

Mayor.....834-7717
Administrator.....834-7711
Pub Works
Superintendent.....834-7725
Parks & Rec Director...834-7706
Assessor/Building
Inspector.....835-6016

Fax: 834-7713
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Street and Utility Dept..834-7779
Laboratory.....834-7721
Water Dept.....834-7719
Fax: 834-7451
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CITY OF OCONTO
1210 Main Street, Oconto, WI 54153

City of Oconto Building Inspection Department

PROPERTY BENCHMARK CERTIFICATE

Property Owner: _____ Phone Number: _____
Property Address: _____ Parcel Number: _____
Lot Number: _____ CSM Number or Subdivision: _____
Property Description: _____

A benchmark shall be documented on the property to assure that minimum elevations are being complied with in the floodplain. A benchmark on the property will assist the owner, contractor and inspector to clarify minimum floodplain standards for the proposed project(s). Benchmarks shall be established so as to be readily accessible to the project and easily verifiable by providing nearby elevations.

Indicate below the description of known benchmark in NAVD 88 or attach a sheet with that information. Whichever is used must have individual's seal or stamp for authenticity. This shall be valid for six months unless otherwise noted.

I, _____, hereby certify that a benchmark was established for the property indicated above on _____. Benchmark elevation is at _____ ft. and Reginal floodplain elevation is at _____ ft.

Seal or Stamp

A large, empty rectangular box with a thin black border, intended for a seal or stamp.

Described benchmark or attached sheet: