick Church Pike and Dickerson Pike and is located in the North Fork Ewing Creek floodplain. These properties have suffered flooding events in from May 2009 thru September 2017 and are listed with flood claims as follows;

1. 3907 Crouch Drive, Nashville, TN 37207; 08.31.2017 - \$31,542.33 / 08.08.2013 - \$10,040.48 / 05.02.2010 - \$23,717.24

- 2. 3001 Hummingbird Drive, Nashville, TN 37218; 08.31.17 \$12,762.10 / 05.02.2010 \$62,673.14
- 3. 1152 Tuckahoe Drive, Nashville, TN 37207; 05.01.2010 \$11,015.61 / 05.09.2009 \$8,540.94
- 4. 3900 Tucker Road, Nashville, TN 37218; 08.31.2017 \$16,195.86 / 05.02.2010 \$61,948.39

# V. HISTORY OF DAMAGES

**01.** The Hazard Mitigation Grant Program (HMGP) is designed to permanently eliminate or significantly reduce the damages caused by natural hazards. This is measured through a Benefit Cost Analysis (BCA). Cost beneficial projects show, through documented past damages and/or engineered damages saved, that the proposed activity's cost will be less than the anticipated future damages that would occur if the project were not implemented. If a BCA has been performed on this project, please provide: Benefit Cost Ratio <u>N/A</u> include documentation supporting data used for the BCA.

As mentioned above, to perform the BCA, actual damage history or projected damages saved through engineering studies are used. The BCA software is driven by determining annualized losses expected during varying flood events, such as the 1-, 2-, or 5- year event. There must be a minimum of two (2) known or three (3) unknown events. Of course, the more events that can be listed, the better. In addition, the events must have taken place in different years. For example, if damages occurred from a 1-year event in June 2010 and a 5-year event in August 2010, you would only use one of the two events. Likewise, two 1-year events in 2011 could not be used; only one of the events would be listed. A good example would be one 1-year event in 2010, one 2-year event in 2009, and one 5-year event in 2007.

NOTE: Most people assume higher event levels calculate more annualized damages. This is not the case. Lower event levels that occur more frequently provide better BCA results.

When compiling the damages, remember to consider both direct and indirect costs. Direct costs include structural damage, content damage, repair work that is contracted, etc. Indirect costs include time missed from work, additional miles traveled due to road closure, emergency rescue services, etc. As the cost of the project must be justified for your proposal to even be considered, it is imperative to disclose as much information as possible - and essential that dollar amounts be given.

The following provides for three events. If more events are known, attach them on a separate sheet to this section. If there are damages that have been incurred that are not listed here, please add them.

### EVENT ONE

1. Lev	el of Event (if known): N/A	Date of Flood (Month, Year):	
Α.	Residential Losses (make copies as needed)		
	Property Owner(s) Name:		
	Property Address (No PO or Route No.):		
	City:	City: Zip Code:	
	Year Built: Building Type:		
	Basement: Foundation Type:		
	Type of Residency:		
	If rental, how many units?	Total Floor Area (in square feet):	:
	Depth of Flooding in structure?	Cost incurred due to displacement?	\$ 0.00
	Dollar value of structure damage? \$	0.00 Dollar value of content damage?	\$ 0.00
	Cost incurred due to inability to work? \$		\$ 0.00
EVENT	тwo		
2. Lev	el of Event (if known): N/A	Date of Flood (Month, Year):	
Α.	Residential Losses (make copies as needed)		
	Property Owner(s) Name:		
	Property Address (No PO or Route No.):		
	City:	City: Zip Code:	
	Year Built: Building Type:		
	Basement: Foundation Type:		
	Type of Residency:		
	If rental, how many units?		:
	Depth of Flooding in structure?	Cost incurred due to displacement?	
	Dollar value of structure damage? \$	0.00 Dollar value of content damage?	

	Cost incurred due to inability to work?	\$	0.00	Other Costs (specify below)?	\$	0.00
--	---	----	------	------------------------------	----	------

### EVENT THREE

3. Level of Event (if known): N/A	Date of Flood (Mo	nth, Year):	
A. Residential Losses (make copi	vies as needed)		
Property Owner(s) Name:			
Property Address (No PO or Ro	oute No.):		
City:	City:	Zip Code:	
Year Built: Building	g Type:		
Basement: Foundation	on Type:		
Type of Residency:			
If rental, how many units?	Total Fl	oor Area (in square feet):	
Depth of Flooding in structure?	? Cost incurre	ed due to displacement? _\$	0.00
Dollar value of structure dama	age? <mark>\$ 0.00</mark> Dollar value	e of content damage?\$	0.00
Cost incurred due to inability t	to work? <mark>\$ 0.00</mark> Other C	osts (specify below)? \$	0.00

For multiple properties please attach HMGP - Homeowners BCA Damage History sheets for each property.

#### SEE ATTACHEMENT

**Note:** If a property is located in Special Flood Hazard Areas (SFHA) and is valued at less than or equal to \$276,000 the acquisition of said property is pre-determined to be cost effective and a benefit cost analysis (BCA) will not be required. If this project contains multiple properties, the average cost of all properties meets the stated criterion.

#### 02. Additional Comments

Enter any additional comments related to the proposed project's history of damages if desired.

N/A - Benefit Costs Analysis is a requirement for this application. The costs to acquire each property are at or bleow \$276,000.00 to acquire at fair market value, are on the Repertitive Loss List and in the floodplain or floodway. Mitigation Directorate - This memorandum supersedes the August 15, 2013 version.

# VI. SCOPEOF WORK (i.e. PROJECT DESCRIPTION)

**01.** Describe, in detail, the proposed project. Explain how the proposed project will solve the problem(s) and provide the level(s) of protection. Include a description of the desired outcome and methodology of the mitigation activity in terms of mitigation objectives to be achieved.

Instructions: Do not generalize, but address the specific benefits (e.g., who, what, how, where and when).

Note: A well defined SOW can also help expedite the technical review process to include the Environmental and Historic Preservation Review. Be explicit and concise; assume that the reader has no knowledge of your situation or your community. Tie past damage history events to the proposed mitigation project.

The purchase (at fair market value after approval of this application) and removal of the three (3) residental structures located in the Whites Creek floodplain and one (1) structure located in the North Fork Ewing Creek are all in Davidson County. Each of these properties suffered damage from a combination of four (4) floods in 2009, 2010, 2013 and 2017. By pursuing this course of action, the property owners will find relief from any future flood damage and there will be no future damage claims to burden the NFIP. Also, the emergency response agencies of the Metropolitan Government will not be as taxed during and after a flood event affecting the desingate area. The land where the acquisition and demolition occurs will become restricted-use public land.

THE COSTS TO ACQUIRE THESE PROPERTIES FOR THIS APPLICATION PURPOSE IS USING THE ASSESSED VALUE FROM THE METRO TAX ASSESSOR PROPRETY VALUATION. THE ACTUAL COSTS TO ACQUIRE THE FOUR (4) PROPERTIES WILL BE DETERMINED BY AN APPRAISAL ONCE THE PROJECT IS APPROVED BY FEMA AND WILL BE MORE THAN THE ASSESSED VALUE OF THE PROPERTY IN THIS APPLICATION.

Insert additional page if needed

## VI SCOPE OF WORK (i.e. PROJECT DESCRIPTION) (continued)

### 02. Site

### a. <u>Physical Location</u>

Provided a description of the area and population that the project will directly affect? (The description should be consistent with population numbers used in the BCA.)

Describe the area and population affected/protected by this project, including location.

There are four (4) properties in this application and are as follows;

1. 3907 Crouch Drive, Nashville, TN is in the northwest part of Davidson County. This property is located in Haynes Estates Manor area.

2. 3001 Hummingbird Drive, Nashville, TN is in the northwest part of Davidson County. This property is located in the Haynes Estate Manor area.

3. 1152 Tuckahoe Drive, Nashville, TN is in the northeast part of Davidson County. This property is located in Bellshire Terrace area.

4. 3900 Tucker Road, Nashville, TN is in the northwest part of Davidson County. This property is located in the Haynes Estates Manor area.

#### b. <u>Population Affected</u>

Provide the percent of the population benefiting from this mitigation activity. Explain your response.

### Be sure to specify your methodology of your calculation (EXAMPLE: Census data and the CAPS System, Version 10C.)

Not only would this mitigation activity benefit the current property owners by removing them from the floodplain and taking them out of harms way, it would also benefit Metropolitan Government of Nashville and Davidson County by allowing Metro services to assist other individuals in need of assistance.

c. Fill in the level of protection the proposed project will provide (23 structures protected against the 100-year (1%) flood). List data in Flood Levels (10, 25, 50, 100, 500 ... ).

4 structures protected against the 100 year flood event

structures protected against the

### d. Ground Depth Disturbance

Will there be any disturbance of ground? \_\_\_\_\_\_ Explain your response below and note the depth below.

The only ground disturbance that is aniticpated to take place for the four (4) properties is during the demolition of the properties. The ground disturbance is subject to the slab on grade foundation, patio, sidewalks, and driveways (if applicable). The ground disturbance will be minimal. It is anticipated the depth of the concrete is approximately 3 inches.

#### e. <u>Backfill</u>

What type of backfill will be used, and where will it come from to replace/fill any ground disturbance due to construction or the installation of material.

The backfill that will be used in the event of ground disturbance during demolition for slab on grade, patio, sidewalks, and driveways (if applicable) will be clean dirt. Clean dirt means the backfill will not contain rocks, concrete, etc.

## VI. SCOPE OF WORK (i.e. PROJECT DESCRIPTION) (continued)

### 03. Decision-Making Process

Describe the **process** you used to decide that this project is the best solution to the problem. Explain **why** this project is the best alternative. This should coincide with information supplied in Alternative Actions. Address the following questions:

- Are you focusing on the area in your community that has the greatest potential for losses?
- Have you considered the risks to critical facilities and structures and benefits to be obtained by mitigating this vulnerability?
- Have you considered those areas or projects that present the greatest opportunities given the current situation and interest in your community?
- Are you addressing a symptom or the source of the problem? Addressing the source of the problem is a long-term solution which provides the most mitigation benefits.

If impacts to the environmental/historic preservation, natural, cultural or historic resources have been identified, explain how your alternatives and proposed project address, minimize, or avoid these impacts.

Metro has begun an extensive effort to acquire properties along various streams and in designated floodways and floodplains that suffered catastrophic property damage during the flood of early May, 2010 in Nashville/Davidson County. There are three (3) options considered before choosing acquisition and demolition. Option A (acquisition/demolition) was the chosen method. Option B would be to take no action whatsoever. This option, if chosen, does not alleviate the problem of repetitive flooding in any manner. Flood losses would continue, placing a financial strain on property owners, local government resources and the National Flood Insurance Program. Option C would be to elevate the affected houses. This option would protect the houses from being damaged during a flood; however, other hazards would remain for the property owners in the event of a flood. The cost associated with elevating the existing structures would be at least \$60,000.00 per structure. This is a very conservative estimate that does not take into account the massive structural damage which the affected properties have already suffered. Option A (acquisition/demolition) has been selected as the most efficient, cost effective method of dealing with the flooding situation. It is the only method to completely alleviate all factors associated with repetitive flooding. Once the property is acquired and the structures demolished, the land will be restricted-use public property. Metro selected properties for this application that are in the floodplain of Whites Creek and North Fork Ewing Creek and are on the National Flood Insurance Program (NFIP) Repetitive Loss (RL) List. This area of Metro has the greatest potential for losses. Metro has considered the risks to critical facilities and structures and benefits to be obtained by mitigating the vulnerability of flooding. This application given the current situation is in the best interest of Metro and the property owners. By acquiring and demolishing these properties Metro will address the source flooding of Whites Creek and North Fork Ewing Creek. If Metro decided to take no action repetitive losses and flood claims would still occur. Elevation would not be feasible; the costs to elevate the structures would not solve the flooding problem this area currently has.

04. Maps Please attach the following maps with the project site <u>and structure(s)</u> marked on the map.

#### \*FEMA REQUIRES MAPS TO BE IN COLOR

Flood Insurance Rate Map (FIRM). If the FIRM for your area is not published, please attach a copy of the Flood Hazard Boundary Map (FHBM). See **Appendix** 

City of county scale map (large enough to show the entire project area). See Appendix

- USGS 1:24,000 topo map See Appendix
- Parcel Map (Tax Map, Property Identification Map, etc.) See Appendix

Overview photographs. The photographs should be representative of the project area, including any relevant streams, creeks, rivers, etc., and drainage areas which affect the project site or will be affected by the project. **See Appendix** 

# VI. SCOPE OF WORK (i.e. PROJECT DESCRIPTION) (continued)

The following table should be a compilation of all properties to be included in the proposed project. In the Property ID# column, assign a unique ID number to each property in the project (i.e., Property # 01, 02, 03, etc.) and refer to this number in the information listed under Individual Property Worksheets on the following page.

Prop. ID#	Property Owner	Addresses	Latitude	Longitude
01	Cunningham, Keisha	3907 Crouch Drive, Nashville, TN 37207	36.222152	-86.819003
02	Scheibe, Steven D.	3001 Hummingbird Drive, Nashville, TN 37218	36.218809	-86.821244
03	McGill, Carl Y. & Keith E.	1152 Tuckahoe Drive, Nashville, TN 37207	36.260803	-86.762976
04	Scheibe, Steven D.	3900 Tucker Road, Nashville, TN 37218	36.213684	-86.825429

Insert property worksheets, photos, and tax card, for each listed property behind this page.

### VII. SCOPE OF WORK / COST REVIEW (continued)

### 01. Acquisition

In this section, provide the details of all costs of the project. For estimates, reasonable projections are essential. (property worksheet

a. Estimated Pre-Event Fair Market Value	\$	431,200.00			
b. Estimated Cost for Demolition	\$	280,000.00			
c. Estimated Cost for Structure Relocation	\$	0.00			
d. Estimated Appraisal Cost	\$	4,000.00			
e. Estimated Closing Costs/Legal Fees	\$	14,000.00			
f. Uniform Relocation Assistance	\$	0.00			
g. Comparable Housing	\$	0.00			
h. Other (specify below)	\$	36,460.00	i. Total of A-H	Ş	765,660.00
Management Costs					
j. Program Income	\$	0.00			
k. Duplication of Benefits	\$	0.00	l. Total of J-K	\$	0.00
m. Subtract l. from i. to determine Total Cos	t to Acqu	ire Property	\$		765,660.00

# Please note there is a property worksheet for each individual property associated with this grant application to support the above referenced cost.

#### 02. Management Cost

As a subrecipient, you are eligible for management costs. Management Cost is identified as eligible and reasonable indirect cost, direct administrative cost, and any other administrative expense associated with your project. It is calculated based on five (5%) of the overall total project cost items (A-G=). You will be required to report your management costs expenditures on each quarterly report, or you can list it as a project line item such as supplies or salaries. If you wish to apply for management cost, please enter the amount on (h. Other). I you choose to decline the offer check the following box  $\square$ , initial here \_\_\_\_\_\_, and complete the **OPT-OUT FORM.** See **Appendix** 

#### 03. Demolition Cost

a. Materials (indicate if item will be used as in-kind)

Item	Dimension	Quantity	Cost per Unit		Cost
N/A			\$	0.00	\$ 0.00
			\$	0.00	\$ 0.00
			\$	0.00	\$ 0.00
			\$	0.00	\$ 0.00
			\$	0.00	\$ 0.00
			Total	Material Cost	\$ 0.00

### b. Labor - include equipment costs - (indicate if item will be used as in-kind)

Description	Hours		Rate	Cost
N/A		\$	0.00	\$ 0.00
		\$	0.00	\$ 0.00
		\$	0.00	\$ 0.00
		\$	0.00	\$ 0.00
		\$	0.00	\$ 0.00
Total Labor Cost				\$ 0.00

# VII. SCOPE OF WORK / COST REVIEW (continued)

c. Fees Paid (include any other costs associated with the project, i.e., permit costs, asbestos/lead paint test and abatement, etc.)

Description	Hours	Rat	e	(	Cost
N/A		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
Total Fee Cost				\$	0.00

### d. Total Demolition Cost (a+b+c)

\$

### 03. Total Project Cost (A+B)

75% Federal Share:	\$ 574,245.00
25% Non-Federal Match:	\$ 191,415.00
Proposed Project Total Cost:	\$ 765,660.00

### 6. Non-Federal Funding Share (25% of Total Cost)

List all sources and amounts utilized in the non-federal share including all in-kind services. In-Kind services may not exceed the 25% non-federal share. If any portion of the non-Federal share will come from non-applicant sources (donated services, private donation, etc.), attach letters of funding commitment for each non-applicant source.

Source	Name of Source Agency	Type Funding	Amount	Commitment Letter Attached
State	Tennessee Emergency Management Agency	Cash	\$ 95,707.50	••••
Local	Metropolitan Government of Nashville and Davidson County, Metro Water Services	Cash	\$ 95,707.50	Yes
•••		•••	\$ 0.00	•••
•••		•••	\$ 0.00	•••
•••		•••	\$ 0.00	•••
•••		•••	\$ 0.00	•••
		Subtotal	\$ 191,415.00	

Source Agency = Specific entity providing match

### Describe how you will manage the costs and schedule, and how you will ensure successful performance.

The mitigation activity will be implemented following the rules and regulations set forth by HMA specific to HMGP, as well as State and Local regulations. MWS, Stormwater Division will be responsible for managing and completing the mitigation activity, once the project is approved. One employee is designated to oversee the management and complete the project.

VIII.

### TIMELINES AND MAINTENANCE

01. Work Schedule Timeline Note: Indicate timeframe in the form of months or years.

Insert the proposed work schedule (in days) in phases, i.e., engineering, appraisals, title search, closing, construction, etc., and provide a description of the phases purpose regarding the proposed project. This timeline will be used as a measurement tool for progress in the project's implementation and is included in the required Quarterly Reports. Due to the length of Tennessee's state contract process, the first and last entry has already been made for generating funds and closeout purposes.

A. Task 01:	Tennessee State Contract Process	Timeframe:		6-Months
	The State contract is the State's legal mechanism required to ensure funding or services to the applicant. The timeframe reflects up to a 6-month period.			
Task 02:	Appraisals	Timeframe:		3-Months
	Metro has an independent appraiser under contract to complete this task.	Cost	\$	2000.00
Task 03:	Acquisition of Properties	Timeframe:		8-Months
	Metro has an independent closing attorney under contract to complete this task.	Cost	\$	234700.00
Task 04:	Closing Costs/Attorney Fees	Timeframe:		1-Month
	Metro has an independent closing attorney under contract to complete this task.	Cost	\$	7000.00
Task 05:	Termination of Water and Sewer	Timeframe:		3-Months
	Metro System Service will complete this task.	Cost	\$	20000.00
Task 06:	Environmental Assessment	Timeframe:		3-Months
	Metro has several independent firms under contract that will bid to complete this task.	Cost	\$	10000.00
Task 07:	Abatement	Timeframe:		3-Months
	Metro has several independent firms under contract that will bid to complete this task.	Cost	\$	10000.00
Task 08:	Demolition	Timeframe:		3-Months
	Metro has an independent firms under contract that will bid to complete this task.	Cost	\$	100000.00
Task		Timeframe:		
		Cost	\$	0.00
	State Compliance Review & Project Closeout	Timeframe:		6-Months
documentat financial re are comple	es the State's Compliance Review is a review of the activity's paper tion, showing the project was implemented as required. As well as the conciliation, and Final Site Visit. Once all aspects of the compliance review te, a report and findings will be provided to the sub-recipient for review concurrence.			
	will submit the signed concurrence to FEMA as part of the state closeout ckage for review and concurrence with the States findings and to formally rant.	Total Timeframe:		36-Months
	Total Timeframe (must not exceed 1,095 days, 36 months, or 3 years)	Total Cost	\$	765,660.00
02. Does th	ne Work Schedule accurately reflect the description of the mitigation activit	ty provided in th	ne SO	W, and are

**02.** Does the Work Schedule accurately reflect the description of the mitigation activity provided in the SOW, and are milestones and associated timeframes reasonable and complete? <u>Yes</u>

## VIII. TIMELINES AND MAINTENANCE (continued)

### 03. Maintenance

The following questions are to give assurance on the project's maintenance over its useful life. Please answer each question and give a brief explanation.

a. Will the project require planting of trees and/or other plants to restore native vegetation or grading for stream/floodplain restoration?

b. What is the proposed land use after acquisition? (i.e., Agriculture, Recreation, Vacant Land, Park, Wetlands, etc.) The proposed land, once acquired and demolished, will be returned to its natural state and remain open space.

c.	Are site restoration plans included?		
d.	Will the project require periodic maintenance?		Yes
e.	Who will provide the maintenance?		
f.	What is the cost of maintenance on an annual basis?	Ş	0.00

### 04. Additional Comments

Enter any additional comments related to the proposed project's funding, if desired.

Metro Parks will be responsible for mowing the four (4) properties included in this application. Metro Water Services (MWS) is responsible for overseeing the maintainance of these properties.

### **IX.** ALTERNATIVE ACTIONS

List three practicable alternatives (one can be the preferred action i.e. proposed projection, a feasible alternate, and no-action) clearly described each action

### 01. Preferred (i.e.) Proposed Project

1. Acquisition/demolition has been selected as the most efficient, cost effective method of dealing with the flooding situation. It is the only method to completely alleviate all factors associated with repetitive flooding. Once the property is acquired and the structures demolished, the land will be restricted-use public property. Metro selected properties for this application that are in the floodplain of Whites Creek and North Fork Ewing Creek and are on the National Flood Insurance Program (NFIP) Repetitive Loss (RL) List. The area these properties are located has the greatest potential for losses in Davidson County. Metro has considered the risks to critical facilities and structures and benefits to be obtained by mitigating the vulnerability of flooding. This application given the current situation is in the best interest of Metro and the property owners. By acquiring and demolishing these properties Metro will address the source flooding of Whites Creek and North Fork Ewing Creek and North Fork Ewing Creek.

#### 02. Other Feasible Alternative Project Title:

2. Elevation would prevent the structures from being damaged in a 100 year flood. However, the costs associated with elevation of the existing structures would be a minimum of \$60,000.00 per structure. This is a conservative estimate and does not take into account that most of these structures have suffered damage to such an extent that elevation is not even feasible. Therefore, elevation is not viewed as a practical alternative to acquisition and demolition and restricting the use of the land. Even though the houses would be elevated, the properties would still be at risk for property damage and physical danger to the property owners from future flooding. Owners or tenants would still be in danger if flood waters prevented them from leaving their houses in a safe and timely manner, which would necessitate the effort and expense of rescue. There are also environmental problems associated with flooding, such as sewers backing up, hazardous materials floating from upstream, etc. Elevation would also alleviate the option of phasing the land into a proposed greenway project or neighborhood park. Either of these options would ultimately benefit a larger segment of the community with little additional annual cost.

3. Taking no action would result in thee houses remaining in areas that are lighly prone to flooding, as well as being in a designeated floodplain. Repetitive flood losses could still occur, placing a burden on property owners, as well as local government resources. If these structures remain, it would be hindrance to our Department's and Metro efforts to agressively mitigate the highest potential flood loss areas in the county. It would also fail to give any financial relief and assistance to property owners whose homes have suffered massive property damage.

#### a. Project Description and Scope of Work

Discuss a feasible alternative to the proposed project. This could be an entirely different mitigation method or a significant modification to the design of the current proposed project. Please include scope of work, engineering details (if applicable), estimated budget and the impacts of this alternative. Also, explain how the alternative project will solve the problem(s) and/or provide protection for the hazard(s).

Elevation would prevent the structures from being damaged in a 100 year flood. However, the costs associated with elevation of the existing structures would be a minimum of \$60,000.00 per structure. This is a conservative estimate and does not take into account that most of these structures have suffered damage to such an extent that elevation is not even feasible. Therefore, elevation is not viewed as a practical alternative to acquisition and demolition and restricting the use of the land. Even though the houses would be elevated, the properties would still be at risk for property damage and physical danger to the property owners from future flooding. Owners or tenants would still be in danger if flood waters prevented them from leaving their houses in a safe and timely manner, which would necessitate the effort and expense of rescue. There are also environmental problems associated with flooding, such as sewers backing up, hazardous materials floating from upstream, etc. Elevation would also alleviate the option of phasing the land into a proposed greenway project or neighborhood park. Either of these options would ultimately benefit a larger segment of the community with little additional annual cost.

#### a. Other Feasible Project Location

Attach a map or diagram showing the alternative site in relation to the proposed project site (Please provide map in color).

Photographs of alternative site. (Please provide map in color)

b. Funding Sources (round figures to the nearest dollar). The maximum Federal share for all mitigation projects is 75%. The remaining 25% (non-Federal share) is the responsibility of the applicant. HMGP funds may be packaged with other Federal funds. However, only Federal funds which lose their Federal identity at the State level may be used for the non-Federal share. Please list below the funding sources and amounts for the proposed alternative project.

75% Federal Share:	\$ 180,000.00
25% Non-Federal Match:	\$ 60,000.00
Proposed Project Total Cost:	\$ 240,000.00

### 03. No Action

Discuss the impacts on the project area if no action is taken.

Taking no action would result in these houses remaining in areas that are highly prone to flooding, as well as being in a designated floodplain. Repetitive flood losses could still occur, placing a burden on property owners, as well as local government resources. If these structures remain, it would be a hindrance to our Department's and Metro efforts to agressively mitigate the highest potential flood loss areas in the county. It would also fail to give any financial relief and assistance to property owners whose homes have suffered massive property damage.

### IX. Environmental Requirements

The applicant *must* provide certain environmental documentation to the state before the State and FEMA can adequately review any proposed project. The Council on Environmental Quality (CEQ) has developed regulations to implement the National Environmental Policy Act (NEPA). These regulations, as set forth in Title 40, Code of the Federal Regulations (CFR) Parts 1500-1508, require an investigation of the potential environmental impacts of a proposed federal action, and an evaluation of alternatives as part of the environmental assessment process. The FEMA regulations that establish the agency-specific process for implementing NEPA are set forth in 44 CFR Subpart 10.

As any proposed project requires specific documentation relative to its potential effect on the physical, biological and built environment, the below sections will assist you in ensuring proper documentation is submitted for your respective project. In some instances, additional documentation may be required prior to funding.

*NOTE:* In coordinating with the below listed agencies, please provide several original photographs of the project site and adjacent area/structures, a description of the project referencing structure/site addresses, and a map of sufficient scale and detail that show the project site and surrounding project area (area of potential effects).

Attach documentation (letters, permits, etc.) from coordination with the following Federal and State agencies. For region-specific contacts, addresses, and phone numbers, please refer to Appendix A of this handbook. \**Please refer to Application Guidance Handbook for further guidance and an example of an environmental compliance letter*.

