National Flood Insurance Program V-ZONE CERTIFICATE

Name	Policy Number (Insurance Co. Use)		
Building Address or			
Other Description			
City		State	Zip Code
SECTION I	: Flood Insurance Rate	Map (FIRM)	Information
Community Number Panel		• •	
•			
	SECTION II: Elevations Certificate does not substitu		
1. Elevation of the Bottom of Lowe	st Horizontal Structural	Member	feet □ NGVD or □ NAVD
2. Base Flood Elevation (BFE)			feet □ NGVD or □ NAVD
3. Elevation of Lowest Adjacent Gr	ade		feet □ NGVD or □ NAVD
4. Approximate Depth of Anticipate	ed Scour/Erosion used for	or Foundation D	Design feet □ NGVD or □ NAVD
5. Embedment Depth of Pilings or F	Foundation Below Lowe	st Adjacent Gra	ide feet □ NGVD or □ NAVD
NOTE: This s I certify that I have developed or reviewed		registered engine and specifications	er or architect for construction and that the design and
 methods of construction to be used are in a The bottom of the lowest horizontal str the BFE; and 	*		for meeting the following provisions: piles and columns) is elevated to or above
to the effects of the wind and water those associated with the base flood. V	loads acting simultaneously Vind loading values used are	on all building co	otation, collapse, and lateral movement due omponents. Water loading values used are the applicable State or local building code. onditions associated with the base flood,
SECTION	N IV: Breakaway Wall	Certification S	Statement
	ection must be certified by a		
	exceed a design safe loadin		
I certify that I have developed or reviewed methods of construction to be used for the following provisions:	breakaway walls are in accor	dance with accept	ed standards of practice for meeting the
	and supporting foundation sy wind and water loads acting	stem shall not be	cur during the base flood; and subject to collapse, displacement, or other n all building components (wind and water
	SECTION V: Cer	tification	
Signati	ure below certifies: Sec		tion IV
Certifier's Name			
Title		License Number	
Street Address			
City	State		Zip Code

Signature ______ Date _____ Telephone Number _____