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 | I) Information |
| Community Number Pane | l Number Suffix Date | of FIRM Index FIRM Zone |
| | SECTION II: Elevation Information | on |
| NOTE: Th | his Certificate does not substitute for an Elevati | |
| 1. Elevation of the Bottom of Low | rest Horizontal Structural Member | feet (NGVD) |
| 2. Base Flood Elevation (BFE) | | feet (NGVD) |
| 3. Elevation of Lowest Adjacent G | Grade | feet (NGVD) |
| 4. Approximate Depth of Anticipat | ted Scour/Erosion used for Foundation | Design feet (NGVD) |
| 5. Embedment Depth of Pilings or | Foundation Below Lowest Adjacent G | frade feet (NGVD) |
| | CTION III: V-Zone Certification Sta s section must be certified by a registered engin | |
| the BFE; and The pile and column foundation and to the effects of the wind and water those associated with the base flood. | structural member of the lowest floor (excludir structure attached thereto is anchored to resist r loads acting simultaneously on all building Wind loading values used are those required by n at the foundation has been anticipated for | flotation, collapse, and lateral movement due components. Water loading values used are by the applicable State or local building code. |
| SECTIO | ON IV: Breakaway Wall Certification | n Statement |
| | s section must be certified by a registered engin | |
| when breakaway wal | lls exceed a design safe loading resistance of 2 | 0 pounds per square foot |
| | d the structural design, plans, and specification e breakaway walls are in accordance with acce | |
| • The elevated portion of the building | from a water load less than that which would of and supporting foundation system shall not be of wind and water loads acting simultaneously I in Section III). | be subject to collapse, displacement, or other |
| Signa | SECTION V: Certification ature below certifies: Section III; S | Section IV |
| Certifier's Name | | |
| | License Numbe | |
| City | State | Zip Code |
| | | |
| Signature | Date | Telephone Number |