Environmental Requirement	Coordinating Agency	Attached to Application
National Historic Preservation Act: Historical Structures and Arche	eological Resources	•
Does your project affect or is it near any buildings or structures of any kind?	State Historic Preservation	Yes
Does your project involve disturbance of ground?	Office	Yes
Endangered Species Act and Fish and Wildlife Coordination Act		
Does your project remove vegetation?		No
Is your project in or near any type of waterway or body of water? (within $\frac{1}{2}$ mile)	U.S. Department of the Interior	Yes
Is the project not contained within existing structures, or may it result in changes or potential effects to the natural environment?	(Fish and Wildlife Service) ଝ	No
Are there threatened or endangered species or their critical habitat present in the project area or within the county the project is located within?	Tennessee Wildlife Resources	No
Will this activity require an Aquatic Resource Alteration Permit?		No
Clean Water Act, Rivers and Harbors Act, and Executive Order 11	990 (Protection of Wetlands)	
Will the project involve work near or in a waterway, dredging or disposal of dredged material, excavation, adding fill material or result in any modification to water bodies or wetlands designed as "waters of the U.S." as identified by the US Army Corps of Engineers or on the National Wetland Inventory?	U.S. Army Corps of Engineers & Tennessee Department of Environment and Conservation (Environmental Assistance Centers)	No
Will the project require a National Pollutant Discharge Elimination System (NPDES) permit from the U.S. Environmental Protection Agency?	Tennessee Department of Environment and Conservation (Environmental Assistance Centers)	No
Executive Order 11988 (Floodplain Management)		
Is the project located in a FEMA identified 100- or 500-year floodplain (on a FIRM map), in a FEMA identified floodway, or identified as a floodplain through some other source?	National Flood Insurance Program	Provided through FIRM
Does the project alter a watercourse, water flood patterns, or a drainage way, regardless of its floodplain designation? Will the activity require a CLOMR (Conditional Letter of Map Revision)?	U.S. Army Corps of Engineers & National Flood Insurance Program	No
Farmland Protection Policy Act		
Will the project convert more than 5 acres of farmland outside community limits and require documentation from the USDA National Resource Conservation Service (Prime, Unique or other Important Farmlands)?	U.S. Department of Agricultural (National Resources Conservation Service)	No

Environmental Requirement	Coordinating Agency	Attached to Application			
Hazardous and Toxic Materials					
Is there a reason to suspect there are contaminants from a current or part use on the property associated with the proposed project?	Hazardous Materials Property Survey	No			
Are there any studies, investigations, or enforcement action related to the property associated with the proposed project?	Individual Property Survey Form (In Appendix L of the Handbook)	No			
Do any project construction or operation activities involve the use of hazardous or toxic materials, i.e., asbestos, lead paint, heavy metals, etc.?	and/or Tennessee Department of	No			
Do you know what the current and past land-uses are of the property affected by the proposed project and the adjacent properties?	Environment and Conservation (Environmental Assistance Centers)	No			
Executive Order 12898, Environmental/Historic Preservation Just	ice for Low Income and Minori	ty Populations			
Is the project in an area of low income or minority populations and require documentation on Environmental Justice information (census, economics, housing, and employment)?	Tennessee Department of Environment and Conservation	No			
Will the project cause any changes that may affect nearby low income or minority populations, result in adverse effects, or change availability of services?	(Environmental Assistance Centers)	No			
Other Environmental Laws or Issues					
Are there any controversial issues associated with this project?	Local Applicant Narrative	No			
Have you conducted any public meetings or solicited public input or comments on your specific proposed mitigation activity(ies)?	Local Applicant Narrative	Yes			
Will this activity require a Construction Stormwater Permit?	Tennessee Department of Environment and Conservation (Environmental Assistance Centers)	No			
	centersy	UPI			

Copies of the Environmental inquiry letters sent and response can be found in Appendix

### Additional Comments

Enter any additional comments related to environmental concerns for the proposed project if desired.

Metro Water Services placed a Public Notice on the Metro Water Services website. There are no responses or questions from the public regarding this proposed project.

### X. Assurances

As the authorized representative of this application, I certify that <u>Metro Water Services - Stormwater</u>, Applicant will:

hereinafter called the

#### Name of Applicant

- 1. Ensure that participation by property owners is voluntary. The prospective participants have been informed in writing that participation in the program is voluntary, that the Applicant will not use its eminent domain authority to acquire their property for the project purposes should negotiations fail;
- Ensure each property owner will be informed, in writing, of what the Applicant considers to be the fair market value of the property. The Applicant will use the <u>Model Statement of Voluntary Transaction</u> to document this and will provide a copy for each property after award;
- Accept all the requirements of the FEMA grant and the deed restriction governing the use of the land, as restricted in perpetuity to open space uses. The Applicant will apply and record a deed restriction on each property in accordance with the language in the <u>FEMA Model</u> <u>Deed Restriction</u>. The community will seek FEMA approval, via the State, for any changes in language differing from the Model Deed Restriction.
- 4. Ensure that the land will be unavailable for the construction of flood damage reduction levees and other incompatible purposes, and is not part of an intended, planned, or designated project area for which the land is to be acquired by a certain date;
- 5. Demonstrate that it has consulted with the US Army Corps of Engineers regarding the subject land's potential future use for the construction of a levee system, and will reject future consideration of such use if it accepts FEMA assistance to convert the property to permanent open space;
- 6. Demonstrate that it has coordinated with its State Department of Transportation to ensure that no future, planned improvements or enhancements to the Federal aid systems are under consideration that will affect the subject property;
- 7. Remove existing structures within 90 days of settlement;
- 8. Post grant award, ensure that if property interested is conveyed, it is only with the prior approval of the FEMA Regional Director, via the State, and only to another public entity or to a qualified conservation organization pursuant to 26 CFR 1.170A-14;
- 9. Submit every three years to the Grantee, who will then submit to the FEMA Regional Director, a report certifying that it has inspected the subject property within the month preceding the report, and that the property continues to be maintained consistent with the provisions of the grant. If the subject property is not maintained according to the terms of the grant, the State and FEMA, its representatives, designated authorities, and assigns are responsible for taking measures to bring the property back into compliance; and
- 10. Not seek or accept the provision of, after settlement, disaster assistance for any purpose from any Federal entity with respect to the property, and FEMA will not distribute flood insurance benefits for that property for claims related to damage occurring after the date of the property settlement.
- 11. Assure the project will meet all national, state or local codes and standards applicable for the jurisdiction including, but not limited to, building, construction, public notification, floodplain development, etc.
- 12. Accept responsibility, at its own expense if necessary, for the **routine** maintenance of any real property, structures, or facilities acquired or constructed as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities as keeping vacant land clear of debris, garbage, and vermin; keeping stream channels, culverts, and storm drains clear of obstructions and debris; and keeping detention ponds free of debris, trees, and woody growth.

As the duly authorized representative of the Applicant, I hereby certify that the Applicant will comply with the identified assurances and certifications.

Tom Palko

Typed Name of Authorized Representative/Applicant Agent

1 om

Signature of Authorized Representative/Applicant Agent

Assistant Director, Stormwater Title

(615) 862-4510

Telephone Number

2/12/21

Date Signed

### **ASSURANCES (CONTINUED)**

#### 1. Code Compliance

The applicant assures the project will meet all national, state or local codes and standards applicable for the local jurisdiction including, but not limited to, building, construction, public notification, floodplain development, etc.

### 2. Maintenance

The applicant agrees that if it receives any Federal aid as a result of this application, it will accept responsibility, at its own expense if necessary, for the **routine** maintenance of any real property, structures, or facilities acquired or constructed as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities as keeping vacant land clear of debris, garbage, and vermin; keeping stream channels, culverts, and storm drains clear of obstructions and debris; and keeping detention ponds free of debris, trees, and woody growth.

The purpose of this agreement is to make clear the Sub-recipient's maintenance responsibilities following project award and to show the Sub-recipient's acceptance of these responsibilities. It does not replace, supercede, or add to any other maintenance responsibilities imposed by Federal, State and Local laws or regulations and which are in force on the date of project award.

#### 3. Signature of Agreement

The undersigned assures fulfillment of the above requirements as contained in the program guidelines.

View Burden Statement

#### ASSURANCES - CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

### PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

**NOTE:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives
- 3. Will not dispose of, modify the use of, or change the terms of the real property title or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
- Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
- 5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progressive reports and such other information as may be required by the assistance awarding agency or state.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards of merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race. color or national origin: (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29) U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statue(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statue(s) which may apply to the application

**Previous Edition Usable** 

Authorized for Local Reproduction

Standard Form 424D (Rev. 7-97) Prescribed by OMB Circular A-102

- 11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- 12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements,
- 14. 14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of

Federal actions to State (Clean Air) implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq).
- 18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 20. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Tom Pall	Assistant Director
SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE

F-424D (Rev. 7-97) Back

# Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace Requirements

Section 17.630 of the regulations provide that a recipient that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification.

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 28 CFR Part 17, "Government-wide Debarment and suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.

#### 1. LOBBYING

- A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons entering into a grant or cooperative agreement over \$100,000, as defined at 44 CFR Part 18, the applicant certifies that:
  - (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
  - (b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions;
  - (c) The undersigned shall require that the language of this certification be included in the award documents for all the sub awards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s)) and that all subrecipients shall certify and disclose accordingly.

### 2. DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A. The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or locally) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and
- B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

#### 3. DRUG-FREE WORKPLACE (RECIPIENTS OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for recipients, as defined at 44 CFR part 17, Sections 17.615 and 17.623:

- (A) The applicant certifies that it will continue to provide a drug-free workplace by:
  - (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the recipient's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - (b) Establishing an on-going drug free awareness program to inform employees about:
    - (1) The dangers of drug abuse in the workplace;
    - (2) The recipient's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

- (c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.
- (e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i.e. regional office or FEMA office.
- Taking one of the following actions against such an employee, within 30 calendar days of receiving notice under subparagraph (f) (d)(2), with respect to any employee who is so convicted:
  - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - (2) Require such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency.
- (g) Making a good effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
- (B) The recipient may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance	Street	City	State	Zip Code
Davidson County	3907 Crouch Drive	Nashville	TN	37207
Davidson County	3001 Hummingbird Drive	Nashville	TN	37218
Davidson County	1152 Tuckahoe Drive	Nashville	TN	37207
Davidson County	3900 Tucker Road	Nashville	TN	37218

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

Assistant Director TITLE

Metro Water Services-Stormwater Division APPLICANT ORGANIZATION

2/12 121

DATE SUBMITTED

View Burden Statement

#### ASSURANCES-NON-CONSTRUCTION PROGRAM

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

#### PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain federal assistance awarding agencies may require applicants to certify additional assurances.

If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F)
- Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.§§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.

S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds

**Previous Edition Usable** 

Authorized for Local Reproduction

Standard Form 424B (Rev. 7-97) Prescribed by OMB Circular A-102

- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
1 om Tall	Assistant Director
APPLICANT ORGANIZATION	DATE SUBMITTED
Metro Water Services-Stormwater Division	2/12/21

Standard Form 424B (Rev. 7-97) Back

DISCLOSURE OF LOBBYING ACTIVITIES					
Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352 OMB Number: 4040-0013 Expiration Date: 02/28/2022					
1. * Type of Federal Action:	2.	* Status of Fe	deral Actio	n:	3. * Report Type:
a. contract		a. bid/offer/app	olication		a. initial filing
b. grant		] b. initial award			b. material change
c. cooperative agreement		] c. post-award			
d. Ioan					
e. loan guarantee					
f. loan insurance					
4. Name and Address of Reporting Entity:					
Prime SubAwardee					
* Name Metro Water Services		l			
* Street 1 1600 Second Avenue North		Street 2			
	TN				Zip 37208
Congressional District, if known: 5		A.I.I			
5. If Reporting Entity in No.4 is Subawardee, Enter Nan	ne and	Address of P	rime:		
6. * Federal Department/Agency:	7	* Federal Pro	gram Nam	/Descri	intion:
Federal Emergency Management Agency	٦   <sup></sup>	Hazard Miti			
rederat Emergency management Agency		Tiazara mici	gation ora	ant Frog	grann
		CFDA Number, if a	pplicable: 9	7.039	
8. Federal Action Number, <i>if known:</i>		. Award Amou			
<u>60-0694743</u> \$ 765,660.00					
10. a. Name and Address of Lobbying Registrant:		Middle Name			
*Last Name		Suffix			
*Street 1		Street 2			
*City State		A			Zip
b. Individual Performing Services (including address if different fro	om No. 1	(Da)			
Prefix *First Name		Middle Name			
*Last Name		I Suffix			<u> </u>
*Street 1		Street 2			
*City State					Zip
11. Information requested through this form is authorized by title 31 U.S.C. section	on 1352.	This disclosure of	lobbying activi	ties is a m	aterial representation of fact upon which
reliance was placed by the tier above when the transaction was made or enter the Congress semi-annually and will be available for public inspection. Any pu	ered into. erson wh	This disclosure is in the fails to file the real	required pursu quired disclosu	ant to 31 U re shall be	<i>J.S.C.</i> 1352. This information will be reported to subject to a civil penalty of not less than
\$10,000 and not more than \$100,000 for each such failure. * Signature:					
1 om Pall					
*Name: Prefix * First Name Tom			Middle Name	1	
*Last Name Palko		Suffix			
Title: MWS Assistant Director, Stormwater Telephor	ne No.:	(615) 960 45	10	Date:	2/12/21
Divsion		(615) 862-451	10		2/12/21
Federal Use Only:					Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

Tennessee Emergency Management Agency Hazard Mitigation Application

# TEMA MITIGATION GRANT PROGRAM PROJECT MANAGEMENT COST-OPT OUT FORM

TO: Tennessee Emergency Management Agency

FROM: Tom Palko, Assistant Direct-Stormwater Division

RE: **Project Management Costs** 

### OPT OUT FORM

The purpose of this form is to make clear the sub-recipients desire to decline/reject the 5% management cost in accordance with FEMA regulations under the DRRA section 1215. By signing this form, it will not prohibit the subrecipient from requesting project management costs as a line item in the submitted application's project budget.

I have been informed by TEMA Mitigation that as the Sub-Recipient, Metropolitan Government of Nashville & Davidson County

can apply for management cost for the MWS-Acquisition/Demolition of Four (4) Repetitive Loss Properties Davidson County

Management cost is calculated based on five (5%) of the total overall estimated project cost \$ 765,660.00.

I understand that by submitting this opt out form as the Sub-Recipient, <u>Metropolitan Government of Nashville &</u> Davidson County

we are declining the offer of management cost for MWS-Acquisition/Demolition of Four (4) Repetitive Loss Properties

Davidson County \_\_\_\_\_. As such it is further understood that by declining the project management cost that the undersigned will not have to submit a quarterly report for management cost for this project.

I am duly authorized by <u>Metropolitan Government of Nashville & Davidson County</u> governing body of the Recipient) to execute this Opt-Out Form.

Tom Palko PRINTED NAME

n Pall

Assistant Director, Stormwater Division TITLE

12/2021

DATE (mm/dd/yyyy)

# Model Statement of Assurances for Property Acquisition Projects

SUBAPPLICANT MUST ENSURE THIS STATEMENT OF ASSURANCES DOCUMENT IS ATTACHED TO THE PROJECT APPLICATION AT TIME OF SUBMISSION TO THE APPLICANT (SPONSORING AGENCY).

NOTE: If there are questions regarding any of these assurances, please consult the program guidance and contact the sponsoring agency.

Name of Sub-Applicant: <u>Metro Water Services</u>

State: Tennessee

The subapplicant hereby assures and certifies that the project will comply with property acquisition requirements as per Section 404 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act), Section 1231 of the Disaster Recovery Reform Act (DRRA), 44 CFR Part 80 and Part 206.434(e), and related federal and state guidance. As the duly authorized representative of the sub-applicant, I certify that the sub-applicant:

- 1. Will ensure that participation by property owners is voluntary. The prospective participants have been informed in writing that participation in the program is voluntary, that the subapplicant will not use its eminent domain authority or any similar type of authority to acquire their property for the project purposes should negotiations fail;
- 2. Will ensure each property owner will be informed, in writing, of what the subapplicant considers to be the fair market value of the property. The subapplicant will use the Model Statement of Voluntary Participation (FEMA Form 81-112) to document this and will provide a copy for each property after award;
- 3. The sub-applicant will apply and record a deed restriction on each property in accordance with the language in the FEMA Model Deed Restriction. Such deed restrictions may exceed state, local, territorial, or tribal government land use standards. The community will seek FEMA approval for any changes in language differing from the Model Deed Restriction.
- 4. Will ensure that the land will be unavailable for the construction of flood damage reduction levees and other incompatible purposes, and is not part of an intended, planned, or designated project area for which the land is to be acquired by a certain date;
- 5. Will demonstrate that it has consulted with the U.S. Army Corps of Engineers regarding the subject land's potential future use for the construction of a levee system, and will reject future consideration of such use if it accepts FEMA assistance to convert the property to permanent open-space;
- 6. Will demonstrate that it has coordinated with its State Department of Transportation to ensure that no future, planned improvements or enhancements to the federal aid systems are under consideration that will affect the subject property;
- 7. Will demonstrate that adjoining property owners are duly informed of proposed acquisition including any locally mandated public notification processes;
- 8. Will demonstrate that proposed acquisition sites are consistent with local land use, environmental, hazard mitigation and similar plans and will not adversely impact adjacent land uses;
- 9. Will remove existing structures within 90 days of settlement;

- 10. Post grant award, will ensure that a property interest is conveyed only with the prior approval of the FEMA Regional Administrator and only to another public entity or to a qualified conservation organization pursuant to 26 CFR 1.170A-14 and 44 CFR 80.19(b)(2);
- 11. Will ensure that, post award, all property maintenance is the responsibility of the subrecipient and that the costs of maintenance will be borne by the subrecipient;
- 12. Will submit every three years to the recipient, who will then submit to the FEMA Regional Administrator, a report certifying that it has inspected the subject property within the month preceding the report, and that the property continues to be maintained consistent with the provisions of the grant. If the subject property is not maintained according to the terms of the grant, the Recipient and FEMA, its representatives, designated authorities, and assigns are responsible for taking measures to bring the property back into compliance; and
- 13. After settlement, will not seek or accept the provision of, disaster assistance for any purpose from any federal entity with respect to the property, and FEMA will not distribute flood insurance benefits for that property for claims related to damage occurring after the date of the property settlement.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified assurances and certifications.

### SIGNATURE OF SUBAPPLICANT'S AUTHORIZED AGENT:

PRINT NAME OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Tom Palko	Assistant Director, Stormwater Division
SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	SUBAPPLICANT JURISDICTION
Tom Pall	Metropolitan Government of Nashville & Davidson County
SUBAPPLICANT ORGANIZATION	DATE SUBMITTED
	2/12/21

Last Modified: 01 OCTOBER 2020

This excel document is set up with preset formulas to assist you in preparing the budget.

# SCOPE OF WORK/ BUDGET SUMMARY

Fields with a yellow background are for entering data

Fields with a blue background are formula-driven, however the formula can be overridden and figures can be hard keyed.

Do not enter any information on the Budget Totals tab for the Budget Line Item.

The total for the Budget Line Item shown below is preset to auto calculate based on the overall total from the Proposed Cost to Acquire Property listed on each of the property worksheet(s).

Budget Line Item	Total	
Appraisal	\$	4,000.00
Fair Market Value	\$	431,200.00
Closing Cost/Legal Fees	\$	14,000.00
Demolition	\$	240,000.00
Uniform Relocation Assistance	\$	-
Comparable Housing	\$	-
Other (specify): Termination of water/sewer	\$	40,000.00
Other (specify): Project Mgmt Cost (Total of 30-36 * 5%)	\$	36,460.00
Total Cost of Proposed Activity	\$	765,660.00

Funding Share Breakdown - There is a formula built into the table that will break down the shares for the 75% Federal Share, 12.5 % State Share and the 12.5% Local Share. (Note: always verify the math via calculator)

Funding Share	Total	
Federal Share	\$	574,245.00
State Share	\$	95,707.50
Local Share	\$	95,707.50
Total Cost of Proposed Activity	\$	765,660.00

Hazard Mitigation Application Continued

# PROPERTY WORKSHEETS

1. Property ID:	1		
2. Property Owner:	Cunningham, Keisha		
3. Property Address: (No PO or Route No)	3907 Crouch Drive		
4. City, State, Zip Code:	Nashville, TN 37207		
5. Tax Parcel ID:	059 10 0 231.00		
6. Property Tax ID:			
7. Latitude:	36.222152		
8. Longitude:	-86.819003		
Property Data			
9. Property owner have flood insurance?	No		
10. If Yes, Insurance Policy Provider:	N/A		
11. If Yes, NFIP Policy Number:	N/A		
12. Repetitive Loss Number:	N/A		
13. Is property in a:	Floodplain		
14. Flood Zone Designation:	AE or A 1-30		
15. Panel Number of FIRM used to determine the above:	47037C0277H		
16. Date of FIRM:	5-Apr-17		
17. Construction Date of Structure:	1974		
18. Building Type:	1-story with basement		
19. Construction Type:	Wood Frame		
20. Foundation of Building:	Basement		
List of outbuildings on the property, a photograph of each,			
21. and dates of construction	Basement		
22. Type of Residency:	Owner Occupied - Principal Residence		
23. If Rental, how many units are occupied?	N/A		
24. If Rental, tenant names:	N/A		
25. If property is a critical facility, what type?	N/A		
26. Any historic building controls (easements, etc.)?	No		
27. Percent of structure's damage:	50-99%		
28. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value		
29. What is the source of flooding?	Rivering Flooding		
Proposed Cost to Acquire Property			
30. Appraisal	\$ 1,000.00		
31. Fair Market Value	\$ 86,800.00		
32. Closing Cost/Legal Fees	\$ 3,500.00		
33. Demolition	\$ 60,000.00		
34. Uniform Relocation Assistance	\$ -		
35. Comparable Housing			
36. Other (specify): Termination of water/sewer	\$ 10,000.00		
37. Other (specify): Project Mgmt Cost (Total of 30-36 * 5%)	\$ 8,065.00		
38. Total of 30-36:	\$ 169,365.00		
39. Program Income:	N/A		
40. Duplication of Benefits:	N/A		
41. Total of 38-39:	\$ -		
42. Total Cost to Acquire Property:	\$ 169,365.00		
Attach the following:			
43. Pictures showing front, back and side view.	Yes		
43. Fictures showing front, back and side view. 44. Elevation Certificate	Yes		
44. Elevation Certificate 45. Hazardous Materials Certification	Will be provided when project is closed out		
45. Hazardous Materials Certification 46. Signed Notice of Voluntary Interest:	Yes		
Attach any continuations or additional items to this page.	Page 2 of 0		

1. Property ID:	2
2. Property Owner:	Scheibe, Steven D.
3. Property Address: (No PO or Route No)	3001 Hummingbird Drive
4. City, State, Zip Code:	Nashville, TN 37218
5. Tax Parcel ID:	059 14 0 009.00
6. Property Tax ID:	
7. Latitude:	36.218809
8. Longitude:	-86.821244
Property Data	
<ol> <li>Property owner have flood insurance?</li> </ol>	No
10. If Yes, Insurance Policy Provider:	N/A
11. If Yes, NFIP Policy Number:	N/A
12. Repetitive Loss Number:	N/A
13. Is property in a:	Floodplain
14. Flood Zone Designation:	AE or A 1-30
15. Panel Number of FIRM used to determine the above:	47037C0229H
16. Date of FIRM:	5-Apr-17
17. Construction Date of Structure:	1958
18. Building Type:	1-story w/o basement
19. Construction Type:	Wood Frame
20. Foundation of Building:	Crawl Space
List of outbuildings on the property, a photograph of each,	
21. and dates of construction	Crawl Space
22. Type of Residency:	Rental Property
23. If Rental, how many units are occupied?	N/A
24. If Rental, tenant names:	N/A
25. If property is a critical facility, what type?	N/A
26. Any historic building controls (easements, etc.)?	No
27. Percent of structure's damage:	50-99%
28. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value
29. What is the source of flooding?	Rivering Flooding
Proposed Cost to Acquire Property	
30. Appraisal	\$ 1,000.00
31. Fair Market Value	\$ 102,400.00
32. Closing Cost/Legal Fees	\$ 3,500.00
33. Demolition	\$ 60,000.00
34. Uniform Relocation Assistance	\$ -
35. Comparable Housing	\$ -
36. Other (specify): Termination of Water/Sewer	\$ 10,000.00
37. Other (specify): Project Mgmt Cost (Total of 30-36 * 5%)	\$ 8,845.00
38. Total of 30-36:	\$ 185,745.00
39. Program Income:	N/A
40. Duplication of Benefits:	N/A
41. Total of 38-39:	\$ -
42. Total Cost to Acquire Property:	\$ 185,745.00
Attach the following:	
43. Pictures showing front, back and side view.	Yes
	Yes
44. Elevation Certificate	
44. Elevation Certificate 45. Hazardous Materials Certification	Will be provided when project is closed out

1. Property ID:	3
2. Property Owner:	McGill, Carl Y. & Keith E.
3. Property Address: (No PO or Route No)	1152 Tuckahoe Drive
4. City, State, Zip Code:	Nashville, TN 37207
5. Tax Parcel ID:	041 16 0 012.00
6. Property Tax ID:	
7. Latitude:	36.260803
8. Longitude:	-86.762976
Property Data	
<ol> <li>Property owner have flood insurance?</li> </ol>	No
10. If Yes, Insurance Policy Provider:	N/A
11. If Yes, NFIP Policy Number:	N/A
12. Repetitive Loss Number:	N/A
13. Is property in a:	Floodplain
14. Flood Zone Designation:	AE or A 1-30
15. Panel Number of FIRM used to determine the above:	47037C0119H
16. Date of FIRM:	5-Apr-17
17. Construction Date of Structure:	1954
18. Building Type:	1-story w/o basement
19. Construction Type:	Wood Frame
20. Foundation of Building:	Crawl Space
List of outbuildings on the property, a photograph of each,	
21. and dates of construction	Crawl Space
22. Type of Residency:	Owner Occupied - Principal Residence
23. If Rental, how many units are occupied?	N/A
24. If Rental, tenant names:	N/A
25. If property is a critical facility, what type?	N/A
26. Any historic building controls (easements, etc.)?	No
27. Percent of structure's damage:	50-99%
28. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value
29. What is the source of flooding?	Rivering Flooding
Proposed Cost to Acquire Property	
30. Appraisal	\$ 1,000.00
31. Fair Market Value	\$ 147,900.00
32. Closing Cost/Legal Fees	\$ 3,500.00
33. Demolition	\$ 60,000.00
34. Uniform Relocation Assistance	\$ -
35. Comparable Housing	\$ -
36. Other (specify): Termination of Water/Sewer	\$ 10,000.00
37. Other (specify): Project Mgmt Cost (Total of 30-36 * 5%)	\$ 11,120.00
38. Total of 30-36:	\$ 233,520.00
39. Program Income:	
40. Duplication of Benefits:	
41. Total of 38-39:	\$ -
42. Total Cost to Acquire Property:	\$ 233,520.00
Attach the following:	
43. Pictures showing front, back and side view.	Yes
44. Elevation Certificate	Yes
45. Hazardous Materials Certification	Will be provided when project is closed out
46. Signed Notice of Voluntary Interest:	Yes
40. Signed Notice of voluntary interest:	res

