ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

For Insurance Company Use:
Policy Number

A1. Building Owner’s Name

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City State 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.)

A5. Latitude/Longitude: Lat. _____ Long. _____

Horizontal Datum: 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):

a) Square footage of crawlspace or enclosure(s) ______ sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade

c) Total net area of flood openings in A8.b ______ sq in

d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

a) Square footage of attached garage ______ sq ft

b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade

c) Total net area of flood openings in A9.b ______ sq in

d) Engineered flood openings? Yes No

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/Revised Date

B8. Flood Zone(s)

B9. Base Flood Elevation(s) (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 (Describe) ______

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) ______

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

☐ Yes ☐ No

Designation Date ______

CBRS ☐ OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☐ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.


Benchmark Utilized ______ Vertical Datum ______

Conversion/Comments ______

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) ______ ______

b) Top of the next higher floor ______ ______

c) Bottom of the lowest horizontal structural member (V Zones only) ______ ______

d) Attached garage (top of slab) ______ ______

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) ______ ______

f) Lowest adjacent (finished) grade next to building (LAG) ______ ______

g) Highest adjacent (finished) grade next to building (HAG) ______ ______

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support ______ ______

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. ☐

Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☐ No

Certifier’s Name ______

License Number ______

Title ______

Company Name ______

Address ______

City State ZIP Code ______

Signature ______

Date ______

Telephone ______

OMB No. 1660-0008 Expires March 31, 2012

PLACE SEAL HERE

FEMA Form 81-31, Mar 09 See reverse side for continuation. Replaces all previous editions.
IMPORTANT: In these spaces, copy the corresponding information from Section A.

For Insurance Company Use:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number

Company NAIC Number

City State ZIP Code

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Date

☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
   a) Top of bottom floor (including basement, crawlspace, or enclosure) is ______feet ______meters ______above or ______below the HAG.
   b) Top of bottom floor (including basement, crawlspace, or enclosure) is ______feet ______meters ______above or ______below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is ______feet ______meters ______above or ______below the HAG.

E3. Attached garage (top of slab) is ______feet ______meters ______above or ______below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is ______feet ______meters ______above or ______below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community’s floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER’S REPRESENTATIVE) CERTIFICATION

The property owner or owner’s authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner’s or Owner’s Authorized Representative’s Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments

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 and G9.

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 (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>G4.</td>
<td>Permit Number</td>
</tr>
<tr>
<td>G5.</td>
<td>Date Permit Issued</td>
</tr>
<tr>
<td>G6.</td>
<td>Date Certificate Of Compliance/Occupancy Issued</td>
</tr>
</tbody>
</table>

G7. This permit has been issued for:  ☐ New Construction  ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: ______feet ______meters (PR) Datum ______

G9. BFE or (in Zone AO) depth of flooding at the building site: ______feet ______meters (PR) Datum ______

G10. Community's design flood elevation: ______feet ______meters (PR) Datum ______

Local Official’s Name

Title

Community Name

Telephone

Signature Date

Comments

☐ Check here if attachments

FEMA Form 81-31, Mar 09

Replaces all previous editions
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City	State	ZIP Code

For Insurance Company Use:

Policy Number

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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.” If submitting more photographs than will fit on this page, use the Continuation Page, following.
### Building Photographs

**Continuation Page**

<table>
<thead>
<tr>
<th>Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</th>
<th>Policy Number</th>
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</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

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.”