DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

ELEVATION CERTIFICATE OMB Control Number: 1660-0008 **IMPORTANT:** FOLLOW THE INSTRUCTIONS ON PAGES 9-16 Expiration: 11/30/2018 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. FORM INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION 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 NAIC Number: City Zip Code A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Horizontal Datum: A5. Latitude/Longitude: Lat. Long. NAD 1927 **NAD 1983** A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of crawlspace or enclosure(s) a) Square footage of attached garage sa ft sa ft b) Number of permanent flood openings b) Number of permanent flood openings in the in the attached garage within 1.0 foot crawlspace or enclosure(s) within 1.0 foot above adjacent grade above adjacent grade c) Total net area of flood openings in A8.b c) Total net area of flood openings in A9.b sq in sq in ○ No ○ No **○**Yes d) Engineered flood openings? d) Engineered flood openings? SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP Community Name & Community Number B2.** County Name B3. State B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date B7. FIRM Panel Effective/ B8. Flood Zone(s) B9. Base Flood Elevation(s) Revised Date (Zone AO, use base flood depth B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ○FIS Profile ○FIRM ○ Community Determined ○ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: \(\cap \text{NGVD 1929} \) \(\cap \text{NAVD 1988} \) \(\cap \text{Other/Source:} \) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? (C) Yes ○ No **Designation Date:** CBRS **OPA** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) **Building Under Construction*** C1. Building elevations are based on: Construction Drawings* **C** Finished Construction C2. Elevations - Zones A1 - A30, AE, AH, A (with BFE), VE, V1 - V30, V (with BFE), AR, AR/A, AR/AE, AR/A1 - A30, AR/AH, AR/AO. Complete Items C2.a -h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. A new Elevation Certificate will be required when construction of the building is complete. Vertical Datum: Benchmark Utilized: Indicate elevation datum used for the elevations in items a) through h) below. ONGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) ∫ feet meters meters feet b) Top of the next higher floor ∫ feet meters c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) ∫feet meters e) Lowest elevation of machinery or equipment servicing the building meters C feet (Describe type of equipment and location in Comments) Lowest adjacent (finished) grade next to building (LAG) ∫ feet meters g) Highest adjacent (finished) grade next to building (HAG) meters ∫ feet h) Lowest adjacent grade at lowest elevation of deck or stairs, including () feet meters structural support

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SECTION D -	SURVEYOR, ENG	INEER, OR A	RCHITECT CEF	RTIFICATION
This certification is to be signed and sealed by a that the information on this Certificate represent	s my best efforts to	interpret the		•
punishable by fine or imprisonment under 18 U.				
Check here if attachments.	Were latitude and provided by a lice			
	⊖Yes ⊖	○Yes ○No		, , ; 1
Certifier's Name		License Num	ber	
Title	Company Name			PLACE SEAL HERE
Address	City	State	Zip Code	
Signature	Date	Teleph	one	
Copy both sides of this Elevation Certificate for	(1) community offic	ial, (2) insurar	nce agent/compa	any, and (3) building owner.
Comments (including type of equipment and loc	cation, per C2(e), if	f applicable)"		
·				
Signature				Date
SECTION E - BUILDING ELEVATION INF 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 followir highest adjacent grade (HAG) and the lowes			es to show whet	ther the elevation is above or below the
C 1		<i>3</i> (<i>0</i>).		
a) Top of bottom floor (including basement, or enclosure) is	crawlspace,	-	_ Ofeet Or	meters above or below the HAG.
 b) Top of bottom floor (including basement, or enclosure) is 	crawlspace,	-	feet Om	neters above or below the LAG.
E2. For Building Diagrams 6 -9 with permanent the higher floor (elevation C2.b in the diagrams) of the control		vided in Section	on A Items 8 and	
E3. Attached garage (top of slab) is			Cfeet Cm	neters above or below the HAG.
E4. Top of platform of machinery and /or equipm servicing the building is	nent	- · ·	⊜feet ⊝m	neters above or below the HAG.
E5. Zone AO only: If no flood depth number is a	wailable is the ten	of the bettern		
	•			ormation in Section G.
SECTION F - PROPE				•
The property owner or owner's authorized repre- community-issued BFE) or Zone AO must sign h				
Property Owner or Owner's Authorized Represe	entative's Name:			
Address	City		State	ZIP Code
Signature	Date		Telephone)
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 flot A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and si G10. In Puerto Rico only, enter meters.										
G1. 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 (with AO.	nout a FEMA-is	ssued or community-issued BFE) or Zone								
G3. The following information (Items G4 -G10) is provided for community floodplain										
G4. Permit Number G5. Date Permit Issued G6. [Date Certificate	e of Compliance/Occupancy Issued								
G7. This permit has been issued for: New Construction Substantial Improvement	nt ·									
G8. Elevation of as-built lowest floor (including basement) of the building:	et () meters	Datum								
G9. BFE or (in Zone AO) depth of flooding at the building site:	et Ometers	Datum								
G10. Community's design flood elevation:	et Ometers	Datum								
Local Official's Name Title										
Community Name Telephone										
Signature Date										
Comments										

BUILDING PHOTOGRAPHS

See instructions for Item A6

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Building Street Address (including Apt.,	d Box No.	Policy Number:									
City	Stat	te Zip Code		Company NAIC							
Number: 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 OMB Control Number: 1660-0008 **Continuation Page** Expiration: 11/30/2018 FORM INSURANCE COMPANY USE IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O.Route and Box No. Policy Number: City Company NAIC Number: State Zip Code 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.