1. Property ID:	4
2. Property Owner:	Scheibe, Steven D.
3. Property Address: (No PO or Route No)	3900 Tucker Road
4. City, State, Zip Code:	Nashville, TN 37218
5. Tax Parcel ID:	059 14 0 009.00
6. Property Tax ID:	
7. Latitude:	36.213684
8. Longitude:	-86.825429
Property Data	
9. Property owner have flood insurance?	No
10. If Yes, Insurance Policy Provider:	N/A
11. If Yes, NFIP Policy Number:	N/A
12. Repetitive Loss Number:	N/A
13. Is property in a:	Floodplain
14. Flood Zone Designation:	AE or A 1-30
15. Panel Number of FIRM used to determine the above:	47037C0229H
16. Date of FIRM:	5-Apr-17
17. Construction Date of Structure:	1959
18. Building Type:	1-story w/o basement
19. Construction Type:	Wood Frame
20. Foundation of Building:	Crawl Space
List of outbuildings on the property, a photograph of each,	
21. and dates of construction	Crawl Space
22. Type of Residency:	Rental Property
23. If Rental, how many units are occupied?	N/A
24. If Rental, tenant names:	N/A
25. If property is a critical facility, what type?	N/A
26. Any historic building controls (easements, etc.)?	No
27. Percent of structure's damage:	50-99%
28. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value
29. What is the source of flooding?	Rivering Flooding
Proposed Cost to Acquire Property	
30. Appraisal	\$ 1,000.00
31. Fair Market Value	\$ 94,100.00
32. Closing Cost/Legal Fees	\$ 3,500.00
33. Demolition	\$ 60,000.00
34. Uniform Relocation Assistance	\$ -
35. Comparable Housing	\$ -
36. Other (specify): Termination of water/sewer	\$ 10,000.00
37. Other (specify): Project Mgmt Cost (Total of 30-36 * 5%)	\$ 8,430.00
38. Total of 30-36:	\$ 177,030.00
39. Program Income:	
40. Duplication of Benefits:	
41. Total of 38-39:	- -
42. Total Cost to Acquire Property:	\$ 177,030.00
Attach the following:	
43. Pictures showing front, back and side view.	Yes
<ul><li>43. Pictures showing front, back and side view.</li><li>44. Elevation Certificate</li></ul>	Yes Yes

#### Hazard Mitigation Application Continued

# **PROPERTY SUMMATION**

Property ID#:	Owner:	Address:	Total Cost
1	Cunningham, Keisha	3907 Crouch Drive	\$ 169,365.00
2	Scheibe, Steven D.	3001 Hummingbird Drive	\$ 185,745.00
3	McGill, Carl Y. & Keith E.	1152 Tuckahoe Drive	\$ 233,520.00
4	Scheibe, Steven D.	3900 Tucker Road	\$ 177,030.00
Grand Tot	al		\$ 765,660.00

1. Property ID:	1		
2. Property Owner:	CUNNINGHAM, KEISHA		
3. Property Address: (No PO or Route No)	3907 CROUCH DRIVE		
4. City, State, Zip Code:	NASHVILLE, TN 37207		
5. Tax Parcel ID:	059 10 0 231.00		
6. Property Tax ID:			
7. Latitude:	36.222152		
8. Longitude:	-86.819003		
Property Data	the second secon		
9. Property owner have flood insurance?	Yes		
10. If Yes, Insurance Policy Provider:			
11. If Yes, NFIP Policy Number:			
12. Repetitive Loss Number:			
13. Is property in a:	Floodplain		
14. Flood Zone Designation:	AE or A 1-30		
15. Panel Number of FIRM used to determine the above:			
10. I must rounder of Firsts used to determine the above.	47037C0277H		
16. Date of FIRM:	4/5/2017		
17. Construction Date of Structure:	1974		
18. Building Type:	2-story with basement		
19. Construction Type:	Wood Frame		
20. Foundation of Building:	Basement		
21. Type of Residency:	Owner Occupied - Principal Residence		
22. If Rental, how many units are occupied?	N/A		
23. If Rental, tenant names:	NA		
24. If property is a critical facility, what type?	NA		
25. Any historic building controls (easements, etc.)?	No		
26. Percent of structure's damage:	50-99%		
27. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value		
28. What is the source of flooding?	Rivering Flooding		
	Involving Processing		
Proposed Cost to Acquire Property			
29. Appraisal	\$ 500.0		
30. Fair Market Value	\$ 117,180.0		
31. Closing Cost/Legal Fees	\$ 2,500.0		
32. Demolition (including EAS & Abatement)	\$ 34,000.0		
33. Uniform Relocation Assistance			
34. Comparable Housing	\$		
35. Other (specify): Termination Water & Sewer	\$ 5,000.00		
36. Total of 29-35:	\$ 159,180.00		
37. Program Income:			
88. Duplication of Benefits:			
39. Total of 37-38:	\$ -		
0. Total Cost to Acquire Property:	\$ 159,180.00		
ttach the following:			
1. Pictures showing front, back and side view.	Yes		
2. Elevation Certificate	Yes		
3. Hazardous Materials Certification	Will be provided when project is closed out		
4. Signed Notice of Voluntary Interest:	Yes		
enefit Cost Analysis Data 🛛 🕺 🕺 🗛	sessed Value of Property is less than 8270,000,00		

Insurance Study and surveying. The Damage Frequency Assessmen requires gathering damage information from the property residents. Also, if the Damage Frequency Assessment is chosen, there must be at least three events information. 9/27/2017

#### Davidson County, TN Assessor of Property

## **Unofficial Property Record Card**

#### **GENERAL PROPERTY INFORMATION**

Map & Parcel: 059 10 0 231.00 Current Owner: CUNNINGHAM, KEISHA Mailing Address: 3907 CROUCH DR NASHVILLE, TN 37207 Zone: 4 Neighborhood: 3533

#### Location: 3907 CROUCH DR Land Area: 0.22 Acres Most Recent Sale Date: 07/24/2003 Most Recent Sale Price: \$108,640 Deed Reference: 20030804-0109756 Tax District: USD

#### CURRENT PROPERTY APPRASIAL

Assessment Year: 2017 Land Value: \$29,000 Improvement Value: \$57,800 Total Appraisal Value: \$86,800 Assessment Classification\*: RES Assessment Land: \$7,250 Assessment Improvement: \$14,450 Assessment Total: \$21,700

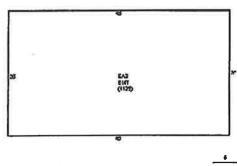
#### LEGAL DESCRIPTION

LOT 596 HAYNES MANOR SEC. 5

### IMPROVEMENT ATTRIBUTES - Card 1 of 1

Building Type: SINGLE FAM Year Built: 1974 Square Footage: 1,125 Number of Living Units: 1 Building Grade: C Building Condition: Average Rooms: 5 Beds: 3 Baths: 1 Half Bath: 0 Fixtures: 5 Exterior Wall: BRICK Frame Type: RESD FRAME Story Height: ONE STY Foundation Type: FULL BSMT Roof Cover: ASPHALT





\*This classification is for assessment purposes only and is not a zoning designation, not does it speak to the legality of the current use of the subject property.



**KEISHA CUNNINGHAM 3907 CROUCH DRIVE** NASHVILLE, TN 37207

## **Hazard Mitigation Home Buyout Program** Homeowner Interest Sign-up Sheet & Voluntary Notice

If you are interested in exploring your options for reducing your flood losses by taking part in our Flood Mitigation Home Buyout Program, please complete this form. Signing the form does not commit you to any action, but if you do not sign and return this form, your property will NOT be considered for buyout in the Hazard Mitigation Grant Program. Please direct questions concerning this program to (615) 862-6778.

Property Address:	3907 CROUCH DRIVE, NASHVILLE, TN 37207
Owner(s) Mailing Address:	3907 CROUCH DRIVE, NASHVILLE, TN 37207
Owner(s) Name:	- CUMMINGHAM, KEISHA
Contact Phone Number:	CUNNINGHAM

The local government is required by FEMA to inform you that your participation in this project for open-space acquisition is voluntary. Neither the State nor the Local Government will use its eminent domain authority to acquire the property for open-space purposes if you choose not to participate, or if negotiations fail. If you have flood insurance, please include your Flood Insurance Policy information, including your policy number.

Mail the signed form to: Department of Water and Sewerage Services Stormwater Division - Flood Buyout Program 800 Second Avenue South Nashville, TN 37210

Check one: Yes, I want to be in the buyout program. Date

□ No, I do not want to be in the program.

10.18.17

**Owner's Signature** 

Date

**Owner's Signature** 

Date

#### DEPARTMENT OF HOMELAND SECURITY EMERGENCY PREPAREDNESS AND RESPONSE DIRECTORATE FEDERAL EMERGENCY MANAGEMENT AGENCY DECLARATION AND RELEASE

#### O.M.B. NO. 1660-0002 Expires September 30, 2006

DECLAR	ATION AND RELEAS	SE		
	DECL	ARATION AND RELEASE		
In order to be eligible to receive FEMA Dis States. Please read the form carefully, sig free to consult with an attorney or other inst	n the sheet and return it t	o the Inspector, and show him/he	, non-citizen national or qualified r a current form of photo iden	d alien of the United tification. Please feel
I hereby declare, under penalty of perjur	y that (check onc):			
1 am a citizen or non-citizen nationa	I of the United States.			
I am a qualified alien of the United	States			
I am the parent or guardian of a min full name and age of minor child:			national, or qualified alien of th	e United States. Print
By my signature I certify that:				
<ul> <li>* Only one application has been sub</li> <li>* All information 1 have provided ro</li> <li>* 1 will return any disaster aid monor disaster aid monor disaster aid monoy for the purpose f</li> </ul>	garding my application for y I received from FEMA o or which it was intended.	r that State if I receive insurance or	r other money for the same loss, o	or if I do not use FEMA
I understand that, if I intentionally State laws, which carry severe crimi	make false statements or c nal and civil penaltics, incl	onceal any information in an attem uding a fine up to \$ 250,000, impri	pt to obtain disaster aid, it is a vi sonment, or both (18 U.S.C. §§ 2	olation of federal and 287, 1001, and 3571).
I understand that, the information Homeland Security (DHS) including	provided regarding my app , but not limited to, the Bu	lication for FEMA disaster assistan reau of Immigration and Custom E	ice may be subject to sharing wit	hin the Department of
I authorize FEMA to verify all info determine my eligibility for disaster		t my property/place of residence, ir	rcome, employment and depende	ents in order to
I authorize all custodians of records to FEMA and/or the State upon requ		, any public or private agency, ban	k financial or credit data service	to release information
NAME (Print) KEISHA CUNNINGHAM	SIGNATURE	5 7	DATE OF BIRTH	DATE SIGNED
INSPECTOR ID NO.	FEMA APPLICATION N		DISASTER NO. DR TN 1909	10.18.17
ADDRESS OF DAMAGED PROPERTY 3907 CROUCH DRIVE	CITY		STATE TN	ZIP CODE 37207
The Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. §§ 5121-5206, Executive Order 12148, as amended, and Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, 8 U.S.C. §§ 1601 et seq., authorize the collection of this information. The primary use of this information is to determine your eligibility to receive FEMA disaster assistance. Disclosures of this information may be made: Upon written request, to federal and state agencies providing disaster assistance, as well as to local governments or voluntary agencies from which you are seeking assistances, so that assistance efforts or benefits are not duplicated; to agencies, organizations and institutions as necessary for mitigation planning and enforcement; to law enforcement agencies or professional organizations where there may be a violation or potential violation of law; to a federal agency request such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of the individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections conducted under the authority of 44 §§ 2904 and 2906. Your social security number is solicited during registration pursuant to the Debt Collection Improvement Act of 1996, 31§§ 3325 (d) and 7701 (c)(1). Furnishing the social security number, as well as other information is voluntary, but failure to do so may delay or prevent provision of disaster assistance.				e primary use of this a request, to federal e, so that assistance w enforcement we request information such information for a ent and Budget (OMB) gement inspections lection Improvement to so may delay or
Public reporting burden for this form is estimated data, and completing and submitting the form O.M.B. control number is displayed in the upp	You are not required to co	implete this collection of information	on unless a valid	

for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Emergency Preparedness and Response Directorate, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20472, Paperwork Reduction Project (1660-0002). NOTE: Do not send your completed form to this address.

FEMA Form 90-69B, Sep 03

REPLACES ALL PREVIOUS EDITIONS

#### 3907 Crouch Drive

This structure is NOT slab on grade; it has a basement, during demolition the ground disturbance should be between 3 inches to 6 inches. Once the basement has been completely demolished and removed Metro will fill and grade the area that has the disturbance. The property does have a sidewalk and driveway. During demolition the ground disturbance should be between 3 inches to 6 inches. Once the sidewalk and driveway are removed Metro will fill and grade the area that has the disturbance.

Metropolitan Government of Nashville & Davidson County uses the assessed value on the property tax card and we multiply that by 35%. We add the assessed value on the property tax card and the 35% to get the estimated acquisition cost for each property. Upon approval of our grant application Metropolitan Government of Nashville & Davidson County will obtain an appraisal for the true Fair Market Value.

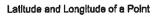
We have used this methodology for years when applying for Mitigation funded grants.

#### 3907 CROUCH DRIVE

Tax Card Value	\$ 86,800.00
Cushion of (x 35%)	\$ 30,380.00
<b>Estimated Market Value</b>	\$ 117,180.00

I hope the examples shown above, adequately explains the methodology of how we assess the estimated acquisition costs for each property.

9/27/2017

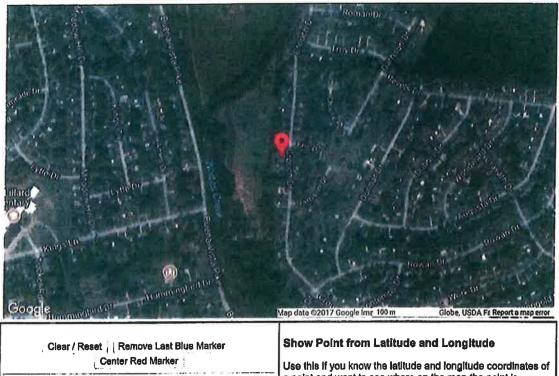




Mobile and Desktop Maps Home » Latilude and Longitude of a Point

0		point Click on the map, Drag the marker, or enter the uch Drive, Nashville TN GO Mobile Version
	Nearby Places of Interest Many	points to check? Try LatLong Trace
1		I

## Latitude and Longitude of a Point



Get the Latitude and Longitude of a Point

When you click on the map, move the marker or enter an address the latitude and longitude coordinates of the point are inserted in the boxes below.

Latitude: Longitude:	36.222162 -86.819003	222			
	Degrees	Minutes	-	Seconds	
Latitude:	36	13	!	19.7472	-1
Longitude:	-86	49	4	8.4102	10.01

Use this if you know the latitude and longitude coordinates of a point and want to see where on the map the point is. Use: + for N Lat or E Long = for S Lat or W Long. Example: +40.689060 -74.044636 Note: Your entry should not have any embedded spaces.

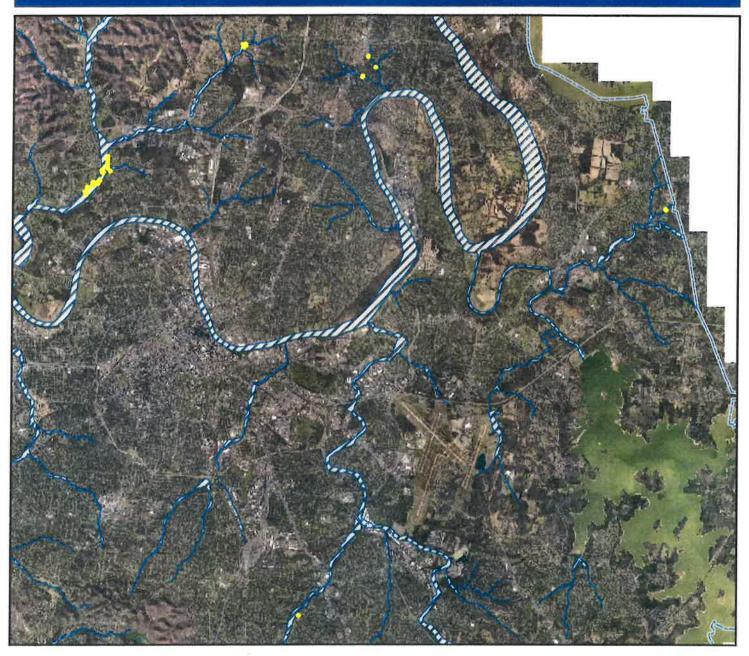
Decimal	Deg.	Latitude:
Decimal	Deg.	Longitude:

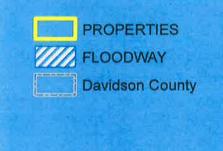
Show Point

Example: +34	40 50.12	for 34N 40' 50.12"		
	Degrees	Minutes		Seconds
Latitude:		<u>.</u>		1
Longitude:			÷	Ĩ

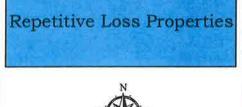
© ITouchMap.com 2007-2016

# **Repetitive Loss Properties**

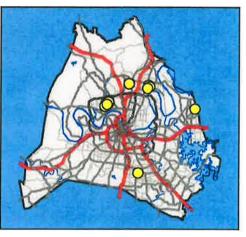




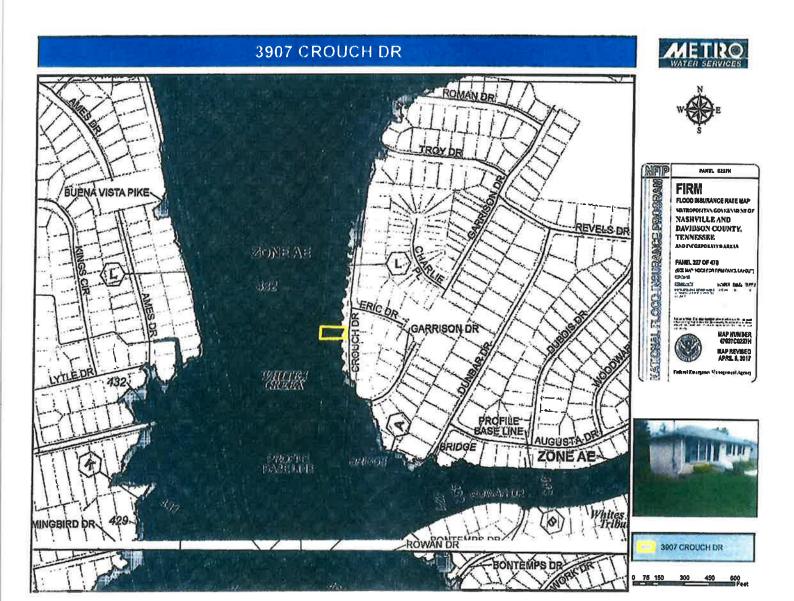


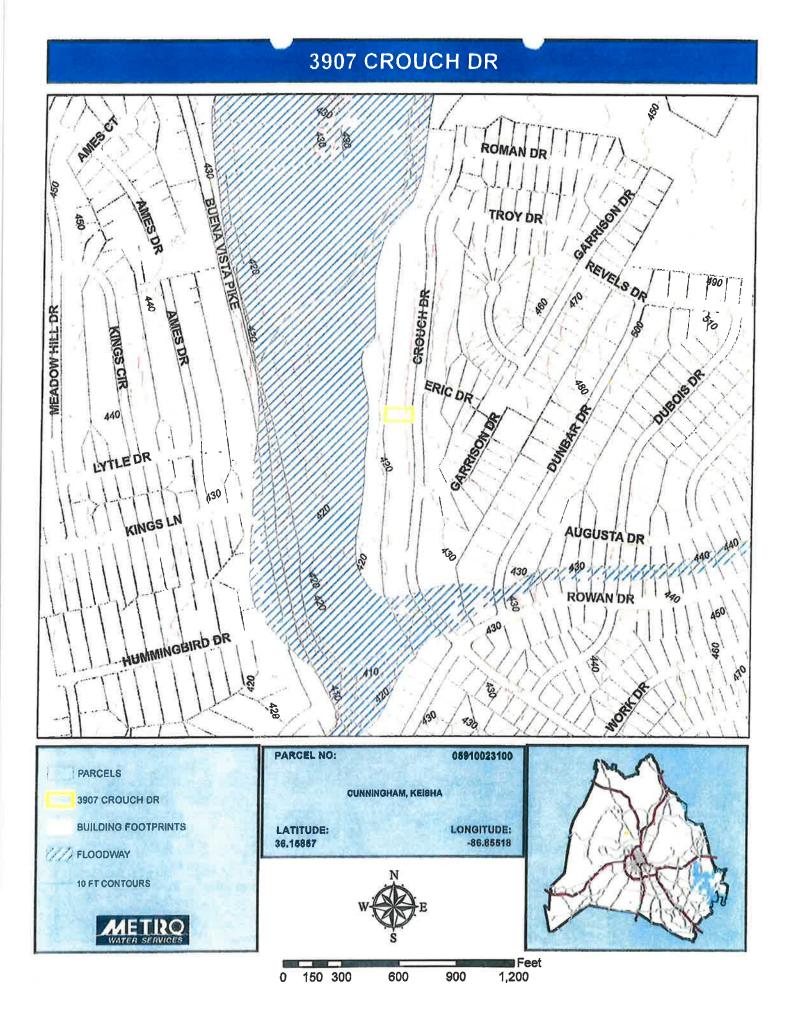




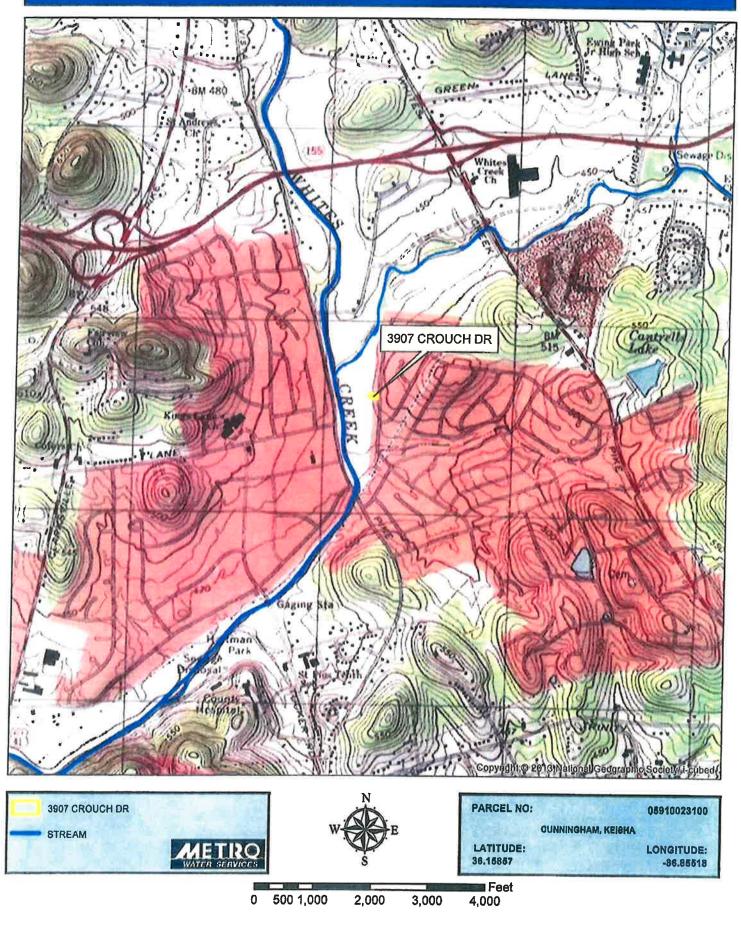








# 3907 CROUCH DR







			LOOD INSURANCE PRO			.B. No. 3067-0077 res December 31, 2005
			ad the instructions on pr		Stanpar;	05910023100
BUILDING OWNER'S N	IAME	SECTION A	-PROPERTY OWNER IN	FORMATION		For Insurance Company Use:
GREER, PATRICE						Policy Number ·
BUILDING STREET AD 3907 CROUCH DR		Apt., Unit, Suite, and/or I	3ldg. No.) OR P.O. ROUTE	AND BOX NO.	•	Company NAIC Number
CITY NASHVILLE, TN		STATE ZIP CODE TENNESSEE 37207		DE		
PROPERTY DESCRIPT	ION (Lot and Blo	K Numbers, Tax Parcel Number, Legal Description, etc.)				
LOT 596 HAYNES MAN	OR SEC. 5	1	ory, etc. Use a Comments	<i>9</i> .		
LATITUDE/LONGITUDE			TAL DATUM: SOURCE:			
(## <sup>0</sup> -##-##.##" or ##	\$.##### <b>\$</b> )	NAD 1927	NAD 1983	USGS Quad Map		Other:
		SECTION B - FLOOD IN	SURANCE RATE MAP (	IRM) INFORMATK	W N	
B1. NFIP COMMUNITY NAME		ABER B2	COUNTY NAME	May - Contraction		STATE
470040		DA	VIDSON			WESSEE
B4, MAP AND PANEL NUMBER 47037C0202	86. SUFFIX F	B6. FIRM INDEX DATE April 20, 2001	B7. FIRM PANEL EFFECTIVE/REVISED D/ April 20, 2001	TE B8. FLOOD		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 431.7
. Building elevations are bas	a Coastal Barrier R SEC sed on: Construction	esources System (CBRS) ar TION C - BUILDING ELI	ea or Otherwise Protected An EVATION INFORMATION Construction® Finished Co	SURVEY REQUI	Designation RED)	Date
Complete Items C3a-i bell Section B, convert the datu	ow according to th	building diagram specified	E), AR, AR/A, AR/AE, AR/A1 in Nem C2. State the datum us	-A30, AR/AH, AR/AO red. If the datum is diff	erent from the	datum used for the DEC in
	appropriate, to do	ument the datum conversion	nichts dag Godern Conversion 1.	calculation. Use the s	space provide	or the Comments area of
Datum NGVD29 Conversi	appropriate, to do: ion/Comments	ument the datum conversion	l.	calculation. Use the s	space provide	dor the Comments area of
Datum NGVD29 Conversi	appropriate, to do: ion/Comments ised <u>RM 204-1</u> Doe	ument the datum conversion  s the elevation reference ma	ntering and balanconversion nt rk used appear on the FIRM <u>427.4</u> ft (n	calculation. Use the s	space provide	dor the Comments area of
Datum <u>NGVD29</u> Conversit Bevalion reference mark us o a) Top of bottom floor (in o b) Top of next higher floor	appropriate, to do ion/Comments ised <u>RM 204-1</u> Doe icluding basement or	ument the datum conversion s the elevation reference ma or enclosure)	n. Ink used appear on the FIRM <u>427.4</u> ft.(n ft.(n	calculation. Use the s V 🖾 Yes 🛄 No )	space provide	dor the Comments area of
Datum <u>NGVD29</u> Conversit Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz	appropriate, to do ion/Comments ised <u>RM 204-1</u> Dos icluding basement or zontal structural me	ument the datum conversion s the elevation reference ma or enclosure)	n. Ink used appear on the FIRM <u>427.4</u> ft.(n ft.(n ft.(n	calculation. Use the s V 🖾 Yes 🗀 No I) )	space provide	dor the Comments area of
Datum <u>NGVD29</u> Conversit Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top d	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do icluding basement or iontal structural me of slab)	ument the datum conversion  s the elevation reference ma or enclosure) mber (V zones only)	n. Ink used appear on the FIRM <u>427.4</u> ft.(n ft.(n	calculation. Use the s V 🖾 Yes 🗀 No I) )	space provide	dor the Comments area of
Datum <u>NGVD29</u> Conversit Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top d	appropriate, to do ion/Comments ised <u>RM 204-1</u> Doe ioluding basement or zontal structural me of slab) achinery and/or ep	ument the datum conversion  s the elevation reference ma or enclosure) mber (V zones only) sipment	n. nk used appear on the FIRM <u>427.4</u> ft.(n ft.(n ft.(n ft.(n ft.(n	calculation. Use the s V 🖾 Yes 🗀 No ) ) )	Pace provide	dor the Comments area of
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (linishing)	appropriate, to do ion/Comments ised <u>RM 204-1</u> Dos including basement or incontal structural me of slab) achinery and/or eq achinery and/or eq ortibe in a Commen red) grade (LAG)	ument the datum conversion  s the elevation reference ma or enclosure) mber (V zones only) sipment	n. nk used appear on the FIRM <u>427.4</u> ft (n ft (n ft (n ft (n ft (n ft (n ft (n ft (n ft (n	Calculation. Use the s 2 ⊠ Yes □ No 3) ) ) ) )	Pace provide	dor the Comments area of
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (finish o g) Highest adjacent (finish	appropriate, to do ion/Comments ised <u>RM 204-1</u> Dos including basement or incontal structural me of slab) achineny and/or eq cribe in a Commen ed) grade (LAG) hed) grade (LAG)	ument the datum conversion  is the elevation reference ma or enclosure) mber (V zones only) ulpment is area)	n. nk used appear on the FIRM/ <u>427.4</u> ft (n ft (n)	calculation. Use the s	Sundare, Enfloces of Seal, Sundare, and Date Sundare, and Date	dor the Comments area of
Datum <u>NGVD29</u> Conversis Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top d o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (finish o g) Highest adjacent (finish o h) No. of permenent oper	appropriate, ib do ion/Comments ised <u>RM 204-1</u> Do including basement iontal structural me of slab) achineny and/or ep cribe in a Commen ed) grade (LAG) hed) grade (LAG) hed) grade (HAG)	ument the datum conversion  is the elevation reference ma or enclosure) mber (V zones only) ulpment is area) within 1 ft. above adjacent gr	n. rk used appear on the FIRM7 <u>427.4</u> ft (n ft (n ft (n ft (n ft (m ft (m ft (m ft (m ft (m ft (m ft (m	calculation. Use the s	Pace provide	dor the Comments area of
Datum <u>NGVD29</u> Conversis Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of me servicing the building (Desc o f) Lowest adjacent (finish o g) Highest adjacent (finish o h) No. of permenent oper	appropriate, to do ion/Comments sed <u>RM 204-1</u> Do including basement or contal structural me of slab) achinery and/or ep cribe in a Commen wed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) ulpment is area) within 1 ft. above adjacent gr d vents) in C3.h_sq. in. (sq. c	n. rik used appear on the FIRM <u>427.4</u> ft (n ft (n ft (n ft (n <u>427.4</u> ft (m ft (m ft (m ft (m)	calculation. Use the s	Sundare, Enfloces of Seal, Sundare, and Date Sundare, and Date	dor the Comments area of
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (finish o g) Highest adjacent (finish o h) No. of permanent oper o i) Total area of all perman	appropriate, to do ion/Comments sed <u>RM 204-1</u> Do ionduding basement or iontal structural me of stab) achinery and/or eq ortibe in a Comment wed) grade (LAG) hed) grade (LAG) hed) grade (HAG) nings (flood vents) nent openings (flood	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) sigment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. o SECTION D - SURVEYOR,	n. rk used appear on the FIRM <u>427.4</u> ft (n ft (n ft (n ft (n ft (m <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	calculation. Use the s	License Number, Enhocsed Seal, Synature, and byte Synature, and byte	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (linish o g) Highest adjacent (linish o h) No. of permanent oper o i) Total area of all perman	appropriate, to do ion/Comments sed <u>RM 204-1</u> Do ion duding basement or contal structural me of stab) achinery and/or eq cribe in a Commen ved) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo ned and sealed b	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) sigment is area) within 1 ft, above adjacent gr d vents) in C3.h ,sq. in. (sq. o SECTION D - SURVEYOR, y a land surveyor, engine	n. rk used appear on the FIRM <u>427.4</u> ft (n ft (n ft (n ft (n ft (m <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	Calculation. Use the s	Processed Seal	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o f) No. of permenent oper o f) Total area of all perman	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. rk used appear on the FIRM <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	Calculation. Use the s           Calculation. Use the s           Image: Section 1001.	Processed Seal	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o f) No. of permanent oper o f) Total area of all perman lis certification is to be sign ertify that the information i inderstand that any false s RTIFIER'S NAME	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. rk used appear on the FIRM <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	Calculation. Use the s           Calculation. Use the s           Image: Section 1001.	Processed Seal	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Deso o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o f) No. of permenent oper o f) Total area of all perman scertification is to be sign ertify that the information i inderstand that any false s RTIFIER'S NAME lip Grant Chapman	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. rk used appear on the FIRM <u>427.4</u> ft (m ft (m ft (m <u>427.4</u> ft (m ft (m <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	calculation. Use the s           Image: Calculation.	Processed Seal	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o f) No. of permenent oper o f) Total area of all perman scriftication is to be sign ertify that the information i inderstand that any false s RTIFIER'S NAME lip Grant Chapman	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. rk used appear on the FIRM <u>427.4</u> ft (m ft (m))))))))))))))))))))))))))))))))))))	calculation. Use the s           Calculation. Use the s           Image: Calculation of the sector of t	Processed Seal	dor the Comments area of P. G. CHAND SUP D. LAND SUP D
Dalum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o h) No. of permenent oper o I) Total area of all perman scritification is to be sign ertify that the information i inderstand that any faise s RTIFIER'S NAME lip Grant Chapman LE vey Manager ORESS	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. Ark used appear on the FIRM <u>427.4</u> ft (n ft (n))))))))))))))))))))))))))))))))))))	Calculation. Use the s	space provide	dor the Comments area of P. G. C.A. Support D. LAND Support D. LAND Su
Dalum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o h) No. of permenent oper o I) Total area of all perman is certification is to be sign ertify that the information i inderstand that any false s RTIFIER'S NAME lip Grant Chapman LE vey Manager ORESS 10 Ezell Road, Suite 100	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. rk used appear on the FIRM/ <u>427.4</u> ft (n ft (n))))))))))))))))))))))))))))))))))))	Calculation. Use the s	space provide	dor the Comments area of
Dalum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (linish o g) Highest adjacent (linish o g) Highest adjacent (linish o h) No. of permenent oper o I) Total area of all perman is certification is to be sign ertify that the information i inderstand that any false s RTIFIER'S NAME lip Grant Chapman LE vey Manager ORESS 10 Ezell Road, Suite 100	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. Ark used appear on the FIRM <u>427.4</u> ft (n ft (n))))))))))))))))))))))))))))))))))))	calculation. Use the s	space provide	dor the Comments area of
Datum <u>NGVD29</u> Conversi Elevation reference mark us o a) Top of bottom floor (in o b) Top of next higher floo o c) Bottom of lowest horiz o d) Attached garage (top o o e) Lowest elevation of ma servicing the building (Desc o f) Lowest adjacent (finish o g) Highest adjacent (finish o t) No. of permanent oper o i) Total area of all permanent lis certification is to be sign ertify that the information i	appropriate, to do ion/Comments ised <u>RM 204-1</u> Do iontal structural me of slab) achinery and/or ep ortibe in a Commen red) grade (LAG) hed) grade (LAG) hed) grade (LAG) hed) grade (LAG) nings (flood vents) nent openings (floo in Sections A, B,	ument the datum conversion s the elevation reference ma or enclosure) mber (V zones only) upment is area) within 1 ft. above adjacent gr d vents) in C3.h _sq. in. (sq. or SECTION D - SURVEYOR, y a land surveyor, engine- and C on this certificate re-	n. Ark used appear on the FIRM <u>427.4</u> ft (n ft (n))))))))))))))))))))))))))))))))))))	calculation. Use the s	space provide	dor the Comments area of

	y the con, onding information from S	lection A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., 3907 CROUCH DR	Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND B	OX NO.		Policy Number
CITY NASHVILLE, TN	STATE	ESSEE	ZIP CODE 37207	Company NAIC Number
SECTION D - SURVEYOR, ENGINE	ER, OR ARCHITECT CERTIFICATION (C	and the second division of the second s		
Construction of the second	e for (1) community official, (2) insurance agentic		iding owner.	
ACCTONIC OUR DING DI DIATAN	INCODUCTION OF IMAEV MOT DECUM	000 000 7040	AO AND TONE A AND	Check here if attachme
the state of the s	INFORMATION (SURVEY NOT REQUI plete terms E1 through E4. If the Bevation Cer	the second s	the second s	
natural grade, if available). 3. For Building Diagrams 6-8 with openings ( grade. Complete items C3.h and C3.l on 4. For Zone AQ only: If no flood depth numb	ement or enclosure) of the building isR.(m) (see page 7), the next higher floor or elevated fi front of form. per is available, is the top of the bottom floor elev	cor (elevation b) of the	ne building is ft.(m) li	3.(cm) above the highest adjacent
	cal official must certify this information in Section OR OWNER'S REPRESENTATIVE) CER			
The property owner or owner's authorized re	presentative who completes Sections A, B, C (I he statements in Sections A, B, C, and E are co	terns C3.h and C3.l		hout a FEMA-issued or community
	THORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
				Check here If attachmen
SECTION G - COMMUNITY INFORMA	Contraction of the second s		-	
rificate. Complete the applicable item(s) an .  The Information in Section C was take state or local law to certify elevation in .  A community official completed Section	dinance to administer the community's foodpla In from other documentation that has been sign formation. (Indicate the source and date of the In E for a building located in Zone A (without a F 9) is provided for community floodplain manage	ed and embossed by elevation data in the EMA-issued or comm	r a licensed surveyor, engin Comments area below.)	eer, or architect who is authorized i
. Ine tokowing information (items G4-G			ATE CERTIFICATE OF COMP	
. [] The following information (Herns G4-G H. PERWIT NUMBER	G5. DATE PERMIT ISSUED	GO. UP		UANCE/CCCUPANCY ISSUED
19 10 10 10 10 10 10 10 10 10 10 10 10 10	Construction Substantial Improvement basement) of the building is:		,ft.(m)	Datum:
4. PERMIT NUMBER This permit has been issued for: [1] New C Bevation of as-built lowest floor (including i	Construction Substantial Improvement basement) of the building is:	TITLE		the second statements
4. PERMIT NUMBER This permit has been issued for: I New C Bevation of as-built lowest floor (including I BFE or (in Zone AO) depth of flooding at th	Construction Substantial Improvement basement) of the building is:	L	,ft(m) ,ft(m)	Datum:
4. PERMIT NUMBER This permit has been issued for: I New C Bevation of as-built lowest floor (including I BFE or (in Zone AO) depth of flooding at th DCAL OFFICIAL'S NAME	Construction Substantial Improvement basement) of the building is:	TILE	,ft(m) ,ft(m)	Datum:
4. PERMIT NUMBER This permit has been issued for: I New C Bevation of as-built lowest floor (including i BFE or (in Zone AO) depth of flooding at th DCAL OFFICIAL'S NAME DMMUNITY NAME	Construction Substantial Improvement basement) of the building is:	TITLE TELEPHON	,ft(m) ,ft(m)	Datum:
I. PERMIT NUMBER This permit has been issued for: I New C Bevation of as-built lowest floor (including I BFE or (in Zone AO) depth of flooding at th CAL OFFICIAL'S NAME DMMUNITY NAME SNATURE	Construction Substantial Improvement basement) of the building is:	TITLE TELEPHON	,ft(m) ,ft(m)	Datum:

÷

1. Property ID:	2
2. Property Owner:	SCHEIBE, STEVEN D.
3. Property Address: (No PO or Route No)	3001 HUMMINGBIRD DRIVE
4. City, State, Zip Code:	NASHVILLE, TN 37218
5. Tax Parcel ID:	059 14 0 009.00
6. Property Tax ID:	
7. Latitude:	36.218809
8. Longitude:	-86.821244
Property Data	I PARA A DESCRIPTION AT DR PARA
9. Property owner have flood insurance?	Yes
10. If Yes, Insurance Policy Provider:	100
	AMERICAN NATHIONAL PROPERTY AND CASUALTY COMPANY
11. If Yes, NFIP Policy Number:	8702406007
12. Repetitive Loss Number:	Yes
13. Is property in a:	Floodplain
14. Flood Zone Designation:	AE or A 1-30
15. Panel Number of FIRM used to determine the above:	
	47037C0229H
16. Date of FIRM:	4/5/2017
17. Construction Date of Structure:	1958
18. Building Type:	1-story w/o basement
19. Construction Type:	Wood Frame
20. Foundation of Building:	Crawl Space
21. Type of Residency:	Rental Property
22. If Rental, how many units are occupied?	N/A
23. If Rental, tenant names:	N/A
24. If property is a critical facility, what type?	N/A
25. Any historic building controls (easements, etc.)?	No
26. Percent of structure's damage:	50-99%
27. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value
28. What is the source of flooding?	Rivering Flooding
Proposed Cost to Acquire Property	
29. Appraisal	\$ 500.00
30. Fair Market Value	\$ 138,240.00
31. Closing Cost/Legal Fees	\$ 2,500.00
32. Demolition (including EAS & Abatement)	\$ 34,000.00
33. Uniform Relocation Assistance	\$ -
34. Comparable Housing	\$ -
35. Other (specify): Termination Water & Sewer	\$ 5,000.00
36. Total of 29-35:	\$ 180,240.00
37. Program Income:	
38. Duplication of Benefits:	
39. Total of 37-38:	-
40. Total Cost to Acquire Property:	\$ 180,240.00
	180,240.00
Attach the following:	
41. Pictures showing front, back and side view.	Yes
42. Elevation Certificate	Yes
43. Hazardous Materials Certification	Will be provided when project is closed out
44. Signed Notice of Voluntary Interest:	Yes

Unofficial Property Record Card

# Unofficial Property Record Card

Davidson County, TN Assessor of Property

## **GENERAL PROPERTY INFORMATION**

Map & Parcel: 059 14 0 009.00 Current Owner: SCHEIBE, STEVEN D. Malling Address: P O BOX 1024 FAIRVIEW, TN 37062 Zone: 4 Neighborhood: 3534

#### Location: 3001 HUMMINGBIRD DR Land Area: 0.71 Acres Most Recent Sale Date: 01/15/2003 Most Recent Sale Price: \$52,000 Deed Reference: 20030131-0013345 Tax District: USD

## CURRENT PROPERTY APPRASIAL

Assessment Year: 2018 Land Value: \$27,900 Improvement Value: \$74,500 Total Appraisal Value: \$102,400 Assessment Classification\*: RES Assessment Land: \$6,975 Assessment Improvement: \$18,625 Assessment Total: \$25,600

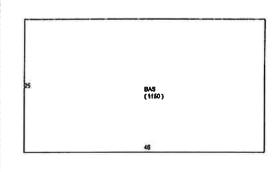
## LEGAL DESCRIPTION

LOT 224 SEC 1 TREPPARD HGTS

## IMPROVEMENT ATTRIBUTES - Card 1 of 1

Building Type: SINGLE FAM Year Built: 1958 Square Footage: 1,150 Number of Living Units: 1 Building Grade: C Building Condition: Average Rooms: 6 Beds: 2 Baths: 1 Half Bath: 0 Flxtures: 5 Exterior Wall: BRICK Frame Type: RESD FRAME Story Height: ONE STY Foundation Type: CRAWL Roof Cover: ASPHALT





\*This classification is for assessment purposes only and is not a zoning designation, nor does it speak to the legality of the current use of the subject property.



STEVEN D. SCHEIBE P. O. BOX 1024 FAIRVIEW, TN 37062

## Flood Mitigation Home Buyout Program Homeowner Interest Sign-up Sheet & Voluntary Notice

If you are interested in exploring your options for reducing your flood losses by taking part in our Flood Mitigation Home Buyout Program, please complete this form. Signing the form does not commit you to any action, but if you do not sign and return this form, your property will NOT be considered for buyout in the Flood Mitigation Assistance Grant Program. Please direct questions concerning this program to (615) 862-4516 or (615) 862-4582.

Property Address: Owner(s) Mailing Address: Owner(s) Name: Contact Phone Number:

3001 HUMMINGBIRD DRIVE, NASHVILLE, TN 37218 P. O. BOX 1024, FAIRVIEW, TN 37062 SCHEIBE, STEVEN D.

The local government is required by FEMA to inform you that your participation in this project for open-space acquisition is *voluntary*. Neither the *State* nor the *Local Government* will use its eminent domain authority to acquire the property for open-space purposes if you choose not to participate, or if negotiations fail. If you have flood insurance, please include your Flood Insurance Policy information, including your policy number.

Mail the signed form to: Department of Water and Sewerage Services Stormwater Division - Flood Buyout Program 800 Second Avenue South Nashville, TN 37210

Check one:

Yes, I want to be in the buyout program.

□ No, I do not want to be in the program.

Stor D. Schelle

**Owner's Signature** 

9/23/2018

Date

**Owner's** Signature

Date

**Owner's Signature** 

Date

#### DEPARTMENT OF HOMELAND SECURITY EMERGENCY PREPAREDNESS AND RESPONSE DIRECTORATE FEDERAL EMERGENCY MANAGEMENT AGENCY DECLARATION AND RELEASE

O.M.B. NO. 1660-0002 Expires September 30, 2006

	DECLARA	TION AND	RELEASE		1
			DECLARATION AND RELEASE		
States.		the sheet and	, a member of the household must be a citiz return it to the Inspector, and show him if you have any questions.		
I here	by declare, under penalty of perjury	that (check on	ıc):		
X	I am a citizen or non-citizen national	of the United S	Štates.		
	I am a qualified alien of the United S	tates			
	I am the parent or guardian of a mine full name and age of minor child:	r child who res	ides with me and who is a citizen, non-citizen	en national, or qualified alier	of the United States. Print
By my	signature I certify that:				
	* I will return any disaster aid money disaster aid money for the purpose for I understand that, if I intentionally State laws, which carry severe crimin I understand that, the information p Homeland Security (DHS) including, I authorize FEMA to verify all infor determine my eligibility for disaster a	arding my apply I received from r which it was i make false state al and civil pen rovided regardi but not limited mation given b ssistance; and of my insurance	lication for FEMA disaster assistance is tru n FEMA or that State if I receive insurance	or other money for the same empt to obtain disaster aid, it prisonment, or both (18 U.S.C tance may be subject to sharin Enforcement. , income, employment and de	loss, or if I do not use FEMA is a violation of federal and C. §§ 287, 1001, and 3571). ng within the Department of spendents in order to
NAME (	(Print) N D. SCEEIBE	SIGNATURE	-1) = choile	DATE OF BIRTH	DATE SIGNED 9/23/2018
	TOR ID NO.	FEMA APPL PDM-2018-R	ICATION NO.	DISASTER NO.	1/23/2018
			CITY NASHVILLE	STATE TN	ZIP CODE 37218
data, and	completing and submitting the form.	You are not req	uired to complete this collection of informa- of this form. Send comments regarding the	ation unless a valid	

O.M.B. control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden and estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Emergency Preparedness and Response Directorate, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20472, Paperwork Reduction Project (1660-0002). NOTE: Do not send your completed form to this address.

FEMA Form 90-69B, Sep 03

Home » Latitude and LongItude of a Point

To find the latitude and longitude of a point you can do any of the following ...



 1. Press and Hold the Shift Key then Click on the point on the map.

 2. Drag the red marker.

 3. Enter the Address 3001 Hummingbird Drive, Nashville, TN

GO

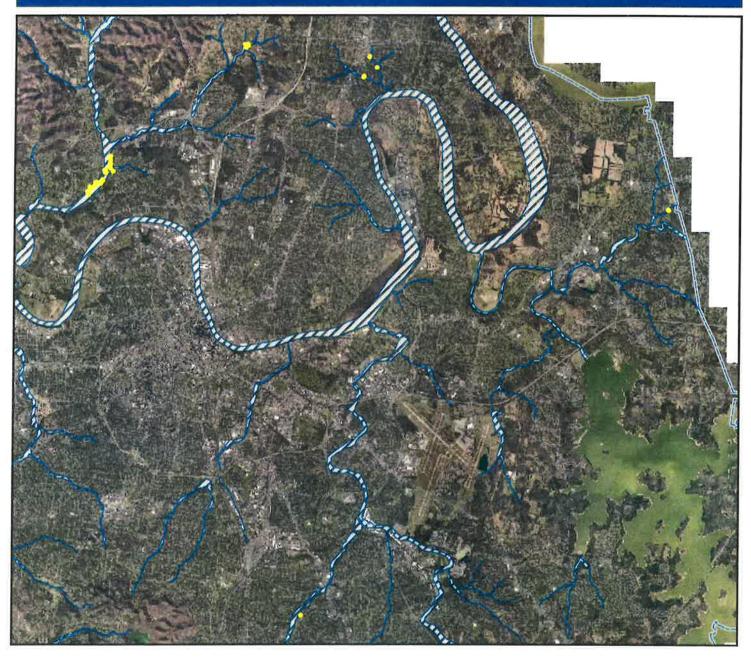
## Latitude and Longitude of a Point



	Show Point from Latitude and Longitude
Clear / Reset : Remove Last Blue Marker Center Red Marker	Use this if you know the latitude and longitude coordinates of a point and want to see where on the map the point is. Use: + for N Lat or E Long - for S Lat or W Long.
Get the Latitude and Longitude of a Point	Example: +40.689060 -74.044636 Note: Your entry should not have any embedded spaces.
When you click on the map, move the marker or enter an address the latitude and longitude coordinates of the point are inserted in the boxes below.	Decimal Deg. Latitude:
Latitude: 36.218809	Decimal Deg. Longitude:
Longilude: -86.821244	Show Point
Degrees     Minutes     Seconds       Latitude:     36     13     7.7124       Longitude:     -86     49     16.4776	Example: +34         40         50.12         for 34N 40' 50.12"           Degrees         Minutes         Seconds           Latilude:

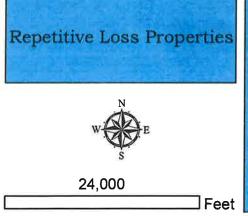
© getLstLong.net 2018 | Credits and Disclaimers | Privacy Policy

