DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008 Expiration: 11/30/2018

Сор			ate and all attachments for			cial, (2) in				_	ər.
	SECTION A - PROPERTY INFORMATION						FORM INSURANCE COMPANY USE				
A1.	Building Owner's Name					Policy Number:					
A2.	. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company Box No.					Company NAI(Number:)				
City	/			<u></u>	4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,	State			Zip Code		
A3.	Property Description	(Lot and Blo	ock Numbers, Tax Parce	el Nu	mber, Legal De	scription	, etc.)				
	. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) . Latitude/Longitude: Lat. Long. Horizontal Datum: ONAD 1927 ONAD 1983										
A6.	Attach at least 2 pho	otographs of	the building if the Certifi	cate	is being used to	o obtain f	flood i	nsurance.			
A7.	Building Diagram Nu	umber									
A8.	For a building with a	crawispace	or enclosure(s):		 A9	. For a b	buildin	g with an attach	ed garage:		
	a) Square footage of	crawlspace	or enclosure(s)		sq ft a)	Square	footag	e of attached ga	arage		sq ft
	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade				·	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade					
	c) Total net area of fl	lood opening	s in A8.b		sq in c)	Total net	t area	of flood opening	gs in A9.b		sq in
	d) Engineered flood	openings?			d)	Enginee	ered flo	ood openings?	OYes	C No	
		SE	ECTION B - FLOOD INS	SURA	NCE RATE M	AP (FIRM	M) INF	ORMATION			
B1.	NFIP Community Na	ame & Comn	nunity Number		B2. County Name					B3. State	!
B4.	Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7.	FIRM Panel E Revised Date	ffective/	B8.	Flood Zone(s)	B9. Base Flo (Zone A depth	ood Elevat O, use bas	
B11 B12	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: OFIS Profile FIRM Community Determined Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No										
De	signation Date:		-) OP		I					
	Duilding claustions of		CON C - BUILDING ELL						Finished Cor	otruction	
C2. Cor * A Bei	Elevations - Zones A nplete Items C2.a -h t new Elevation Certific nchmark Utilized:	1 - A30, AE, below accord ate will be re	AH, A (with BFE), VE, Y ling to the building diagr quired when construction elevations in items a) th	V1 - V am s on of t	V30, V (with BF pecified in Item the building is c Vertical	E), AR, A A7. In P complete Datum:	AR/A, Puerto	AR/AE, AR/A1 Rico only, enter	- A30, AR/AH meters.		
Dat	um used for building e	elevations m	ust be the same as that	used	for the BFE.				Check the m	easureme	nt used.
a) [.]	Top of bottom floor (in	cluding base	ement, crawlspace, or er	nclos	ure floor)		-		C fee	t () met	iers
b) [.]	Top of the next higher	floor			·		-	· · · · · · · · · · · · · · · · · · ·	C fee	t C met	iers
c)	Bottom of the lowest h	orizontal stru	uctural member (V Zone	es onl	ly) _		-	· and in the second		t C met	lers
d) /	Attached garage (top	of slab)			-		-		Ofee	t () met	ers
1 ·	Lowest elevation of main to the content of the cont	•	equipment servicing the	build	ing		-		Cfee	t Omet	ters
		•	·		-				~		•
ľ	Lowest adjacent (finis									-	
			next to building (HAG)	· · '		data pilanan di se dan Barakan	-	4	Cfee	t () met	ers.
1	Lowest adjacent grade structural support	e al Iowest e	levation of deck or stairs	s, INC	iuaing -				() fee	t Ome	lers

ELEVATION CERTIFICATE

SECTION D - S	SURVEYOR, ENG	INEER, OR A	RCHITECT C	ERTIFICATION
that the information on this Certificate represents	my best efforts to	interpret the		ed by law to certify elevation information. <i>I certify</i> . <i>I understand that any false statement may be</i>
punishable by fine or imprisonment under 18 U.S	S. Code, Section 10	001.		
Check here if attachments.	Were latitude and provided by a lice	ensed land su		
	<u> </u>	No		—
Certifier's Name		License Num	ber	
Title Company				PLACE SEAL HERE
Address	City	State	Zip Code	
Signature	Date	Teleph	one	
Copy both sides of this Elevation Certificate for (1) community offici	ial, (2) insurar	nce agent/com	npany, and (3) building owner.
Comments (including type of equipment and loca	ation , per C2(e), if	applicable)"		
Signature				Date
_	PMATION (SUP)			R ZONE AO AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Ite Sections A, B,and C. For Items E1 -E4, use natu E1. Provide elevation information for the following	ral grade, if availat g and check the ap	ole. Check the	e measuremer	nt used. In Puerto Rico only, enter meters.
highest adjacent grade (HAG) and the lowest	adjacent grade (L	AG).		
a) Top of bottom floor (including basement, c or enclosure) is	rawlspace,		Ofeet (meters above or below the HAG.
 b) Top of bottom floor (including basement, or or enclosure) is 	rawlspace,	-	Ofeet C	meters above or below the LAG.
E2. For Building Diagrams 6 -9 with permanent fl higher floor (elevation C2.b in the diagrams) of th		rided in Sectio	-	nd/or 9 (see pages 8 -9 of Instructions), the next O meters above or below the HAG.
E3. Attached garage (top of slab) is		**	C feet C	meters above or below the HAG.
E4. Top of platform of machinery and /or equipmoservicing the building is	ent	-	Ofeet C	meters 🔲 above or 🗌 below the HAG.
E5. Zone AO only: If no flood depth number is av management ordinance? Yes No	•			in accordance with the community's floodplain nformation in Section G.
SECTION F - PROPER				
The property owner or owner's authorized repres				-
community-issued BFE) or Zone AO must sign he Property Owner or Owner's Authorized Represer	ere. The statement			
Address	City		State	ZIP Code
Signature	Date		Telepho	ne
Comments				
				Check here if attachments.

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SECTION G - COMMUNITY INFORMATION (OPTIONAL)								
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 - G10. In Puerto Rico only, enter meters.								
31. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)								
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.								
G3. The following information (Items G4 -G10) is provided for community floodplain management purposes.								
G4. Permit Number	G5. Date Permit Issu	ued G6. Da	te Certificate	ccupancy Issued				
G7. This permit has been issued for: New Construction Substantial Improvement								
G8. Elevation of as-built lowest floor (including ba of the building:	asement)	() feet	() meters	Datum				
G9. BFE or (in Zone AO) depth of flooding at the site:	() feet	C meters	Datum					
G10. Community's design flood elevation:		() feet	() meters	Datum				
Local Official's Name		Title						
Community Name	Telephone							
Signature	Date			· · · ·				
Comments			a e e e e e e e e e e e e e e e e e e e					

BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008 Expiration: 11/30/2018

MPORTANT: In these spaces, copy the c	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit	Policy Number:		
City	State	Zip Code	Company NAIC Number:
fusing the Elevation Cartificate to obtain NE	ID flood incurrence officiat	oast 2 building photograph	a balow according to the instructions for

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.

BUILDING PHOTOGRAPHS

Continuation Page

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the correspond	FORM INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit,Suite, and/	Policy Number:		
City	State	Zip Code	Company NAIC Number:

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.