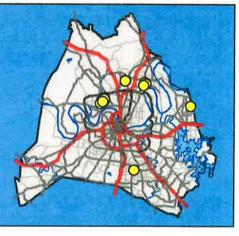
# **Repetitive Loss Properties**

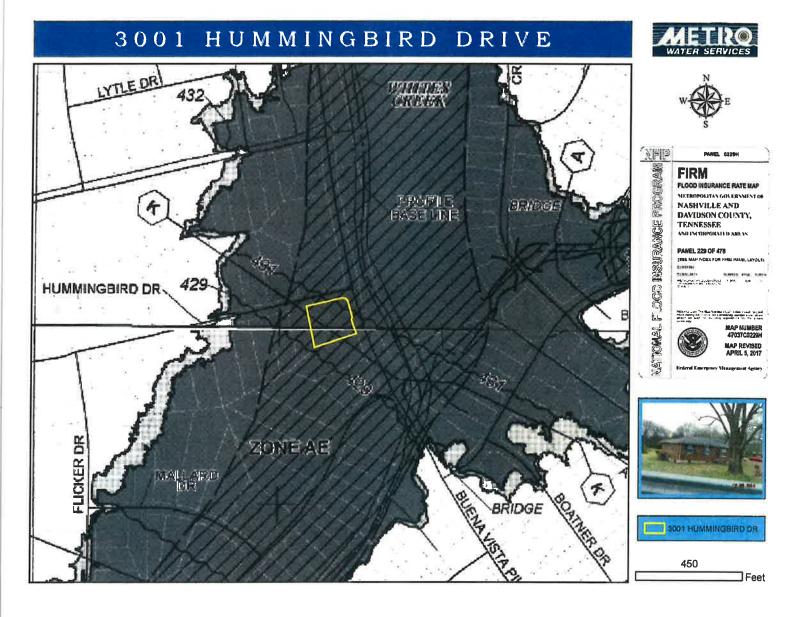




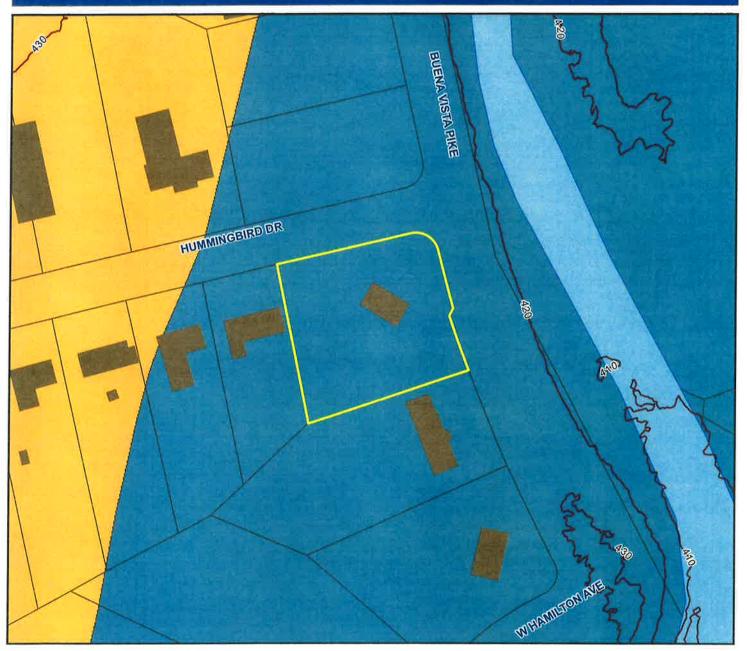




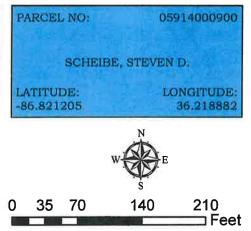


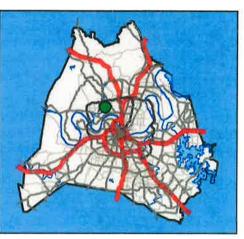


# 3001 HUMMINGBIRD DRIVE

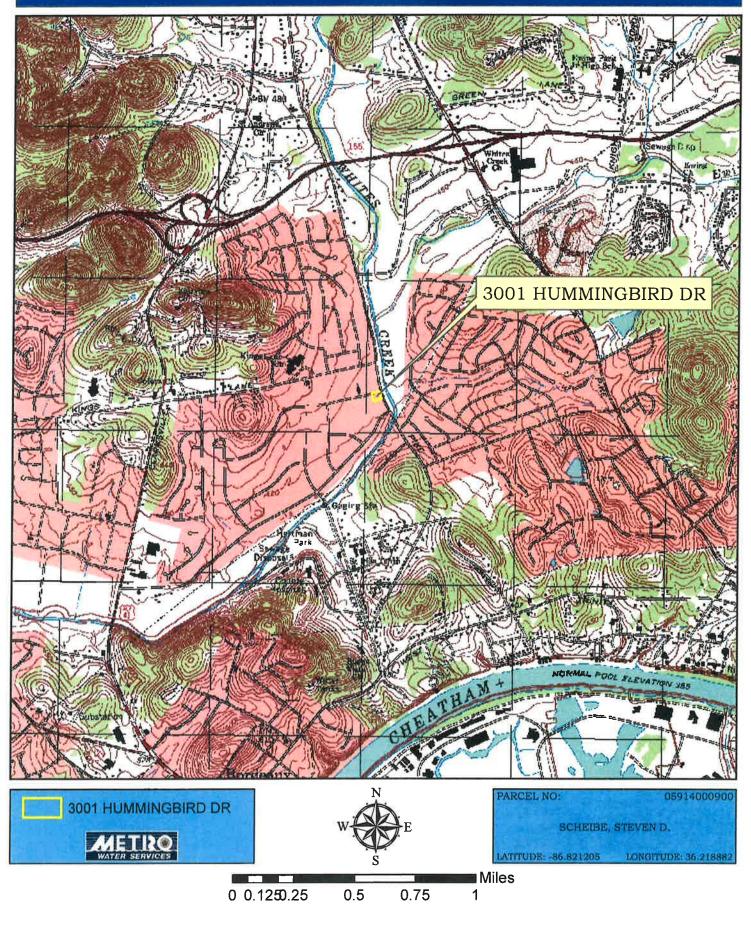








# 3001 HUMMINGBIRD DRIVE







3001 Hummingbird Drive Nashville, TN 37218 Parcel # 059 14 0 009.00 36.218809 -86.821244

	1	FLOOD INSURANCE PROGRAM	1 0. Fv	M.B. No. 3067-0077 pires December 31, 200
	100 000 00 Bag	ATION CERTIFICATE ead the Instructions on pages 1		A COLUMN TWO IS NOT THE OWNER.
		-PROPERTY OWNER INFORM		ar 05914000900
BUILDING OWNER'S NAME	OLUNIAA	- FROFERIT OWNER INFORM	ATION	For Insurance Company Use:
ROBINSON, LEON				Policy Number
BUILDING STREET ADDRESS (Includi 3001 HUMMINGBIRD DR	ing Apt., Unit, Suite, and/or	Bidg. No.) OR P.O. ROUTE AND E	BOX NO.	Company NAIC Number
CITY NASHVILLE, TN		STATE TENNESSEE	ZIP C 37218	
PROPERTY DESCRIPTION (Lot and B LOT 224 SEC 1 TREPPARD HGTS	lock Numbers, Tax Parcel I	Number, Legal Description, elc.)		
BUILDING USE (e.g., Residential, Non-re	esidential, Addition, Access	ory, etc. Use a Comments area, if	necessary.)	
LATITUDE/LONGITUDE (OPTIONAL) (##°-## - ##.##" or ##.######)	HORIZON	NTAL DATUM: SOURCE: GPS		Other:
	SECTION B - FLOOD IN	NSURANCE RATE MAP (FIRM)	NFORMATION	We want the second s
B1, NFIP COMMUNITY NAME & COMMUNITY N	UMBER B	2. COUNTY NAME	1	BO. STATE
470040		AVIDSON		TENNESSEE
B4. MAP AND PANEL NUMBER B5. SUFFIX 47037C0202 F	B6. FIRM INDEX DATE April 20, 2001	B7. FIRM PANEL EFFECTIVE/REVISED DATE April 20, 2001	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S (Zone AO, use depth of flooding) 431.0
B10. Indicate the source of the Base Flood Elev FIS Profile AFIRM B11. Indicate the elevation datum used for the E B12. Is the building located in a Coastal Barrier	Community Determine FE in B9: NGVD 1929	od Other (Describe) NAVD 1988 Oth	or (Describe).	01 Date
SE	CTION C - BUILDING FL	EVATION INFORMATION (SUR	FY REOLIDED	
1. Building elevations are based on: Construc				
*A new Elevation Certificate will be required 2. Building Diagram Number (Select the buildin accurately represents the building, provide a 2. Elevations – Zones ALA 20 AE ALA 2014	vg diagram most similar to the sketch or photograph.)	e building for which this certificate is be 6		is 6 and 7. If no diagram
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to descent the section B.</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th rements and datum conversion calcula	R/AH, AR/AO e datum is different from	the datum used for the BFE in idea or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations – Zones A1-A30, AE, AH, A (with Complete items C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments</li> </ol>	ng diagram most similar to the sketch or photograph.) BFE), VE, VI-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In them C2. State the datum used. If th rements and datum conversion calcula in.	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations Zones A1-A30, AE, AH, A (with Complete items C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to of Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion ocument the datum conversion oces the elevation reference m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th rements and datum conversion calcula in.	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
2 Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete items C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to of Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion ocument the datum conversion oces the elevation reference m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? X Y <u>426.2</u> & (m)	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
2 Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used fo Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion cost the elevation reference m ntor enclosure)	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? X Y <u>426.2</u> & (m) ft (m)	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used fo Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom toor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion cost the elevation reference m ntor enclosure)	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In them C2. State the datum used. If th rements and datum conversion calculation. ark used appear on the FIRM? XY <u>426.2</u> ft (m) ft (m) ft (m)	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete thems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structurel m o d) Attached garage (top of stab)</li> </ol>	ng diagram most similar to the asketch or photograph.) I BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion cost the elevation reference m ntor enclosure) nember (V zones only)	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? X Y <u>426.2</u> & (m) ft (m)	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete liems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural r o d) Attached garage (top of slat)) o e) Lowest clevation of machinery and/or e</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, VI-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio cost the elevation reference m nt or enclosure) nember (V zones only) equipment	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th rements and datum conversion calcula in. Eark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(m) ft.(m)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO	the datum used for the BFE in ided or the Comments area of
2 Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used fo Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structurel m o d) Attached garage (top of slat) o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comments)	ng diagram most similar to the sketch or photograph.) BFE), VE, VI-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio cost the elevation reference m ntor enclosure) nember (V zones only) equipment ants area)	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A lin hem C2. State the datum used. If th tements and datum conversion calcula in. trans used appear on the FIRM? [X] Y. <u>426.2</u> ft.(m) ft.(m) ft.(m)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations - Zones A1-A30, AE, AH, A (with Complete Items C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> Dr o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of stati) o e) Lowest elevation of machinery and/or servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG)</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio cost the elevation reference m intor enclosure) nember (V zones only) equipment ants area)	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A lin hem C2. State the datum used. If th rements and datum conversion calcula in. ark used appear on the FIRM? [X] Y. <u>428.2</u> ft.(m) ft.(m) ft.(m) ft.(m)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations Zones A1-A30, AE, AH, A (with Complete Items C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> Di o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of stab) o e) Lowest elevation of machinery and/or servicing the building (Describe In a Comme o f) Lowest adjacent (finished) grade (LAG) o g) Highest adjacent (finished) grade (LAG)</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio coes the elevation reference m intor enclosure) nember (V zones only) equipment ants area)	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A lin hem C2. State the datum used. If th tements and datum conversion calcula in. trans used appear on the FIRM? [X] Y. <u>426.2</u> ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete fiems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to of Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> Dt o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of slab) o e) Lowest clevation of machinery and/or e servicing the building (Describe In a Comme o f) Lowest adjacent (finished) grade (LAG) o h) No. of permanent openings (flood veries</li> </ol>	ng diagram most similar to the a sketch or photograph.) BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio constitute datum conversio conversio conversio constitute datum c	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A lin hem C2. State the datum used. If th rements and datum conversion calcula in. ark used appear on the FIRM? [X] Y. <u>428.2</u> ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) ft.(m)	R/AH, AR/AO e datum is different from tion. Use the space prov	the datum used for the BFE in ided or the Comments area of
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete items C3a-i below according to Section B, convert the datum to that used fo Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> Dc o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (lop of slab) o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG) o g) Highest adjacent (finished) grade (LAG)</li> </ol>	ng diagram most similar to the hisketch or photograph.) I BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversio cost the elevation reference m ntor enclosure) hember (V zones only) equipment ants area) a) within 1 ft. above adjacent g cod vents) in C3.h.,sq. in. (sq.	a building for which this certificate is be 6 IFE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? XY <u>426.2</u> ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) rade cm)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO res No res control of the space res control of the	the datum used for the BFE in ided or the Comments area of
<ul> <li>2 Building Diagram Number (Select the build accurately represents the building, provide a accurately represents the building, provide a accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (IAG) o h) No. of permanent openings (flood venis o i) Total area of all permanent openings (flood venis o i)</li></ul>	ng diagram most similar to the a sketch or photograph.) I BFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ents area) a) within 1 ft. above adjacent g sod vents) in C3.h _sq. In. (sq. SECTION D - SURVEYOR by a land surveyor, engine	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? X Y <u>426.2</u> & (m) ft (m)	R/AH, AR/AO e datum is different from tion. Use the space prov es INO res No The State of the space prov to space	the datum used for the BFE in ided or the Comments area of G. CA
<ul> <li>2 Building Diagram Number (Select the build accurately represents the building, provide a accurately represents the building, provide 3. Elevations - Zones A1-A30, AE, AH, A (with Complete forms C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom foor (including baseme o b) Top of next higher floor</li> <li>o c) Bottom of lowest horizontal structural m o d) Attached garage (top of slab)</li> <li>o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (IAG)</li> <li>o h) No. of permanent openings (flood venise o h) Total area of all permanent openings (flood venise o h) Total area of all permanent openings (flood venise o h) No. of permanent openings (flood venise o h) No. and permanent openi</li></ul>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(	R/AH, AR/AO e datum is different from tion. Use the space provi es INO res No <u>res</u> provide the space provide the space	the datum used for the BFE in ided or the Comments area of G. CA
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a courately represents the building, provide a sections - Zones A1-A30, AE, AH, A (with Complete thems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom foor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of stab) o e) Lowest elevation of machinery and/or servicing the building (Describe In a Comme o f) Lowest adjacent (finished) grade (LAG o h) No. of permanent openings (flood vens o h) Total area of all permanent openings (flood his certification is to be signed and sealed certify that the information in Sections A, B understand that any false statement may b</li> </ol>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft(m) ft	R/AH, AR/AO e datum is different from tion. Use the space provi es INO res No <u>res</u> provide the space provide the space	the datum used for the BFE in ided or the Comments area of G. CA
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a scurately represents the building, provide a scurately represents the building, provide a scuton B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (lop of stab) o e) Lowest elevation of machinery and/or servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG o h) No. of permanent openings (flood vents o h) Total area of all permanent openings (flood vents o h) Total area of all permanent openings (flood vents of the information in Sections A, B ventor that the information in Sections</li></ol>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(	R/AH, AR/AO e datum is different from tion. Use the space provi es INO res No <u>res</u> provide the space provide the space	the datum used for the BFE in ided or the Comments area of G. CA
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete thems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of stab) o e) Lowest elevation of machinery and/or servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG o h) No. of permanent openings (flood vents o h) Top al reat of all permanent openings (flood vents o h) Total area of all permanent openings (flood Vents o h) Total area of all permanent openings (flood Vents o h) Total area of all permanent openings (flood Partification is to be signed and sealed certify that the information in Sections A, B understand that any false statement may to ERTIFIER'S NAME hillip Grant Chapman</li> </ol>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? X Y <u>426.2</u> & (m) ft (m)	R/AH, AR/AO e datum is different from tion. Use the space provi es INO res No <u>res</u> page 1 of the data available.	the datum used for the BFE in ided or the Comments area of G. CA
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide 3. Elevations Zones A1-A30, AE, AH, A (with Complete thems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (lop of slab) o e) Lowest elevation of machinery and/or servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG o h) No. of permanent openings (flood vents o h) Total area of all permanent openings (flood vents o h) Total area of all permanent openings</li></ol>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(	R/AH, AR/AO e datum is different from tion. Use the space provi es INO source of the space provi source of the space provide	the datum used for the BFE in ided or the Comments area of G. CA
<ol> <li>Building Diagram Number (Select the build accurately represents the building, provide a scurately represents the building, provide a scurately represents the building, provide a scuton B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (lop of stab) o e) Lowest elevation of machinery and/or servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG o h) No. of permanent openings (flood vents o h) Total area of all permanent openings (flood vents o h) Total area of all permanent openings (flood tertify that the information in Sections A, B understand that any false statement may b ERTIFIER'S NAME hillip Grant Chapman TILE urvey Manager DDRESS</li> </ol>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(	RIAH, ARIAO e datum is different from tion. Use the space provi es INO source for the space provi source for the space provide	the datum used for the BFE in ided or the Comments area of G. CA
22 Building Diagram Number (Select the build accurately represents the building, provide a 3. Elevations – Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural m o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (IAG o h) No. of permanent openings (flood venis o h) Total area of all permanent openings (flood venis o h) Ro. of permanent openings (flood venis o h) Total area of all permanent openings (flood venis o h) Ro. of permanent openings (flood venis o h) Ro. of permanent openings (flood venis o h) Total area of all permanent openings (flood venis o h) Total area of all permanent openings (flood venis o h) Ro. of p	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 6 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> ft.(m) ft.(	R/AH, AR/AO e datum is different from tion. Use the space provi es INO source of the space provi source of the space provide	the datum used for the BFE in ided or the Comments area of G. CA
<ul> <li>22. Building Diagram Number (Select the build accurately represents the building, provide a accurately represents the building, provide a accurately represents the building, provide a section S. Elevations – Zones A1-A30, AE, AH, A (with Complete fiems C3a-i below according to Section B, convert the datum to that used for Section D or Section G, as appropriate, to d Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> D o a) Top of bottom floor (including baseme o b) Top of next higher floor</li> <li>o c) Bottom of lowest horizontal structural m o d) Attached garage (top of slab)</li> <li>o e) Lowest elevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG)</li> <li>o j) Highest adjacent (finished) grade (HAG o h) No. of permanent openings (flood vens o i) Total area of all permanent openings (flood vens o ii) Total area of all permanent openings (flood vens funderstand that any false statement may the Building Grant Chapman</li> <li>TILE</li> <li>urvey Manager</li> <li>DDRESS</li> </ul>	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> & (m) f. (m	RIAH, ARIAO e datum is different from tion. Use the space provi es INO Figure 100 Figure	the datum used for the BFE in ided or the Comments area of G. CAND G. CAND G G. CAND G G. CAND G. CAND
22. Building Diagram Number (Select the build accurately represents the building, provide a 33. Elevations Zones A1-A30, AE, AH, A (with Complete terms C3a-i below according to Section B, convert the datum to that used fo Section D or Section G, as appropriate, to of Datum <u>NGVD29</u> Conversion/Comments Elevation reference mark used <u>RM 204-1</u> Dt o a) Top of bottom floor (including baseme o b) Top of next higher floor o c) Bottom of lowest horizontal structural o d) Attached garage (top of slab) o e) Lowest clevation of machinery and/or e servicing the building (Describe in a Comme o f) Lowest adjacent (finished) grade (LAG) o h) No. of permanent openings (flood venis	ng diagram most similar to the a sketch or photograph.) IBFE), VE, V1-V30, V (with B the building diagram specified r the BFE. Show field measur ocument the datum conversion conset the elevation reference me ntor enclosure) nember (V zones only) equipment ants area) a) within 1 ft. above adjacent g sood vents) in C3.h _sq. in. (sq. SECTION D - SURVEYOR by a land surveyor, engine a, and C on this cartificate m	a building for which this certificate is be 8 FE), AR, AR/A, AR/AE, AR/A1-A30, A In hem C2. State the datum used. If th ements and datum conversion calcula in. ark used appear on the FIRM? [X] Y <u>426.2</u> & (m) f. (m) f. (m) f. (m) f. (m) f. (m) f. (m) f. (m) f. (m) R. (m) rade cm) ENGINEER, OR ARCHITECT CERT ter, or architect authorized by law to appresents my bast efforts to interpu- prisonment under 18 U.S. Code, Se LICENSE NUMBER TN RLS 2007 COMPANY NAME Amec Earth & Environm CITY Nashville DATE	RIAH, ARIAO e datum is different from tion. Use the space provi es INO Figure 100 Figure	the datum used for the BFE in ided or the Comments area of G. CAND G. CAND G G. CAND G G. CAND G. CAND

ľ

	spaces, copy the corresponding information S (Including Apl, Unit, Suite, and/or Bidg, No.) OR P.O. ROL			For Insurance Company Use: Policy Number
3001 HUMMINGBIRD D				ruidy Nutifier
CITY NASHMILLE, TN		STATE TENNESSEE	ZIP CODE 37218	Company NAIC Number
	OR, ENGINEER, OR ARCHITECT CERTIFICA			
Copy both sides of this Elevi COMMENTS	ation Certificate for (1) community official, (2) insurance	e agent/company, and (3) b	ulding owner.	
				Check here if attachm
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE	AO AND ZONE A (WI	THOUT BEE)
Section C must be completed. E1. Building Diagram Number, represents the building, pri E2. The top of the bottom floor natural grade, if available), E3. For Building Diagrams 6-8 r grade. Complete items C3 E4. For Zone AO only: 1 f no floor	(Select the building diagram most similar to the buil ovide a sketch or photograph.) (including basement or enclosure) of the building is with openings (see page 7), the next higher floor or a 3.h and C3.1 on front of form. od depth number is available, is the top of the bottom	ding for which this certificate ( _ft.(m) _in.(cm) [] above of levated floor (elevation b) of t floor elevated in accordance	is being completed — see pa or 🔲 below (check one) th he building isfl.(m)i	ages 6 and 7. If no diagram accurs ne highest adjacent grade. (Use n.(cm) above the highest adjacent
Yes No Un	known. The local official must certify this information	in Section G.		
	Y OWNER (OR OWNER'S REPRESENTATIV			
issued BFE) or Zone AO mus	s authorized representative who completes Sections it sign here. The statements in Sections A, B, C, and	E are correct to the best of n	only), and E for Zone A (with ty knowledge.	hout a FEMA-issued or communi
PROPERTY OWNERSOR	OWNER'S AUTHORIZED REPRESENTATIVE'S N	ME		
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
		a <sup>r</sup>		Check here If attachme
SECTION G - COMMUNIT	Y INFORMATION (OPTIONAL)			
Inicate: Complete the application in Section     State or local law to cert     Community official com     O A community official com     O The following information	ed by law or ordinance to administer the community's able item(s) and sign below. on C was taken from other documentation that has be if y elevation information. (Indicate the source and da npleted Section E for a building located in Zone A (with n (Items G4-G9) is provided for community floodplain	en signed and embossed by le of the elevation data in the hout a FEMA-issued or com	a licensed surveyor, engin Comments area below (	eer, or architect who is authorized
14. PERMIT NUMBER	GS. DATE PERMIT ISSUED	Ģ6. D/	TE CERTIFICATE OF COMP	LIANCE/OCCUPANCY ISSUED
. Bevalion of as-built lowest fic	for: New Construction Substantial Improveme for (including basement) of the building is: f flooding at the building site is:	nt	t(m)	Datum:
OCAL OFFICIAL'S NAME		TITLE	ft.(m)	Datum:
OMMUNITY NAME	1995	TELEPHON	E	
GNATURE		DATE		
OMMENTS				
				Check here if attachmen
A Form 81-31, January 20	003 See reverse si	de for continuation.		Replaces all previoùs edit

1. Property ID:	3
2. Property Owner:	MCGILL, CARL Y. & KEITH
3. Property Address: (No PO or Route No)	1152 TUCKAHOE DRIVE
4. City, State, Zip Code:	NASHVILLE, TN 37207
5. Tax Parcel ID:	041 16 0 012.00
6. Property Tax ID:	
7. Latitude:	36.260803
8. Longitude:	-86.762976
Property Data	
9. Property owner have flood insurance?	Yes
10. If Yes, Insurance Policy Provider:	
11. If Yes, NFIP Policy Number:	
12. Repetitive Loss Number:	
13. Is property in a:	Floodplain
14. Flood Zone Designation:	AE or A 1-30
15. Panel Number of FIRM used to determine the above:	
15. Fallel Number of FIRM used to determine the above.	47037C0119H
16. Date of FIRM:	4/5/2017
17. Construction Date of Structure:	1954
18. Building Type:	1-story w/o basement
19. Construction Type:	Wood Frame
20. Foundation of Building:	Basement
20. Type of Residency:	Rental Property
22. If Rental, how many units are occupied?	N/A
22. If Rental, tenant names:	N/A
24. If property is a critical facility, what type?	N/A
	No
25. Any historic building controls (easements, etc.)?	1-49%
26. Percent of structure's damage:	
27. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market value
28. What is the source of flooding?	Rivering Flooding
Proposed Cost to Acquire Property	
29. Appraisal	\$ 500.00
30. Fair Market Value	\$ 199,665.00
31. Closing Cost/Legal Fees	\$ 2,500.00
32. Demolition (including EAS & Abatement)	\$ 34,000.00
33. Uniform Relocation Assistance	\$ -
34. Comparable Housing	\$ -
35. Other (specify): Termination Water & Sewer	\$ 5,000.00
36. Total of 29-35:	\$ 241,665.00
37. Program Income:	\$ -
38. Duplication of Benefits:	\$ -
39. Total of 37-38:	\$ -
40. Total Cost to Acquire Property:	\$ 241,665.00
Attach the following:	241,005.00
41. Pictures showing front, back and side view.	Yes
42. Elevation Certificate	Yes
43. Hazardous Materials Certification	Will be provided when project is closed out
14. Signed Notice of Voluntary Interest:	Yes

Only one of the following Benefit Cost Analysis sections must be completed. The Full Data Module requires data from the NFIP's Flood Insurance Study and surveying. The Damage Frequency Assessmen requires gathering damage information from the property residents. Also, if the Damage Frequency Assessment is chosen, there must be at least three events information.

Davidson County, TN Assessor of Property

# Unofficial Property Record Card

### **GENERAL PROPERTY INFORMATION**

Map & Parcel: 041 16 0 012.00 Current Owner: MCGILL, CARL Y. & KEITH E. Malling Address: 1145 BELLSHIRE DR NASHVILLE, TN 37207 Zone: 5 Nelghborhood: 6829

#### Location: 1152 TUCKAHOE DR Land Area: 0.50 Acres Most Recent Sale Date: 12/01/2016 Most Recent Sale Price: \$0 Deed Reference: 20161201-0126175 Tax District: GSD

## **CURRENT PROPERTY APPRASIAL**

Assessment Year: 2018 Land Value: \$34,000 Improvement Value: \$113,900 Total Appraisal Value: \$147,900 Assessment Classification\*: RES Assessment Land: \$8,500 Assessment Improvement: \$28,475 Assessment Total: \$36,975

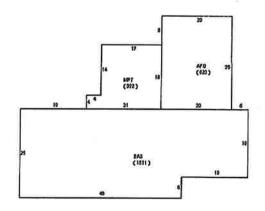
### LEGAL DESCRIPTION

LOT 119 SEC 5 BELLSHIRE EST

### IMPROVEMENT ATTRIBUTES - Card 1 of 1

Building Type: SINGLE FAM Year Built: 1954 Square Footage: 1,511 Number of Living Units: 1 Building Grade: C Building Condition: Average Rooms: 6 Beds: 3 Baths: 2 Half Bath: 0 Fixtures: 8 Exterior Wall: BRICK/FRAME Frame Type: RESD FRAME Story Height: ONE STY Foundation Type: CRAWL Roof Cover: ASPHALT





\*This classification is for assessment purposes only and is not a zoning designation, nor does it speak to the legality of the current use of the subject property.



MCGILL, CARL Y. & MCGILL, KEITH E. **1145 BELLSHIRE DRIVE** NASHVILLE, TN 37207

## **Flood Mitigation Home Buyout Program** Homeowner Interest Sign-up Sheet & Voluntary Notice

If you are interested in exploring your options for reducing your flood losses by taking part in our Flood Mitigation Home Buyout Program, please complete this form. Signing the form does not commit you to any action, but if you do not sign and return this form, your property will NOT be considered for buyout in the Flood Mitigation Assistance Grant Program. Please direct questions concerning this program to (615) 862-4582.

1152 TUCKAHOE DRIVE, NASHVILLE, TN 37207 Property Address: Owner(s) Mailing Address: 1145 BELLSHIRE DRIVE, NASHVILLE, TN 37207 MCGILL, CARL Y. & MCGILL, KEITH E. Owner(s) Name: Contact Phone Number: (1015) 800 - 93 98

The local government is required by FEMA to inform you that your participation in this project for open-space acquisition is voluntary. Neither the State nor the Local Government will use its eminent domain authority to acquire the property for open-space purposes if you choose not to participate. or if negotiations fail. If you have flood insurance, please include your Flood Insurance Policy information, including your policy number.

Mail the signed form to: Department of Water and Sewerage Services Stormwater Division - Flood Buyout Program 800 Second Avenue South Nashville, TN 37210

Check one:

Yes, I want to be in the buyout program.

**Owner's** Signature

**Owner's** Signature

No, I do not want to be in the program.

**Owner's Signature** 

Date

Latitude and Longitude of a Point

#### 🖄 getLatLong.net

C

Home » Latitude and Longitude of a Point

To find the latitude and longitude of a point you can do any of the following ...

1. Press and Hold the Shift Key then Click on the point on the map. 2. Drag the red marker.

3. Enter the Address 1152 Tuckahoe Drive, Nashville, TN

## Latitude and Longitude of a Point

Clear / Reset Remove Last Blue Marker Center Red Marker	Show Point from Latitude and Longitude Use this if you know the latitude and longitude coordinates of a point and want to see where on the map the point is.
Get the Latitude and Longitude of a Point	Use: + for N Lat or E Long - for S Lat or W Long. Example: +40.689060 -74.044636 Note: Your entry should not have any embedded spaces.
When you click on the map, move the marker or enter an address the latitude and	Decimal Deg. Latitude:
longitude coordinates of the point are inserted in the boxes below.	Decimal Deg. Longitude:
Latilude: 36.260603 Longitude: -86.762976	Show Point
Degrees Minutes Seconds Latitude: 36 15 38.8908	Example: +34 40 50.12 for 34N 40' 50.12" Degrees Minutes Seconds Latitude:

GO

Show Point

© getLatLong.net 2018 | Credits and Disclaimers | Privacy Policy

Longitude:

46.713

https://getlatlong.net/

Longitude:

-86

45

#### DEPARTMENT OF HOMELAND SECURITY EMERGENCY PREPAREDNESS AND RESPONSE DIRECTORATE FEDERAL EMERGENCY MANAGEMENT AGENCY DECLARATION AND RELEASE

#### O.M.B. NO. 1660-0002 Expires September 30, 2006

DECLA	ARATION AND RELEASE		
	DECLARATION AND RELE	CASE	
States. Please read the form carefully,	Disaster Assistance, a member of the household must b sign the sheet and return it to the Inspector, and sh immigration expert if you have any questions.	be a citizen, non-citizen national or quali low him/her a current form of photo ic	fied alien of the United lentification. Please feel
I hereby declare, under penalty of per	jury that (check one):		
🕅 I am a oitizen or non-citizen nati	ional of the United States.		
I am a qualified alien of the Uni	ted States		
I am the parent or guardian of a full name and age of minor child	minor child who resides with me and who is a citizen, a	non-citizen national, or qualified alien of	f the United States. Print
By my signature I certify that:			
* I will return any disaster aid m disaster aid money for the purpose I understand that, if I intentione State laws, which carry severe or I understand that, the informati Homeland Security (DHS) includ I authorize FEMA to verify all i determine my eligibility for disas	d regarding my application for FEMA disaster assistant oncy I received from FEMA or that State if I receive in se for which it was intended. ally make false statements or conceal any information it iminal and civil penaltics, including a fine up to \$ 250, on provided regarding my application for FEMA disast ling, but not limited to, the Bureau of Immigration and information given by me about my property/place of re- ter assistance; and ords of my insurance employer, any public or private ag	isurance or other money for the same los in an attempt to obtain disaster aid, it is a 000, imprisonment, or both (18 U.S.C. § ter assistance may be subject to sharing o Custom Enforcement. esidence, income, employment and deper	s, or if I do not use FEMA a violation of federal and is 287, 1001, and 3571). within the Department of ndents in order to
NAME (Print)	SIGNATURE	DATE OF BIRTH	DATE SIGNED
CARL Y. MCGILL INSPECTOR ID NO.	Carly, Mc Hill FEMA APPLICATION NO.	04-01-1447 DISASTER NO.	09-26-2018
	HMGP-FM 5759		
ADDRESS OF DAMAGED PROPERTY 1152 TUCKAHOE DRIVE	CITY NASHVILLE	STATE TN	ZIP CODE 37207
The Robert T. Stafford Disaster Relief and	PRIVACY ACT STATEMENT Emergency Assistance Act, 42 U.S.C. §§ 5121-5206, J	Executive Order 12148, as amended, and	d Title IV of the Personal
Responsibility and Work Opportunity Reca information is to determine your eligibility and state agencies providing disaster assist efforts or benefits are not duplicated; to age agencies or professional organizations whe elevant to an Agency decision concerning similar purpose from us; to a Congressiona n relation to private relief legislation under sonducted under the authority of 44 §§ 290	onciliation Act of 1996, 8 U.S.C. §§ 1601 et seq., author to receive FEMA disaster assistance. Disclosures of the ance, as well as to local governments or voluntary agen encies, organizations and institutions as necessary for n ire there may be a violation or potential violation of law issuance of a grant or other benefit, or in certain circum d office in response to an inquiry made at the request of r OMB Circular A-19; and to the National Archives and 4 and 2906. Your social security number is solicited du b. Furnishing the social security number, as well as other PAPERWORK BURDEN DISCLOSURE	orize the collection of this information. T his information may be made: Upon writt netes from which you are seeking assista mitigation planning and enforcement; to v; to a federal, state or local agency when mstances when a Federal agency request f the individual; to the Office of Manage d Records Administration in records man uring registration pursuant to the Debt C er information is voluntary, but failure to	The primary use of this ten request, to federal nce, so that assistance law enforcement n we request information s such information for a ement and Budget (OMB) nagement inspections ollection Improvement
ata, and completing and submitting the for	mated to average 2 minutes per response. The burden e m, You are not required to complete this collection of i upper right corner of this form. Send comments regardi	information unless a valid	

O.M.B. control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden and estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Emergency Preparedness and Response Directorate, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20472, Paperwork Reduction Project (1660-0002). NOTE: Do not send your completed form to this address.

FEMA Form 90-69B, Sep 03

#### 1152 Tuckahoe Drive

This structure is NOT slab on grade, it has a crawl space therefore there will be no ground disturbance for the foot print of the structure itself.

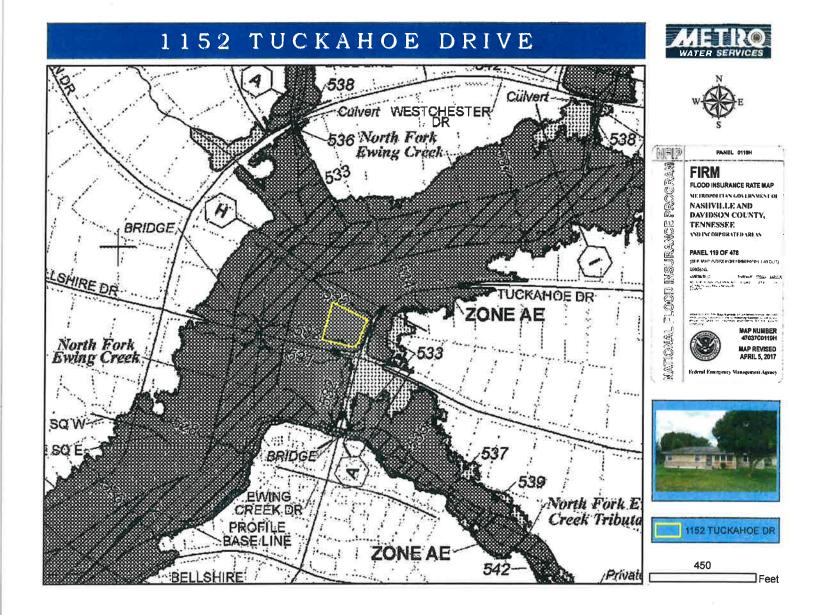
The property does have a sidewalk and driveway. During demolition the ground disturbance should be between 3 inches to 6 inches. Once the sidewalk and driveway are removed Metro will fill and grade the area that has the disturbance. This is something that Metro ALWAYS does.

Metropolitan Government of Nashville & Davidson County uses the assessed value on the property tax card and we multiply that by 35%. We add the assessed value on the property tax card and the 35% to get the estimated acquisition cost for each property. Upon approval of our grant application Metropolitan Government of Nashville & Davidson County will obtain an appraisal for the true Fair Market Value.

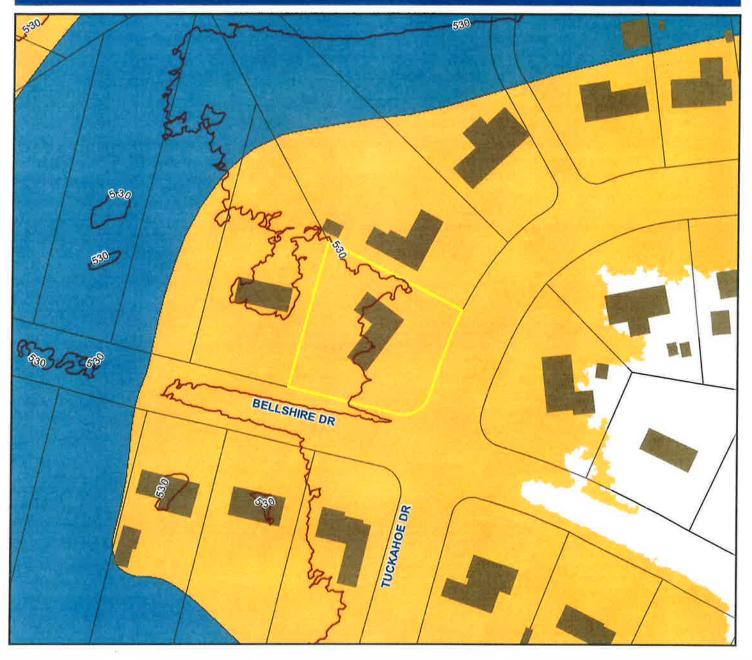
We have used this methodology for years when applying for Mitigation funded grants.

1152 Tuckahoe Drive	
Tax Card Value	\$ 147,900.00
Cushion of (x 35%)	\$ 51,765.00
Estimated Market Value	\$ 199,665.00

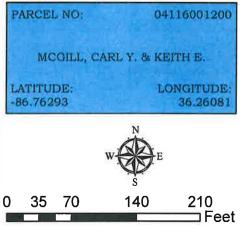
I hope the examples shown above, adequately explains the methodology of how we assess the estimated acquisition costs for each property.



# 1152 TUCKAHOE DR

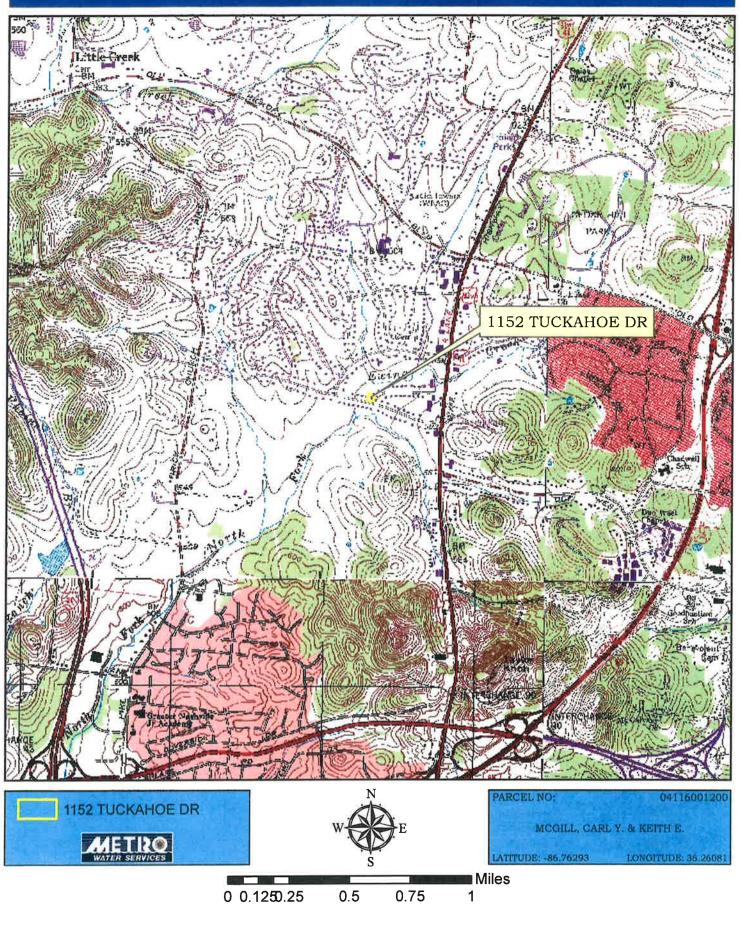




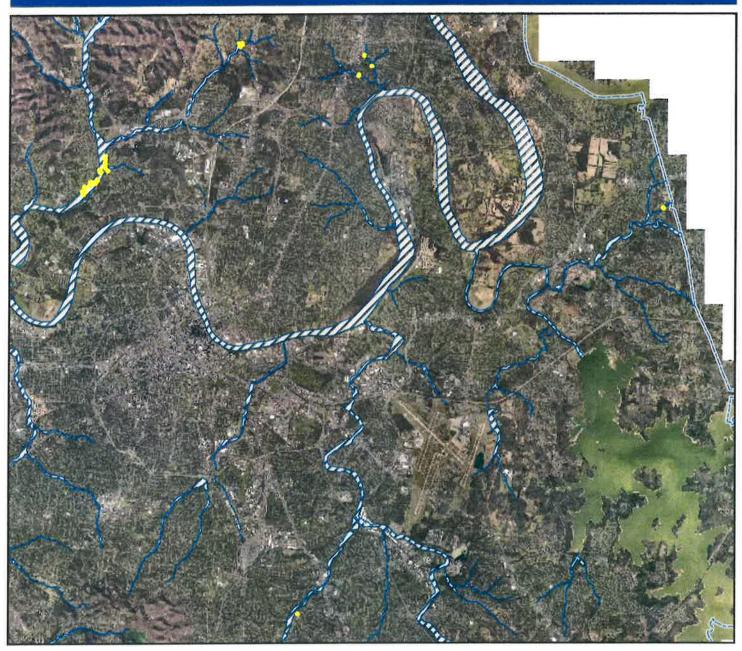




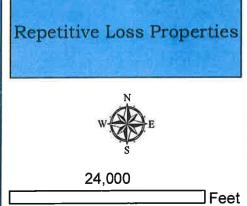
# 1152 TUCKAHOE DRIVE

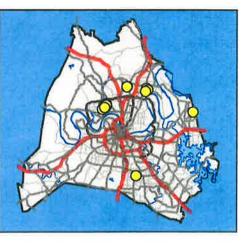












#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

## **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments fo	· (1) co	mmunity official,	(2) insurance a	gent/company	, and (;	3) building owner.
---	----------	-------------------	-----------------	--------------	----------	--------------------

	N A - PROPERTY INFO		.,		RANCE COMPANY USE
A1. Building Owner's Name				Policy Num	
Carl Y. & Keith E. McGill					
A2. Building Street Address (includ Box No.	ing Apt., Unit, Suite, and	/or Bldg. No.) o	r P.O. Route and	Company N	AIC Number:
1152 Tuckahoe Drive					
City		State		ZIP Code	
Nashville		Tenness		37207	
A3. Property Description (Lot and E Tax Map 41-16, Parcel 12, Instr. # 2				)	
A4. Building Use (e.g., Residential,	Non-Residential, Addition	on, Accessory,	etc.) Residentia	1	
A5. Latitude/Longitude: Lat. 36.26	0745 Long.	-86.762937	Horizontal	Datum: 🗌 NAD 1	927 🗙 NAD 1983
A6. Attach at least 2 photographs o	of the building if the Certi	ficate is being u	sed to obtain flood	l insurance.	
A7. Building Diagram Number	9				
A8. For a building with a crawlspace	e or enclosure(s):				
a) Square footage of crawlspace	ce or enclosure(s)	· · · · · · · · · · · · · · · · · · ·	548.00 sq ft		
b) Number of permanent flood (	openings in the crawlspa	ice or enclosure	e(s) within 1.0 foot	above adjacent gra	ide <u>12</u>
<ul><li>c) Total net area of flood openin</li></ul>	ngs in A8.b	1572.00 sq ir	i i i i i i i i i i i i i i i i i i i		
d) Engineered flood openings?	🗌 Yes 🖾 No				
A9. For a building with an attached g	garage:				
a) Square footage of attached g	garage	521.00 sq ft			
b) Number of permanent flood of				cent grade N/A	
c) Total net area of flood openir	ngs in A9.b	N/A sq	in		
d) Engineered flood openings?					
SECTI	ON B - FLOOD INSUR	ANCE RATE	MAP (FIRM) INFO	DRMATION	
B1. NFIP Community Name & Comm	•	B2. County	Name		B3. State
Metro Gov't of Nashville and Davids	on County - 470040	Davidson			Tennessee
B4. Map/Panel B5. Suffix B6 Number	Date E	IRM Panel ffective/ levised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
47037C0119 H 04-		5-2017	AE	531.9'	
B10. Indicate the source of the Base				in Item B9:	
B11. Indicate elevation datum used	for BFE in Item B9:	NGVD 1929	X NAVD 1988	Other/Source:	
B12. Is the building located in a Coa	astal Barrier Resources	System (CBRS	) area or Otherwise	e Protected Area (C	DPA)? 🗌 Yes 🔀 No
Designation Date:					

.

LEVATION CERTIFICATE				o. 1660-0 ion Date: I	008 November 30, 201
MPORTANT: In these spaces, copy the	corresponding information from	Section A.	FOR IN	NSURANC	E COMPANY US
Building Street Address (including Apt., Ur 1152 Tuckahoe Drive	nit, Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy	Number:	
City Nashville	State Tennessee	ZIP Code 37207	Compa	any NAIC	Number
SECTION C -	BUILDING ELEVATION INFOR	MATION (SURVEY F	EQUIRE	ED)	
<ul> <li>C1. Building elevations are based on:</li> <li>*A new Elevation Certificate will be r</li> <li>C2. Elevations – Zones A1–A30, AE, AF Complete Items C2.a–h below accord Benchmark Utilized: TDOT GNSS N</li> <li>Indicate elevation datum used for the</li> </ul>	equired when construction of the t I, A (with BFE), VE, V1–V30, V (w rding to the building diagram speci letwork Vertical Da e elevations in items a) through h)	ith BFE), AR, AR/A, AF fied in Item A7. In Puer tum: NAVD88	R/AE, AR/	 A1_A30, /	hed Construction AR/AH, AR/AO. meters.
□ NGVD 1929 🔀 NAVD 19					
Datum used for building elevations n a) Top of bottom floor (including bas b) Top of the next higher floor c) Bottom of the lowest horizontal st	sement, crawlspace, or enclosure	floor)	Che 528.60 532.40 N/A	eck the me	asurement used.
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or (Describe type of equipment and</li> </ul>	equipment servicing the building		530.20 532.20	⊠ feet ⊠ feet	meters neters
f) Lowest adjacent (finished) grade		N	529.50	⊠ feet	
<ul> <li>g) Highest adjacent (finished) grade</li> </ul>	next to building (HAG)		530.70	🗙 feet	meters
<ul> <li>h) Lowest adjacent grade at lowest structural support</li> </ul>	elevation of deck or stairs, includir		N/A	🗌 feet	meters
SECTION D -	- SURVEYOR, ENGINEER, OR	ARCHITECT CERTIF	ICATIO	N	
This certification is to be signed and seal I certify that the information on this Certifi statement may be punishable by fine or in Were latitude and longitude in Section A	cate represents my best efforts to mprisonment under 18 U.S. Code,	interpret the data avail Section 1001.	able. I un	derstand t	ation information. hat any false e if attachments.
Certifier's Name Daniel Curry	License Number 2964			tttt	
Title Registered Land Surveyor Company Name Collier Engineering Address 5560 Franklin Pike Circle			Winnin W	RECONCIN	A star
City Brentwood	State Tennessee	ZIP Code 37027	1111	ENNES	SEE NO IN
Signature A. Cunz	Date 10/22/(8	Telephone (931) 510-2800	Ext.	111	TIMITIN'
Copy all pages of this Elevation Certificate a Comments (including type of equipment a LAT/LONG was taken from FFE shot at fr elevations are certified to the nearest tent taken on October 2nd, 2018. In determinin Creek - Tributary 2 and FIS profile 177P,	and all attachments for (1) commun nd location, per C2(e), if applicabl ont of house using the NGS Coord h of a foot. A/C pad from C2(e) is ng BFE for item B(9) this surveyor	e) linate Conversion and elevated on cinder bloo	Transform	nation Too ctures). A	I(NCAT). All

#### **BUILDING PHOTOGRAPHS ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

	copy the corresponding information og Apt., Unit, Suite, and/or Bldg. No.) og	the second se	FOR INSURANCE COMPANY USE Policy Number:
City	State	ZIP Code	Company NAIC Number
Nashville	Tennessee	37207	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Elevated AC at rear of structure Photo One Caption

**Clear Photo One** 

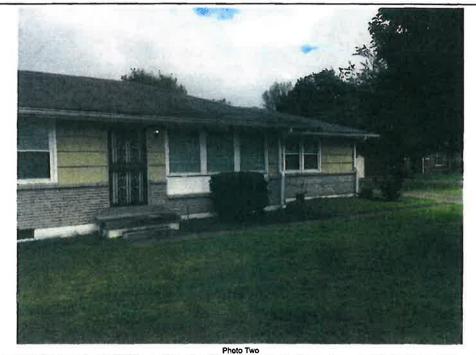


Photo Two Caption Looking at front of structure - right side

**ELEVATION CERTIFICATE** 

## **BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

	and the second se		
IMPORTANT: In these spaces, copy the	corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 1152 Tuckahoe Drive	Init, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Nashville	Tennessee	37207	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



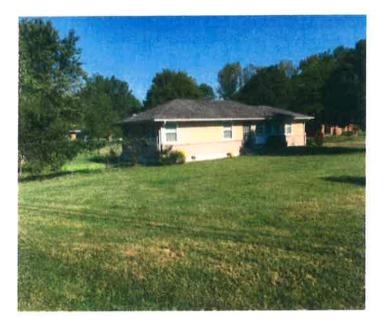
Photo Three Caption Looking at front of structure - Left side

**Clear Photo Three** 



FEMA Form 086-0-33 (7/15)

Replaces all previous editions.





1152 Tuckahoe Drive Nashville, TN 37207 Parcel # 041 16 0 012.00 36.260803 -86.762976

## **PROPERTY WORKSHEETS**

1. Property ID:	4	
2. Property Owner:	SCHEIBE, STEVEN D.	
3. Property Address: (No PO or Route No)	3900 TUCKER ROAD	
4. City, State, Zip Code:	NASHVILLE, TN 37218	
5. Tax Parcel ID:	059 14 0 009.00	
6. Property Tax ID:		
7. Latitude:	36.213684	
8. Longitude:	-86.825429	
roperty Data		
9. Property owner have flood insurance?	Yes	
0. If Yes, Insurance Policy Provider:		
1. If Yes, NFIP Policy Number:		
2. Repetitive Loss Number:		
3. Is property in a:	Floodplain	
4. Flood Zone Designation:	AE or A 1-30	
5. Panel Number of FIRM used to determine the above:		
	47037C0229H	
6. Date of FIRM:	4/5/2017	
7. Construction Date of Structure:	1959	
8. Building Type:	1-story w/o basement	
9. Construction Type:	Wood Frame	
0. Foundation of Building:	Crawl Space	
1. Type of Residency:	Rental Property	
2. If Rental, how many units are occupied?	N/A	
3. If Rental, tenant names:	N/A	
4. If property is a critical facility, what type?	N/A	
5. Any historic building controls (easements, etc.)?	No	
6. Percent of structure's damage:	1-49%	
7. How many times has the property flooded?	2-3 insured losses cumulatively = < than building fair market	t value
8. What is the source of flooding?	Rivering Flooding	
oposed Cost to Acquire Property		
9. Appraisal	\$	500.0
0. Fair Market Value		27,035.0
1. Closing Cost/Legal Fees	\$	2,500.0
2. Demolition (including EAS & Abatement)		34,000.0
3. Uniform Relocation Assistance	\$	.,
4. Comparable Housing	\$	
5. Other (specify): Termination Water & Sewer	\$	5,000.0
5. Total of 29-35:		69,035.0
7. Program Income:	\$	-,
3. Duplication of Benefits:	\$	
9. Total of 37-38:	\$	
		60 025 0
). Total Cost to Acquire Property:	\$ 1	69,035.0
tach the following:		
1. Pictures showing front, back and side view.	Yes	
2. Elevation Certificate	Yes	
<ol> <li>Hazardous Materials Certification</li> </ol>	Will be provided when project is closed out	
. Signed Notice of Voluntary Interest:	Yes	

Only one of the following Benefit Cost Analysis sections must be completed. The Full Data Module requires data from the NFIP's Flood Insurance Study and surveying. The Damage Frequency Assessmen requires gathering damage information from the property residents. Also, if the Damage Frequency Assessment is chosen, there must be at least three events information.

Unofficial Property Record Card

## Unofficial Property Record Card

Davidson County, TN Assessor of Property

### GENERAL PROPERTY INFORMATION

Map & Parcel: 059 13 0 082.00 Current Owner: SCHEIBE, STEVEN D. Mailing Address: P O BOX 1024 FAIRVIEW, TN 37062 Zone: 4 Neighborhood: 3534 Location: 3900 TUCKER RD Land Area: 0.71 Acres Most Recent Sale Date: 01/15/2002 Most Recent Sale Price: \$50,000 Deed Reference: 20020117-0006835 Tax District: USD

### CURRENT PROPERTY APPRASIAL

Assessment Year: 2018 Land Value: \$27,900 Improvement Value: \$66,200 Total Appraisal Value: \$94,100 Assessment Classification\*: RES Assessment Land: \$6,975 Assessment Improvement: \$16,550 Assessment Total: \$23,525

### LEGAL DESCRIPTION

LOT 195 SEC 1 TREPPARD HGTS

### IMPROVEMENT ATTRIBUTES - Card 1 of 1

Building Type: SINGLE FAM Year Built: 1959 Square Footage: 900 Number of Living Units: 1 Building Grade: C Building Condition: Average Rooms: 5 Beds: 3 Baths: 1 Half Bath: 0 Fixtures: 5 Exterior Wall: BRICK Frame Type: RESD FRAME Story Height: ONE STY Foundation Type: CRAWL Roof Cover: ASPHALT



\*This classification is for assessment purposes only and is not a zoning designation, nor does it speak to the legality of the current use of the subject property.



**STEVEN D. SCHEIBE** P. O. BOX 1024 FAIRVIEW, TN 37062

### **Flood Mitigation Home Buyout Program** Homeowner Interest Sign-up Sheet & Voluntary Notice

If you are interested in exploring your options for reducing your flood losses by taking part in our Flood Mitigation Home Buyout Program, please complete this form. Signing the form does not commit you to any action, but if you do not sign and return this form, your property will NOT be considered for buyout in the Flood Mitigation Assistance Grant Program. Please direct questions concerning this program to (615) 862-4516 or (615) 862-4582.

Property Address: Owner(s) Name: Contact Phone Number:

3900 TUCKER ROAD, NASHVILLE, TN 37218 Owner(s) Mailing Address: P. O. BOX 1024, FAIRVIEW, TN 37062 SCHEIBE, STEVEN D.

The local government is required by FEMA to inform you that your participation in this project for open-space acquisition is voluntary. Neither the State nor the Local Government will use its eminent domain authority to acquire the property for open-space purposes if you choose not to participate, or if negotiations fail. If you have flood insurance, please include your Flood Insurance Policy information, including your policy number.

Mail the signed form to: Department of Water and Sewerage Services Stormwater Division - Flood Buyout Program 800 Second Avenue South Nashville, TN 37210

Check one:

Yes, I want to be in the buyout program.

□ No, I do not want to be in the program.

== D. Scharle

**Owner's** Signature

9/18/ 2013

**Owner's Signature** 

Date

**Owner's** Signature

Date

#### DEPARTMENT OF HOMELAND SECURITY EMERGENCY PREPAREDNESS AND RESPONSE DIRECTORATE FEDERAL EMERGENCY MANAGEMENT AGENCY DECLARATION AND RELEASE

O.M.B. NO. 1660-0002 Expires September 30, 2006

DECLARATION AND RELEASE				ember 30, 2000	
			DECLARATION AND RELEASE		
States.	er to be eligible to receive FEMA Disa Please read the form carefully, sign consult with an attorney or other imm	the sheet and a	a member of the household must be a citiz return it to the Inspector, and show him I you have any questions.	en, non-citizen national or qual Arer a current form of photo f	lified alien of the United dentification. Please feel
I herel	by declare, under penalty of perjury	that (check on	c):		
Ø	I am a citizen or non-citizen national	of the United S	tates.		
	I am a qualified alien of the United S	States			
	l am the parent or guardian of a mine full name and age of minor child:	or child who resi	des with me and who is a citizen, non-citi	zen national, or qualified alien o	of the United States. Print
By my	signature I certify that:				
	* I will return any disaster aid money disaster aid money for the purpose for	arding my appl I received from r which it was in	ication for FEMA disaster assistance is tru FEMA or that State if I receive insurance ntended.	or other money for the same lo	ss, or if I do not use FEMA
	State laws, which carry severe crimin	al and civil pena	ments or conceal any information in an att alties, including a fine up to \$ 250,000, im	empt to obtain disaster aid, it is prisonment, or both (18 U.S.C.	a violation of federal and §§ 287, 1001, and 3571).
	I understand that, the information p Homeland Security (DHS) including,	rovided regardin but not limited	ng my application for FEMA disaster assis to, the Bureau of Immigration and Custom	tance may be subject to sharing Enforcement.	within the Department of
	I authorize FEMIA to verify all infor	rmation given by	rne about my property/place of residence	, income, employment and depo	endents in order to
	determine my eligibility for disaster a				
	I authorize all custodians of records of to FEMA and/or the State upon request	of my insurance st.	employer, any public or private agency, b	ank financial or credit data serv	ice to release information
NAME (F	Print) I D. SCEEIBE	SIGNATURE	= D. Scheile	DATE OF BIRTH	DATE SIGNED
	TOR ID NO.	FEMA APPLI PDM-2018-R	CATION NO.	DISASTER NO.	9/23/2018
	SS OF DAMAGED PROPERTY CKER ROAD		CITY NASHVILLE	STATE TN	ZIP CODE 37218
			PRIVACY ACT STATEMENT		
Responsi information and state fforts or igencies clevant to imilar pro- n relation onducted act of 19	ibility and Work Opportunity Reconcil ion is to determine your eligibility to re agencies providing disaster assistance benefits are not duplicated; to agencie or professional organizations where the to an Agency decision concerning issu urpose from us; to a Congressional offi- n to private relief legislation under OM d under the authority of 44 §§ 2904 and	liation Act of 15 eccive FEMA d e, as well as to le es, organization here may be a vi hance of a grant of the in response AB Circular A-1 dd 2906. Your se	nee Act, 42 U.S.C. §§ 5121-5206, Executi 196, 8 U.S.C. §§ 1601 et seq., authorize the isaster assistance. Disclosures of this infor- beal governments or voluntary agencies fre- s and institutions as necessary for mitigated olation or potential violation of law; to a flo- or other benefit, or in certain circumstance to an inquiry made at the request of the ind 9; and to the National Archives and Recor- beial security number is solicited during re- ial security number, as well as other infor- WORK BURDEN DISCLOSURE NOT	collection of this information. mation may be made: Upon wri- m which you are seeking assist on planning and enforcement: to ederal, state or local agency whi- s when a Federal agency reques lividual; to the Office of Manag ds Administration in records m gistration pursuant to the Debt ( nation is voluntary, but failure	The primary use of this itten request, to federal ance, so that assistance b law enforcement on we request information its such information for a tement and Budget (OMB) anagement inspections Collection Improvement
ata, and ).M.B. co or reduci cdcral E	completing and submitting the form. ontrol number is displayed in the uppe ing the burden to: Information Collection	You are not requer right corner of ions Management	minutes per response. The burden estimate ired to complete this collection of informa "this form. Send comments regarding the nt, U.S. Department of Homeland Security ashington, DC 20472, Paperwork Reduction	ation unless a valid accuracy of the burden and esting Benergency Preparedness and	nate and any suggestions Response Directorate,

FEMA Form 90-69B, Sep 03

Latitude and Longitude of a Point

🏂 getLatLong.net

Home » Latitude and Longitude of a Point

To find the latitude and longitude of a point you can do any of the following...

1. Press and Hold the Shift Key then Click on the point on the map. 2. Drag the red marker.

3. Enter the Address 3900 Tucker Road, Nashville, TN GO

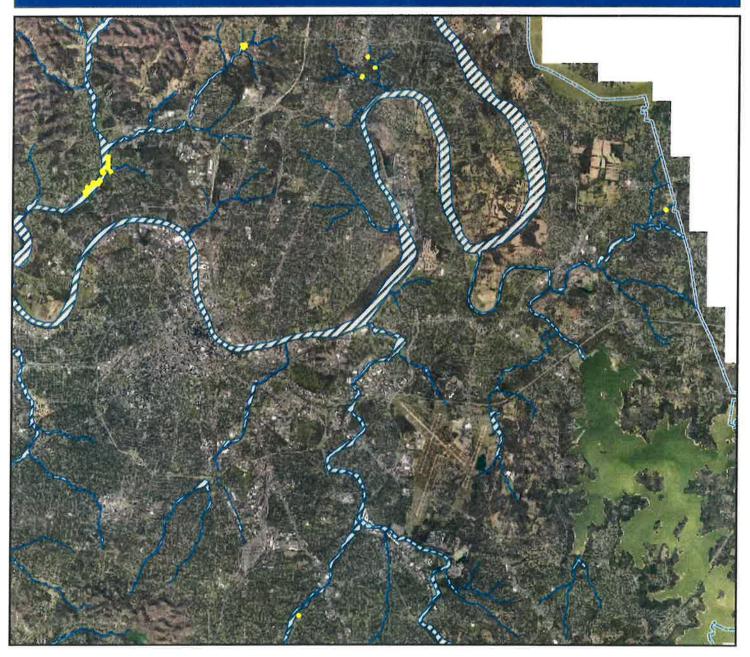
### Latitude and Longitude of a Point



Clear / Reset Remove Last Blue Marker Center Red Marker	Show Point from Latitude and Longitude Use this if you know the latitude and longitude coordinates of a point and want to see where on the map the point is.
Get the Latitude and Longitude of a Point         When you click on the map, move the marker or enter an address the latitude and longitude coordinates of the point are inserted in the boxes below.         Latitude:       38.213884         Longitude:       38.825429	Use: + for N Lat or E Long - for S Lat or W Long. Example: +40.689060 -74.044636 Note: Your entry should not have any embedded spaces. Decimal Deg. Latitude: Decimal Deg. Longitude: Show Point
Degrees Minutes Seconds Latitude: 36 12 49.2624 Longitude: -86 49 31.5439	Example: +34 40 50.12 for 34N 40' 50.12"  Degrees Minutes Seconds Latitude: Longitude: Show Point

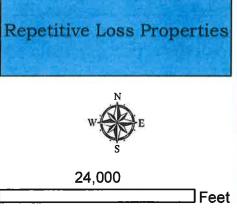
© getLatLong.net 2018 | Credits and Disclaimera | Privacy Policy

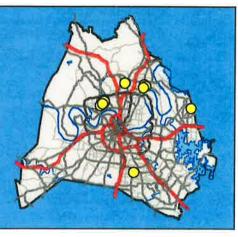
# Repetitive Loss Properties

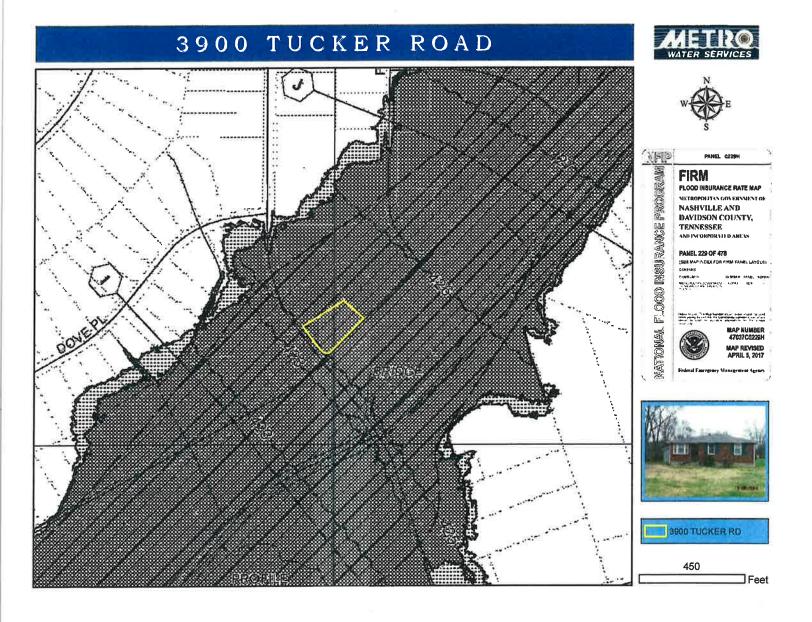




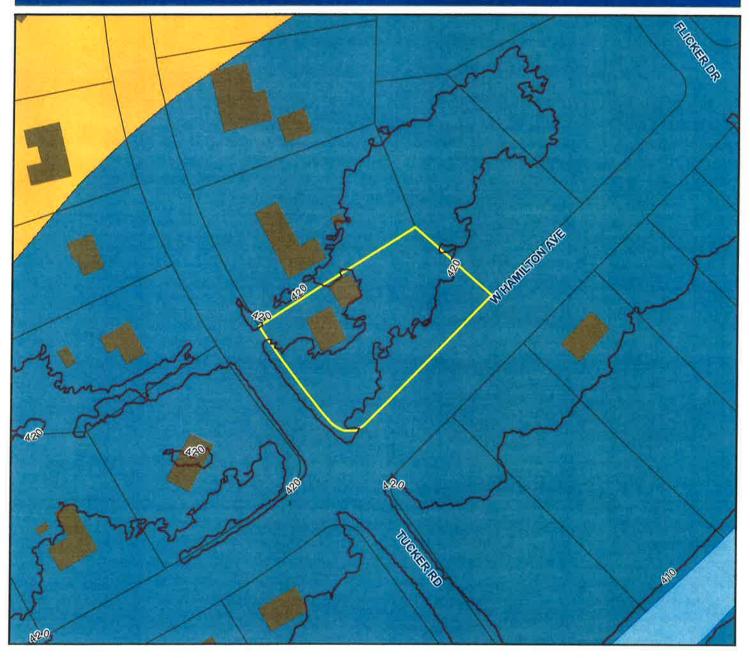
METIRO

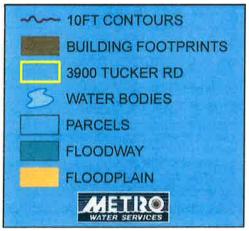


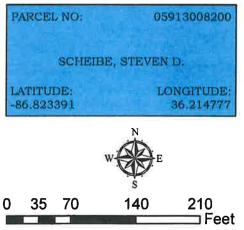




# 3900 TUCKER ROAD

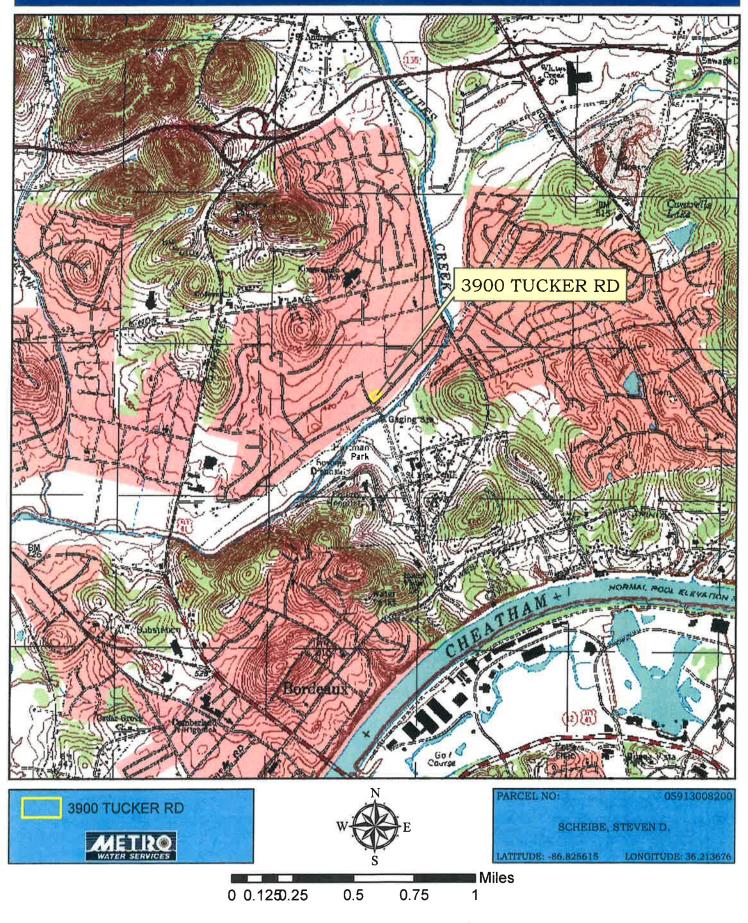








# 3900 TUCKER ROAD



	NATIONAL	ERGENCY MANAGEMENT AGEN .FLOOD INSURANCE PROGRAM	0.	M.B. No. 3067-0077 pires December 31, 2005
	ELEV	ATION CERTIFICATE		
		Read the instructions on pages 1 -	the second s	ar. <b>05913008200</b>
	SECTION	A-PROPERTY OWNER INFORM	ATION	For Insurance Company Use:
BUILDING OWNER'S NAME SCHEIBE, STEVEN D.				Policy Number
3900 TUCKER RD	cluding Apt., Unit, Suite, and/o	or Bidg. No.) OR P.O. ROUTE AND E		Company NAIC Number
CITY NASHVILLE, TN PROPERTY DESCRIPTION (Lot as	d Direchlumberg Ten Dame	STATE TENNESSEE	3721	B
LOT 195 SEC 1 TREPPARD HGTS				
BUILDING USE (e.g., Residential, N	Ion-residential, Addition, Acce	ssory, etc. Use a Comments area, if	necessary.)	
LATITUDEALONGITUDE (OPTION/ ( ## - ## - ## ## or ##.#####)	AL) HORIZO	ONTAL DATUM: SOURCE: GPS 27 NAD 1983	S (Type): SS Quad Map	Other:
	SECTION B - FLOOD	INSURANCE RATE MAP (FIRM)	NFORMATION	
B1. NFIP COMMUNITY NAME & COMMUN 470040	ITY NUMBER	B2 COUNTY NAME DAVIDSON		B3. STATE TENNESSEE
B4, MAP AND PANEL NUMBER B5. SUI 47037C0204 F	April 20, 2001	April 20, 2001	B8. FLOOD ZONE(6) AE	B9, BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 424.1
10. Indicate the source of the Base Floo FIS Profile AFRM 11. Indicate the elevation datum used fo 12. Is the building located in a Coastal B	Community Determ the BIFE in B9: NGVD 192	nined Other (Describe	ner (Describe):	ation Data
and the second		<b>ELEVATION INFORMATION (SUF</b>		
accurately represents the building, pro	wide alsketch or photograph.)	6		ges 6 and 7. If no diagram
Complete Items C3a-i below accord	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci	h BFE), AR, AR/A, AR/AE, AR/A1-A30, fed in liem C2. State the datum used. If	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in cylical or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, J Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriate</li> </ol>	A (with BFE), VE, VI-V30, V (with ing to the building diagram speci sed for the BFE. Show field mea e, to document the datum conve	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in 11em C2. State the datum used. If asurements and datum conversion calcu	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, J Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriate Datum NGVD29 Conversion/Comm</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mea e, to document the datum conve ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion.	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 20</u></li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mea e, to document the datum conve ents V4-1 Does the elevation reference	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM?	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including balance)</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mea e, to document the datum conve ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in cylical or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including ba o b) Top of next higher floor</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V1-1</u> Does the elevation reference sement or enclosure)	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriate Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o c) Bottom of lowest horizontal struct</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V1-1</u> Does the elevation reference sement or enclosure)	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m) ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab)</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V4-1</u> Does the elevation reference sement or enclosure) fural member (V zones only)	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V1-1</u> Does the elevation reference sement or enclosure) fural member (V zones only) nd/or equipment	th BFE), AR, AR/A, AR/AE, AR/A1-A30, fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space pro	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents ( <u>4-1</u> Does the elevation reference sement or enclosure) ( <u>14-1</u> Does the elevation reference sement or enclosure) ( <u>14-1</u> Does the elevation reference sement or enclosure) ( <u>14-1</u> Does the elevation reference comments area) ( <u>14-3</u> )	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft (m) ft (m) ft (m) ft (m) <u>419.8</u> ft (m)	AR/AH, AR/AO the datum is different fro lation. Use the space pro	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, a Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V4-1</u> Does the elevation referenc sement or enclosure) tural member (V zones only) nd/or equipment comments area) (LAG) b (HAG)	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) ft.(m)	AR/AH, AR/AO the datum is different fro lation. Use the space pro	m the datum used for the BFE in ovided or the Comments area of
<ol> <li>Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade</li> </ol>	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci sed for the BFE. Show field mas e, to document the datum conve ents <u>V4-1</u> Does the elevation reference sement or enclosure) tural member (V zones only) nd/or equipment comments area) (LAG) to (HAG) d venis) within 1 ft, above adjace	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rision. e mark used appear on the FIRM? <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) ant grade	AR/AH, AR/AO the datum is different fro lation. Use the space no	m the datum used for the BFE in ovided or the Comments area of
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent openi	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) ft.(m) ent grade (sq. cm) YOR, ENGINEER, OR ARCHITECT CE	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent openi	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) it.(m) ent grade (sq. cm) <b>YOR, ENGINEER, OR ARCHITECT CE</b> rgineer, or architect authorized by law	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent openi	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) ft.(m) ent grade (sq. cm) <b>YOR, ENGINEER, OR ARCHITECT CE</b> Igineer, or architect authorized by law ale represents my best efforts to Inter-	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION to certify elevation interpret the data evailable	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 24</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent opening This certification is to be signed and is I certify that the Information in Section	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION to certify elevation interpret the data evailable	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent openi This certification is to be signed and is I certify that the Information in Section I understand that any false statement CERTIFIER'S NAME	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) ft.(m) ent grade (sq. cm) <b>YOR, ENGINEER, OR ARCHITECT CE</b> Igineer, or architect authorized by law ale represents my best efforts to Inter-	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION to certify elevation interpret the data evailable	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the deturn to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent opening This certification is to be signed and is I certify that the Information in Section I understand that any false statement CERTIFIER'S NAME Philip Grant Chapman	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft.(m) ft.(m) ft.(m) ft.(m) <u>419.8</u> ft.(m) ift.(m) ent grade (sq. cm) YOR, ENGINEER, OR ARCHITECT CE gineer, or architect authorized by law ate represents my best efforts to Intell r imprisonment under 18 U.S. Code, LICENSE NUMBER	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION to certify elevation interpret the data evailable	m the datum used for the BFE In ovided or the Comments area of G. CH
3. Elevations – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent opening This certification is to be signed and is <i>I certify that the Information in Section</i> <i>I understand that any false statement</i> CERTIFIER'S NAME Philip Grant Chapman TITLE	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No REFICATION to certify elevation int pret the data available Section 1001.	m the datum used for the BFE In ovided or the Comments area of the G. CHA BER D LAND SCHERE SEE NO.
Bevalors – Zones A1-A30, AE, AH, I Complete Items C3a-I below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o lowest elevation of no school and the the information in Section I understand that any false statement CERTIFIER'S NAME Philip Grant Chapman TITLE Survey Manager	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No Yes No RTIFICATION to certify elevation int pret the data available Section 1001.	m the datum used for the BFE In ovided or the Comments area of the G. CHA BE SEE NO.
3. Elevations – Zones A1-A30, AE, AH, <i>i</i> Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 22</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struct o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo o i) Total area of all permanent opening This certification is to be signed and is <i>i certify that the Information in Section</i> <i>I understand that any false statement</i> CERTIFIER'S NAME Philip Grant Chapman TITLE Survey Manager ADDRESS	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No RTIFICATION to certify elevation int pret the data available Section 1001.	e ZIP CODE
3. Elevations – Zones A1-A30, AE, AH, I Complete items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o h) No. of permanent openings (floo	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No Yes I No RTIFICATION to certify elevation int pret the data available Section 1001.	m the datum used for the BFE In ovided or the Comments area of the G. CHA BE SEE NO.
3. Elevations – Zones A1-A30, AE, AH, / Complete Items C3a-i below accord Section B, convert the datum to that u Section D or Section G, as appropriat Datum <u>NGVD29</u> Conversion/Comm Elevation reference mark used <u>RM 21</u> o a) Top of bottom floor (including ba- o b) Top of next higher floor o c) Bottom of lowest horizontal struc o d) Attached garage (top of slab) o e) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest elevation of machinery a servicing the building (Describe in a C o f) Lowest adjacent (finished) grade o g) Highest adjacent (finished) grade o g) Highest adjacent (finished) grade o i) Total area of all permanent openings (floo o ii) Total area of all permanent opening CERTIFIER'S NAME Philip Grant Chapman TITLE Survey Manager ADDRESS 3800 Ezell Road, Suite 100	A (with BFE), VE, V1-V30, V (with ing to the building diagram speci- sed for the BFE. Show field mase e, to document the datum conve- ents	th BFE), AR, AR/A, AR/AE, AR/A1-A30, Fied in liem C2. State the datum used. If asurements and datum conversion calcul rsion. e mark used appear on the FIRM? S <u>422.5</u> ft.(m) ft	ARVAH, ARVAO the datum is different fro lation. Use the space pro Yes I No Yes I No RTIFICATION to certify elevation int pret the data available Section 1001.	m the datum used for the BFE In ovided or the Comments area of the G. CHA BE SEE NO.

E.

3900 TUCKER RD	see spaces, copy the corresponding inform ESS (Including Apt, Unit, Suite, and/or Bidg, No.) OR P.O.	ROUTE AND BOX NO.	Construction of the owner	For Insurance Company Use:
CITY				Policy Number
NASHVILLE, TN		STATE	ZIP CODE	Company NAIC Number
	YOR, ENGINEER, OR ARCHITECT CERTIF	TENNESSEE	37218	
COMMENTS	levation Certificate for (1) community official, (2) Insu	irance agent/company, and (3) but	liding owner.	-
the second s				
a second state of the seco				[7] at
SECTION E - BUILDIN	IG ELEVATION INFORMATION (SURVEY N	OT REQUIRED) FOR ZONE	AO AND ZONE A MA	Check here if attachm
	TURUL DE CJ. COMDIEN NEME ET MANJAN F& IFRAI	Elevation Certificate is intended for	AO AND ZONE A (WI	THOUT BEE)
Section C must be complete	кL	CONSCIENCE OF MILLINGU M	use as supporting month	ation for a LOMA or LOMR-F,
E1. Building Diagram Numb	er_(Select the building diagram most similar to the provide a sketch or pholograph.)	building for which this certificate is	being completed - see o	2000 Band 7 Kan Second
represents the building,	provide a sketch or photograph.)		and composite acop	egies o and 7. If no diagram accura
natural grade, if available	or (including basement or enclosure) of the building a).	is_ft(m)_in.(cm) 🔲 above or	D below (check one) b	10 highest adjacent grade 0 km
E3. For Building Diagrame R.	ay. B with openings (see page 7) the south to the			a management from 1008
grade. Complete items (	8 with openings (see page 7), the next higher floor of C3.h and C3.i on front of form.	or elevated floor (elevation b) of the	ə building is 🔔 fl (m) 🔡	n. (cm) above the highest adiacant
E4. For Zone AO only: If no f	flood depth number is available, is the top of the both Jhknown. The local official must certify this informat	in for classical is see a	M1 m	
			an ne community's flood	plain management ordinance?
SECTION F - PROPER	TY OWNER (OR OWNER'S REPRESENTAT	IVELCEDTIFICATION		
The property owner or owne	a suborized representative who complete Costs		14	
Issued BFE) or Zone AO mu	ust sign here. The statements in Sections A, B, C, a	and Fam comment in the best of me	nly), and E for Zone A (with	hout a FEMA-issued or community
PROPERTY OWNER'S OR	ROWNER'S AUTHORIZED REPRESENTATIVE'S	NAME	NIOWIOOGO,	
ADDRESS				
		CITY	STAT	ZIP CODE
SIGNATURE		DATE		LI VODL
		DATE	TELEF	HONE
COMMENTS				
SECTION G. COMMUNE	TY INFORMATION (OPTIONAL)			Check here if attachment
he local official who is authoriz	red by low or optimizen to administrative to a		Contract of the local division of the local	
he local official who is authoriz entificate. Complete the annu-	red by law or ordinance to administer the community	/s floodplain management ordinan	ice can complete Section	s A, B, C (or E), and G of this Eleva
he local official who is authoriz enflicate. Complete the applic 1.  The information in Secti	ed by law or ordinance to administer the community able ham(s) and sign below.	have also of the second		s A, B, C (or E), and G of this Eleva
he local official who is authoriz enflicate. Complete the applic 1. The information in Section state or local taw to cert	ed by law or ordinance to administer the community able ham(s) and sign below. fon C was taken from other documentation that has tify elevation information. (Indicate the particulation	been signed and embossed by a l	licensed surveyor, engine	er, or architect who is authorized h
he local official who is authoriz ertificate. Complete the applic 1. I The Information in Section state or local law to central 2. A community official control official control of the local control	ed by law or ordinance to administer the community cable ham(s) and sign below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o molated Section E for a huilding located to Zoop A 6	been signed and embossed by a l date of the elevation data in the Co	licensed surveyor, engine	er, or architect who is authorized h
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to car 2. A community official con 3. The following information	ed by law or ordinance to administer the community cable ham(s) and sign below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o molated Section E for a huilding located to Zoop A 6	been signed and embossed by a l date of the elevation data in the Co	licensed surveyor, engine	er, or architect who is authorized h
he local official who is authoriz ertificate. Complete the applic 1. I The Information in Secti state or local law to cen 2. I A community official con	ed by law or ordinance to administer the community able ham(s) and sign below. fon C was taken from other documentation that has tify elevation information. (Indicate the particulation	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes.	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone /	er, or archilect who is authorized by 40.
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER	ed by law or ordinance to administer the community table /tem(s) and skyn below. ion C was taken from other documentation that has ify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A ( on (Items G4-G9) is provided for community floodplated G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G8. DATE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone /	er, or architect who is authorized in
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to can 2. A community official con 3. The following information 34. PERMIT NUMBER	eed by law or ordinance to administer the community able ham(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplated G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G8. DATE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone /	er, or archilect who is authorized by 40.
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to can state or local law to can 2. A community official con 3. The following information 34. PERMIT NUMBER 7. This permit has been issued Elevation of as-built lowest tik	eed by law or ordinance to administer the community able /tem(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G8. DATE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 2. This permit has been issued a Elevation of as-built lowest tik BFE or (in Zone AO) depth of	eed by law or ordinance to administer the community able ham(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplated G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G8. DATE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone /	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to can state or local law to can 2. A community official con 3. The following information 34. PERMIT NUMBER 7. This permit has been issued Elevation of as-built lowest tik	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 2. This permit has been issued a Elevation of as-built lowest tik BFE or (in Zone AO) depth of	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to can 2. A community official con 3. The following information 34. PERMIT NUMBER 7. This permit has been issued 8. Elevation of as-built lowest fix BFE or (in Zone AO) depth o DCAL OFFICIAL'S NAME 000000000000000000000000000000000000	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l data of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent TITLE TELEPHONE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 2. This permit has been issued 34. Elevation of as-built lowest lik BFE or (in Zone AO) depth of OCAL OFFICIAL'S NAME OMMUNITY NAME	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l date of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The Information in Secti state or local law to can 2. A community official con 3. The following information 34. PERMIT NUMBER 7. This permit has been issued 8. Elevation of as-built lowest fix BFE or (in Zone AO) depth o DCAL OFFICIAL'S NAME 000000000000000000000000000000000000	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l data of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent TITLE TELEPHONE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 2. This permit has been issued 34. Elevation of as-built lowest lik BFE or (in Zone AO) depth of OCAL OFFICIAL'S NAME OMMUNITY NAME	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l data of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent TITLE TELEPHONE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 2. This permit has been issued 34. Elevation of as-built lowest lik BFE or (in Zone AO) depth of OCAL OFFICIAL'S NAME OMMUNITY NAME	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l data of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent TITLE TELEPHONE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone, CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:
he local official who is authoriz entificate. Complete the applic 1. The information in Secti state or local law to cer 2. A community official con 3. The following information 34. PERMIT NUMBER 34. PERMIT NUMBER 34. PERMIT NUMBER 34. PERMIT NUMBER 34. PERMIT NUMBER 35. This permit has been issued a Elevation of as-built lowest lik BFE or (in Zone AO) depth of DCAL OFFICIAL'S NAME OMMUNITY NAME	eed by law or ordinance to administer the community able /tam(s) and skin below. fon C was taken from other documentation that has tify elevation information. (Indicate the source and o mplated Section E for a building located in Zone A (v in (Items G4-G9) is provided for community floodplat G5. DATE PERMIT ISSUED	been signed and embossed by a l data of the elevation data in the Co without a FEMA-issued or commun in management purposes. G6. DATE nent TITLE TELEPHONE	licensed surveyor, engine mments area below.) nity-issued BFE) or Zone . CERTIFICATE OF COMPLI	er, or architect who is authorized by AO. ANCE/OCCUPANCY ISSUED Datum:





3900 Tucker Road Nashville, TN 37218 Parcel # 059 14 0 082.00 36.213684 -86.825429



September 21, 2018

Ms. Mary Jennings Field Supervisor U. S. Fish and Wildlife Service 446 Neal Street Cookeville, TN 38501

#### RE: Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project

Dear Ms. Jennings:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. Maps are enclosed, with the property locations marked. I am also including a property list with addresses, tax map and parcel numbers and the streams that were responsible for the flooding.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

After making your determination concerning this project, please forward your response to me.

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582 or myself at (615) 862-4510.



U. S. Fish and Wildlife Service Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project Page 2

Very truly yours,

100 6

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director

Wh	ites/Gibson/Stoners	s/7 Mile Cre	ek - Ac	quisition/	Demolition Pro	oject
House #	Address	City	State	Zip Code	Parcel #	Creek
3843	CROUCH DR	NASHVILLE	ŢŊ	37207	059 14 0 148.00	Whites
3855	CROUCH DR	NASHVILLE	TN	37207	059 10 0 244.00	Whites
3867	CROUCH DR	NASHVILLE	TN	37207	059 10 0 241.00	Whites
3875	CROUCH DR	NASHVILLE	TN	37207	059 10 0 239.00	Whites
3891	CROUCH DR	NASHVILLE	TN	37207	059 10 0 235.00	Whites
3903	CROUCH DR	NASHVILLE	TN	37207	059 10 0 232.00	Whites
3907	CROUCH DR	NASHVILLE	n	37207	059 10 0 231.00	Whites
3915	CROUCH DR	NASHVILLE	TN ·	37207	059 10 0 229.00	Whites
3939	CROUCH DR	NASHVILLE	TN	37207	059 10 0 223.00	Whites
5045	EDMONDSON PIKE	NASHVILLE	TN	37115	147 10 0 074.00	7 Mile
248	EMMITT AVE	MADISON	TN	37115	051 08 0 070.00	Gibson
3905	FLICKER DR	NASHVILLE	TN	37218	059 13 0 112.00	Whites
146	HARRIS ST	MADISON	TN	37115	052 01 0 020.00	Gibson
3001	HUMMINGBIRD DR	NASHVILLE	TN	37218	059 14 0 009.00	Whites
732A	MADISON BLVD	MADISON	TN	37115	052 01 0 272.00	Gibson
4937	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 048.00	Stoners
4941	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 049.00	Stoners
1140	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 015.00	Whites
1148	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 013.00	Whites
1152	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 012.00	Whites
3900	TUCKER RD	NASHVILLE	TN	37218	059 13 0 082.00	Whites
3000	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 011.00	Whites
3103	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 037.00	Whites
3115	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 031.00	Whites
3214	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 030.00	Whites
3225	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 052.00	Whites
3227	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 051.00	Whites

#### **Plummer, Antonette (WS)**

From:	Harrison, Sarah <sarah_harrison@fws.gov></sarah_harrison@fws.gov>
Sent:	Wednesday, October 03, 2018 8:15 AM
То:	Plummer, Antonette (WS)
Cc:	Robbie Sykes
Subject:	2018-CPA-0783 Metropolitan Government of Nashville and Davidson County Floodplain Acquisition and Demolition

Attention: This email originated from a source external to Metro Government. Please exercise caution when opening any attachments or links from external sources.

Ms. Plummer,

U.S. Fish and Wildlife Service (Service) personnel have reviewed your correspondence dated September 21, 2018, regarding the proposal to acquire 27 pieces of property that are located in various floodplains throughout Davidson County. Once the properties are acquired they will be demolished and debris removed and the land will lie fallow in perpetuity. Your correspondence requested information regarding potential impacts to federally threatened and endangered species. In response, the Service offers the following comments.

Information available to the Service does not indicate that federally threatened and endangered species or designated critical habitat occur within the impact area for 26 of the 27 properties proposed for this project, therefore the Service does not anticipate that any federally listed species would be impacted by the actions taken on those properties. However the property located at 5045 Edmondson Pike is located within the Mill Creek watershed along Sevenmile Creek near a location where endangered species collection records available to the Service indicates that the federally endangered Nashville crayfish (*Orconectes shoupi*). Provided there is no work proposed in Sevenmile Creek and no sediment is allowed to enter the stream, we would not expect that acquisition of the 5045 Edmondson Pike lot and demolition of the existing structures would impact the Nashville crayfish.

The Service would not anticipate the proposed action to adversely affect federally listed species; however, in accordance with section 7 of the Endangered Species Act (87 stat. 884 as amended; 16 U.S.C. 1531 et seq.), it is the responsibility of the lead federal agency to make an effects determination. A may affect determination would require further coordination with the Service.

We take this opportunity to inform you of the online project review tool, which can be found at <u>https://www.fws.gov/cookeville/project\_review.html</u>. If upon completion of this process you determine that your project is unlikely to affect federally listed species, you can certify your determination, and no further coordination would be required. If your project may affect these resources, the review package developed through the process would expedite further review upon submission to our office. Please feel free to contact me if you have any questions or concerns regarding this information.

Sincerely,

Sarah Harrison

--Sarah Harrison Fish & Wildlife Biologist USFWS Tennessee Field Office 446 Neal Street Cookeville, TN 38501 Phone: 931-528-6481 ext. 222

NOTE: This email correspondence and any attachments to and from this sender is subject to the Freedom of Information Act (FOIA) and may be disclosed to third parties.



Nashville, Tennessee 37219-6300

September 21, 2018

Mr. Benjamin L. Rohrbach, P.E. Chief, Hydrology & Hydraulics Branch U. S. Army Corps of Engineers Nashville District P. O. Box 1070 Nashville, TN 37202-1070

#### RE: Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project

Dear Mr. Rohrbach:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. Maps are enclosed, with the property locations marked. I am also including a property list with addresses, tax map and parcel numbers and the streams that were responsible for the flooding.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

After making your determination concerning this project, please forward your response to me.

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582, by email at Antonette.Plummer@nashville.gov or myself at (615) 862-4510. Our fax number is (615) 862-4929.



U. S. Army Corps of Engineers Request Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project Page 2

Very truly yours,

50

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director

Whites/Gibson/Stoners/7 Mile Creek - Acquisition/Demolition Project									
House #	Address	City	State	Zip Code	Parcel #	Creek			
3843	CROUCH DR	NASHVILLE	TN	37207	059 14 0 148.00	Whites			
3855	CROUCH DR	NASHVILLE	TN	37207	059 10 0 244.00	Whites			
3867	CROUCH DR	NASHVILLE	TN	37207	059 10 0 241.00	Whites			
3875	CROUCH DR	NASHVILLE	TN	37207	059 10 0 239.00	Whites			
3891	CROUCH DR	NASHVILLE	TN	37207	059 10 0 235.00	Whites			
3903	CROUCH DR	NASHVILLE	TN	37207	059 10 0 232.00	Whites			
3907	CROUCH DR	NASHVILLE	n	37207	059 10 0 231.00	Whites			
3915	CROUCH DR	NASHVILLE	TN	37207	059 10 0 229.00	Whites			
3939	CROUCH DR	NASHVILLE	TN	37207	059 10 0 223.00	Whites			
5045	EDMONDSON PIKE	NASHVILLE	TN	37115	147 10 0 074.00	7 Mile			
248	EMMITT AVE	MADISON	TN	37115	051 08 0 070.00	Gibson			
3905	FLICKER DR	NASHVILLE	TN	37218	059 13 0 112.00	Whites			
146	HARRIS ST	MADISON	TN	37115	052 01 0 020.00	Gibson			
3001	HUMMINGBIRD DR	NASHVILLE	TN	37218	059 14 0 009.00	Whites			
732A	MADISON BLVD	MADISON	TN	37115	052 01 0 272.00	Gibson			
4937	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 048.00	Stoners			
4941	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 049.00	Stoners			
1140	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 015.00	Whites			
1148	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 013.00	Whites			
1152	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 012.00	Whites			
3900 -	TUCKER RD	NASHVILLE	TN	37218	059 13 0 082.00	Whites			
3000	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 011.00	Whites			
3103	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 037.00	Whites			
3115	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 031.00	Whites			
3214	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 030.00	Whites			
3225 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 052.00	Whites			
3227 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 051.00	Whites			



DEPARTMENT OF THE ARMY NASHVILLE DISTRICT, CORPS OF ENGINEERS 110 NINTH AVENUE SOUTH, ROOM A410 NASHVILLE TN 37203

JAN 24 2019

CELRN-EC-H

Mr. Tom Palko Metropolitan Nashville and Davidson County Metro Water Services 1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208

Dear Mr. Palko,

I am writing in response to your letter dated September 21, 2018 requesting comment on the proposed acquisition of twenty-seven pieces of property (located in the Whites Creek, Gibson Creek, Stoners Creek, and Sevenmile Creek drainage basins) within the city limits of Nashville/Davidson County. These properties have been identified as being in a designated floodway and/or floodplain. Structures on these properties will be demolished, the debris removed, and the land will lie fallow in perpetuity upon completion of the proposal.

The removal of these structures from the floodway and/or floodplain will improve the conveyance of floodwaters and reduce flood damage claims in the future. As such, the Corps of Engineers fully supports this action as an example of proactive management of flood plain risk.

Thank you for the opportunity to comment on this project.

Sincerely,

Michael W. Sorrels, P.E. Chief, H&H Branch

DAVID BRILEY



October 22, 2018

Stormwater Division - Development Review 800 Second Avenue South P.O. Box 196300 Nashville, Tennessee 37219-6300

Mr. Casey Lee **Review and Compliance Coordinator Tennessee Historical Commission** 2941 Lebanon Road Nashville, TN 37214

#### RE: Whites/Gibson/Stoners/7 Mile Creek **Home Buyout Project**

Dear Mr. Lee:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. I am enclosing a property list, site maps, property cards, property maps, USGS maps with the property locations marked, as well as photographs of each property. I am also enclosing a copy of the letter from the Metropolitan Historical Commission, who reviewed our proposal and supplied their comments.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

The Federal Emergency Management Agency (FEMA) is requiring your review and subsequent approval in writing for this project to be approved. To our knowledge, none of these homes are on the Historical Register or are located near any structures that are on the registry. After making your determination concerning this project, please forward your response to me.



State Historical Commission Request Whites Creek Home Buyout Project Page 2

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582, by email at Antonette.Plummer@nashville.gov or Mr. Tom Palko at (615) 862-4510. Our fax number is (615) 862-4929.

Very truly yours,

5

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director



TENNESSEE HISTORICAL COMMISSION STATE HISTORIC PRESERVATION OFFICE 2941 LEBANON PIKE NASHVILLE, TENNESSEE 37243-0442 OFFICE: (615) 532-1550 www.tnhistoricalcommission.org

October 30, 2018

Mr. Tom Palko Metropolitan Government of Nashville and Davidson County Metro Water Services 1600 Second Avenue North, 5th Floor Nashville, TN 37208

RE: FEMA / Federal Emergency Management Agency, Whites/Gibson/Stoners/7 Mile Creek Home Buyout Program, 27 Properties, Nashville, Davidson County, TN

Dear Mr. Palko:

In response to your request, we have reviewed the documents you submitted regarding your proposed undertaking. Our review of and comment on your proposed undertaking are among the requirements of Section 106 of the National Historic Preservation Act. This Act requires federal agencies or applicant for federal assistance to consult with the appropriate State Historic Preservation Office before they carry out their proposed undertakings. The Advisory Council on Historic Preservation has codified procedures for carrying out Section 106 review in 36 CFR 800 (Federal Register, December 12, 2000, 77698-77739).

After considering the documentation submitted, it is our opinion that there are no National Register of Historic Places listed or eligible properties affected by this undertaking. We have made this determination because either: no National Register listed or eligible Historic Properties exist within the undertaking's area of potential effects, the specific location, size, scope and/or nature of the undertaking and its area of potential effects precluded affects to Historic Properties, the undertaking will not alter any characteristics of an identified eligible or listed Historic Property that qualify the property for listing in the National Register, or it will not alter an eligible Historic Property's location, setting or use. We have no objections to your proceeding with your undertaking.

If your agency proposes any modifications in current project plans or discovers any archaeological remains during the ground disturbance or construction phase, please contact this office to determine what further action, if any, will be necessary to comply with Section 106 of the National Historic Preservation Act. If you are applying for federal funds, license or permit, you should submit this letter as evidence of consultation under Section 106 to the appropriate federal agency, which, in turn, should contact us as required by 36 CFR 800. If you represent a federal agency, you should submit a formal determination of eligibility and effect to us for comment. You may direct questions or comments to Jennifer M. Barnett (615) 687-4780. This office appreciates your cooperation.

Sincerely,

Chabrich Inchyretreo

E. Patrick McIntyre, Jr. Executive Director and State Historic Preservation Officer

EPM/jmb



Nashville, Tennessee 37219-6300

September 21, 2018

Ms. Tara Mielnik Metro Historical Commission 3000 Granny White Pike Nashville, TN 37204

#### RE: Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project

Dear Ms. Mielnik:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. Maps are enclosed, with the property locations marked. I am also including a property list with addresses, tax map and parcel numbers and the streams that were responsible for the flooding.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

The Federal Emergency Management Agency (FEMA) is requiring your review and subsequent approval in writing for this project to be approved. To our knowledge, none of these homes are on the Historical Register or are located near any structures that are on the registry. After making your determination concerning this project, please forward your response to me.

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582 or Mr. Tom Palko at (615) 862-4510.



Metro Historical Commission Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project Page 2

Very truly yours,

Tom Pall

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director

Whites/Gibson/Stoners/7 Mile Creek - Acquisition/Demolition Project									
House #	Address	City	State	Zip Code	Parcel #	Creek			
3843	CROUCH DR	NASHVILLE	TN	37207	059 14 0 148.00	Whites			
3855	CROUCH DR	NASHVILLE	TN	37207	059 10 0 244.00	Whites			
3867	CROUCH DR	NASHVILLE	TN	37207	059 10 0 241.00	Whites			
3875	CROUCH DR	NASHVILLE	TN	37207	059 10 0 239.00	Whites			
3891	CROUCH DR	NASHVILLE	TN	37207	059 10 0 235.00	Whites			
3903	CROUCH DR	NASHVILLE	TN	37207	059 10 0 232.00	Whites			
3907	CROUCH DR	NASHVILLE	n	37207	059 10 0 231.00	Whites			
3915	CROUCH DR	NASHVILLE	TN	37207	059 10 0 229.00	Whites			
3939	CROUCH DR	NASHVILLE	TN	37207	059 10 0 223.00	Whites			
5045	EDMONDSON PIKE	NASHVILLE	TN	37115	147 10 0 074.00	7 Mile			
248	EMMITT AVE	MADISON	ΤN	37115	051 08 0 070.00	Gibson			
3905	FLICKER DR	NASHVILLE	TN	37218	059 13 0 112.00	Whites			
146	HARRIS ST	MADISON	TN	37115	052 01 0 020.00	Gibson			
3001	HUMMINGBIRD DR	NASHVILLE	TN	37218	059 14 0 009.00	Whites			
732A	MADISON BLVD	MADISON	TN	37115	052 01 0 272.00	Gibson			
4937	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 048.00	Stoners			
4941	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 049.00	Stoners			
1140	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 015.00	Whites			
1148	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 013.00	Whites			
1152	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 012.00	Whites			
3900	TUCKER RD	NASHVILLE	TN	37218	059 13 0 082.00	Whites			
3000	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 011.00	Whites			
3103	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 037.00	Whites			
3115 \	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 031.00	Whites			
3214 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 030.00	Whites			
3225 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 052.00	Whites			
3227 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 051.00	Whites			

DocuSign Envelope ID: C48D5501-3FA4-4304-A267-2CA723CD6F5C

M E T R O P O L I T A N H I S T O R I C A L C O M M I S S I O N

October 18, 2018

Mr. Tom Palko Metro Water Services 1600 Second Avenue North, Fifth Floor Nashville, TN 37208

RE: Whites/Gibson/Stoners/Seven Mile Creek Acquisition and Demolition Project

Dear Mr. Palko,

As requested, we have reviewed the proposed undertaking of the acquisition and demolition of twenty-seven properties across Davidson County under Section 106 of the National Historic Preservation Act. Based on the information provided, we find that the project area includes no historic resources. It is our assessment that the project as currently proposed will have no adverse effect on historic resources.

Our comments are advisory only. The federal agency is responsible for determining if historic properties will be affected by this undertaking.

This information is being forwarded to Casey Lee at the Tennessee Historical Commission, the state historic preservation office (SHPO), by copy of this letter. You should resubmit the information contained in this letter on your letterhead along with the complete project information to the SHPO to proceed with review under Section 106. The SHPO will take this opinion under advisement.

If you need further information, please do not hesitate to call me at 615-862-7970 x79782 or email me at jessica.reeves@nashville.gov.

Sincerely,

Jessica G. Reeves Historic Preservationist

CC: Ms. Casey Lee, Tennessee Historical Commission



DEPARTMENT OF WATER AND SEWERAGE SERVICES Stormwater Division - Development Review 800 Second Avenue South P.O. Box 196300 Nashville, Tennessee 37219-6300

September 21, 2018

Ms. Sharon Escue, ASA Tennessee Department of Environment and Conservation Nashville Environmental Field Office 711 R. S. Gass Boulevard Nashville, TN 37243

#### RE: Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project

Dear Ms. Escue:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. Maps are enclosed, with the property locations marked. I am also including a property list with addresses, tax map and parcel numbers and the streams that were responsible for the flooding.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

After making your determination concerning this project, please forward your response to me.

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582 or Mr. Tom Palko at (615) 862-4510.



Tennessee Department of Environment and Conservation Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project Page 2

Very truly yours,

Tom Pall

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director

Whites/Gibson/Stoners/7 Mile Creek - Acquisition/Demolition Project							
House #	Address	City	State	Zip Code	Parcel #	Creek	
3843	CROUCH DR	NASHVILLE	TN	37207	059 14 0 148.00	Whites	
3855	CROUCH DR	NASHVILLE	TN	37207	059 10 0 244.00	Whites	
3867	CROUCH DR	NASHVILLE	TN	37207	059 10 0 241.00	Whites	
3875	CROUCH DR	NASHVILLE	TN	37207	059 10 0 239.00	Whites	
3891	CROUCH DR	NASHVILLE	TN	37207	059 10 0 235.00	Whites	
3903	CROUCH DR	NASHVILLE	TN	37207	059 10 0 232.00	Whites	
3907	CROUCH DR	NASHVILLE	n	37207	059 10 0 231.00	Whites	
3915	CROUCH DR	NASHVILLE	TN	37207	059 10 0 229.00	Whites	
3939	CROUCH DR	NASHVILLE	TN	37207	059 10 0 223.00	Whites	
5045	EDMONDSON PIKE	NASHVILLE	TN	37115	147 10 0 074.00	7 Mile	
248	EMMITT AVE	MADISON	TN	37115	051 08 0 070.00	Gibson	
3905	FLICKER DR	NASHVILLE	TN	37218	059 13 0 112.00	Whites	
146	HARRIS ST	MADISON	TN	37115	052 01 0 020.00	Gibson	
3001	HUMMINGBIRD DR	NASHVILLE	TN	37218	059 14 0 009.00	Whites	
732A I	MADISON BLVD	MADISON	TN	37115	052 01 0 272.00	Gibson	
4937 \$	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 048.00	Stoners	
4941 9	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 049.00	Stoners	
1140 1	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 015.00	Whites	
1148 7	luckahoe dr	NASHVILLE	TN	37207	041 16 0 013.00	Whites	
1152 1	luckahoe dr	NASHVILLE	TN	37207	041 16 0 012.00	Whites	
3900 1	TUCKER RD	NASHVILLE	TN	37218	059 13 0 082.00	Whites	
3000 V	N HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 011.00	Whites	
3103 V	V HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 037.00	Whites	
3115 V	V HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 031.00	Whites	
3214 V	V HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 030.00	Whites	
3225 V	V HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 052.00	Whites	
3227 V	V HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 051.00	Whites	



STATE OF TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER RESOURCES William R. Snodgrass - Tennessee Tower 312 Rosa L. Parks Avenue, 11<sup>th</sup> Floor Nashville, Tennessee 37243-1102

October 24, 2018

Mr. Tom Palko Assistant Director Metro Water Services 1600 Second Avenue North, 5<sup>th</sup> Floor Nashville, Tennessee 37208

re: Metro Nashville Acquisition Demolition Project Davidson County, TN

Dear Mr. Palko:

The Division appreciates the opportunity to provide a response to the Metro Nashville Acquisition Demolition Project. The project involves acquiring twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal with assistance from the Tennessee Emergency Management Agency. These properties are located in the city limits of Nashville/Davidson County.

The Division's comments are as follows:

- Keep any disturbance to riparian vegetation to a minimum.
- If an aquatic feature must be crossed by machinery, and the crossing requires construction of a crossing structure such as a culvert or ford, notify the Natural Resources Unit so that we can review the crossing structure and its potential impact to the aquatic feature.
- Streambeds shall not be used as transportation routes for construction equipment. Temporary stream crossings shall be limited to one point in the construction area and erosion prevention and sediment control measures shall be utilized where stream banks are disturbed.

All of the properties are less than one acre in size, such that there should not be a land disturbance of one acre or more that would require a Construction Stormwater Permit (CGP). From reviewing the maps submitted, I only found one location where two properties were adjacent to one another and they still did not add up to one acre. The Division does encourage erosion controls be maintained during construction even with projects that will disturb less than one acre of land.

October 24, 2018 Mr. Tom Palko Letter Page 2

If you have any further questions, I will be glad to try to assist you. You may reach me at (615) 532-0170 or tom.moss@tn.gov.

.

Sincerely,

Ethorne A. Mose

Thomas A. Moss, P.G. Environmental Review Coordinator Compliance and Enforcement Unit

April Grippo, DWR Deputy Director cc:



September 21, 2018

Stormwater Division - Development Review 800 Second Avenue South P.O. Box 196300 Nashville, Tennessee 37219-6300

Mr. Robert Todd Fish and Wildlife Environmentalist TWRA P. O. Box 40747 Nashville, TN 37204

#### RE: Whites/Gibson/Stoners/7 Mile Creek **Acquisition/Demolition Project**

Dear Mr. Todd:

The Metropolitan Government of Nashville and Davidson County, with assistance from the Tennessee Emergency Management Agency, is proposing to acquire twenty-seven pieces of property that are located in various floodplains for the purpose of demolition and debris removal. These properties are located in the city limits of Nashville/Davidson County. Maps are enclosed, with the property locations marked. I am also including a property list with addresses, tax map and parcel numbers and the streams that were responsible for the flooding.

Project Goal: The demolition and removal of debris from this location.

Date of Demolition and Debris Removal: Pending approval of the grant by TEMA.

Demolition: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid.

Receipt of Debris: Upon approval of the grant by TEMA, debris removal and restoration of the property will be completed by the contractor who is awarded the demolition contract.

Asbestos Determination: Upon approval of the grant by TEMA, the Metropolitan Government will place the project out for bid if any asbestos are discovered on site.

Upon demolition of the structures and removal of all debris, the land will lie fallow in perpetuity.

After making your determination concerning this project, please forward your response to me.

Should you have any questions concerning this project, please feel free to contact Toni Plummer at (615) 862-4582 or myself at (615) 862-4510.



Tennessee Wildlife Resources Agency Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project Page 2

Very truly yours,

10m

Tom Palko Metro Water Services, Assistant Director

1600 Second Avenue North 5<sup>th</sup> Floor Nashville, TN 37208 615.862.4510 (Office) 615.862.4929(Fax)Enclosure

cc: Scott A. Potter, WS Director Tom Palko, WS Assistant Director

Whites/Gibson/Stoners/7 Mile Creek - Acquisition/Demolition Project							
House #	Address	City	State	Zip Code	Parcel #	Creek	
3843	CROUCH DR	NASHVILLE	TN	37207	059 14 0 148.00	Whites	
3855	CROUCH DR	NASHVILLE	TN	37207	059 10 0 244.00	Whites	
3867	CROUCH DR	NASHVILLE	TN	37207	059 10 0 241.00	Whites	
3875	CROUCH DR	NASHVILLE	TN	37207	059 10 0 239.00	Whites	
3891	CROUCH DR	NASHVILLE	TN	37207	059 10 0 235.00	Whites	
3903	CROUCH DR	NASHVILLE	TN	37207	059 10 0 232.00	Whites	
3907	CROUCH DR	NASHVILLE	n	37207	059 10 0 231.00	Whites	
3915	CROUCH DR	NASHVILLE	TN	37207	059 10 0 229.00	Whites	
3939	CROUCH DR	NASHVILLE	TN	37207	059 10 0 223.00	Whites	
5045	EDMONDSON PIKE	NASHVILLE	TN	37115	147 10 0 074.00	7 Mile	
248	EMMITT AVE	MADISON	TN	37115	051 08 0 070.00	Gibson	
3905	FLICKER DR	NASHVILLE	TN	37218	059 13 0 112.00	Whites	
146	HARRIS ST	MADISON	TN	37115	052 01 0 020.00	Gibson	
3001	HUMMINGBIRD DR	NASHVILLE	TN	37218	059 14 0 009.00	Whites	
732A	MADISON BLVD	MADISON	TN	37115	052 01 0 272.00	Gibson	
4937	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 048.00	Stoners	
4941	SHADOWLAWN DR	HERMITAGE	TN	37076	076 05 0 049.00	Stoners	
1140	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 015.00	Whites	
1148	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 013.00	Whites	
1152	TUCKAHOE DR	NASHVILLE	TN	37207	041 16 0 012.00	Whites	
3900	TUCKER RD	NASHVILLE	TN	37218	059 13 0 082.00	Whites	
3000	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 011.00	Whites	
3103	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 037.00	Whites	
3115	W HAMILTON AVE	NASHVILLE	TN	37218	059 14 0 031.00	Whites	
3214	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 030.00	Whites	
3225 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 052.00	Whites	
3227 \	W HAMILTON AVE	NASHVILLE	TN	37218	070 01 0 051.00	Whites	



## TENNESSEE WILDLIFE RESOURCES AGENCY

ELLINGTON AGRICULTURAL CENTER P. O. BOX 40747 NASHVILLE, TENNESSEE 37204

October 11, 2018

Tom Palko Metropolitan Government of Nashville and Davidson County Department of Water and Sewerage Services Stormwater Division – Development Review 800 Second Avenue South P.O. Box 196300 Nashville, TN 37219-6300

Re: Whites/Gibson/Stoners/7 Mile Creek Acquisition/Demolition Project

Dear Mr. Palko:

The Tennessee Wildlife Resources Agency has reviewed the information that you provided regarding the proposed acquisition of twenty-seven pieces of property on which demolition of structures and debris removal is proposed. These parcels are located in the Whites Creek, Gibson Creek, Stoners Creek and Sevenmile Creek watersheds. The properties proposed for acquisition are at 3843 Crouch Drive, 3855 Crouch Drive, 3867 Crouch Drive, 3875 Crouch Drive, 3891 Crouch Drive, 3903 Crouch Drive, 3907 Crouch Drive, 3915 Crouch Drive, 3939 Crouch Drive, 5045 Edmondson Pike, 248 Emmitt Avenue, 3905 Flicker Drive, 146 Harris Street, 3001 Hummingbird Drive, 732 A Madison Blvd., 4937 Shadowlawn Drive, 4941 Shadowlawn Drive, 1140 Tuckahoe Drive, 1148 Tuckahoe Drive, 1152 Tuckahoe Drive, 3900 Tucker Road, 3000 W Hamilton Avenue, 3103 W Hamilton Avenue, 3115 W Hamilton Avenue, 3214 W Hamilton Avenue, 3225 W Hamilton Avenue, and 3227 W Hamilton Avenue. We have reviewed our databases for documented occurrences of state listed species within the boundaries of the proposed parcels and found no occurrences. The state and federally Endangered Nashville Crayfish (Orconectes shoupi) has been documented to occur in Sevenmile Creek which is adjacent to the property located at 5045 Edmondson Pike. It is our understanding that no wetlands or streams will be impacted by the project. Based on these understandings, we do not anticipate adverse impacts to state listed species under our authority due to the proposed project; provided that best management practices to address erosion and sediment are implemented and maintained during demolition and debris removal.

Thank you for the opportunity to review and comment on this proposed project. If you have further questions regarding this matter, please contact me at 615-781-6572.

Sincerely,

Robert M. Jodd

Robert M. Todd Fish and Wildlife Environmentalist

## APPLICATION FOR HMGP 4476 ACQUISTION/DEMOLTION PROJECT 4 Properties

### METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

—DocuSigned by: Scott Potter

3/17/2021

<sup>994E7D0AE02B458</sup> Scott Potter, Director Department of Metro Water Services

Date

# ORIGINAL

#### METROPOLITAN COUNTY COUNCIL

#### **Resolution No.**

A resolution approving an application for a Hazard Mitigation Grant from the State of Tennessee, Tennessee Emergency Management Agency, to The Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Nashville Water and Sewerage Services Department, for flood mitigation.

Introduced
Adopted
Approved
By Metropolitan Mayor