

NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

AND

INSTRUCTIONS

2015 EDITION

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

ELEVATION CERTIFICATE AND INSTRUCTIONS

Paperwork Reduction Act Notice

Public reporting burden for this data collection is estimated to average 3.75 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0008). **NOTE: Do not send your completed form to this address.**

Privacy Act Statement

Authority: Title 44 CFR § 61.7 and 61.8.

Principal Purpose(s): This information is being collected for the primary purpose of estimating the risk premium rates necessary to provide flood insurance for new or substantially improved structures in designated Special Flood Hazard Areas.

Routine Use(s): The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/ FEMA-003 – National Flood Insurance Program Files System or Records Notice 73 Fed. Reg. 77747 (December 19, 2008); DHS/ FEMA/NFIP/LOMA-1 – National Flood Insurance Program (NFIP) Letter of Map Amendment (LOMA) System of Records Notice 71 Fed. Reg. 7990 (February 15, 2006); and upon written request, written consent, by agreement, or as required by law.

Disclosure: The disclosure of information on this form is voluntary; however, failure to provide the information requested may result in the inability to obtain flood insurance through the National Flood Insurance Program or the applicant may be subject to higher premium rates for flood insurance. Information will only be released as permitted by law.

Purpose of the Elevation Certificate

The Elevation Certificate is an important administrative tool of the National Flood Insurance Program (NFIP). It is to be used to provide elevation information necessary to ensure compliance with community floodplain management ordinances, to determine the proper insurance premium rate, and to support a request for a Letter of Map Amendment (LOMA) or Letter of Map Revision based on fill (LOMR-F).

The Elevation Certificate is required in order to properly rate Post-FIRM buildings, which are buildings constructed after publication of the Flood Insurance Rate Map (FIRM), located in flood insurance Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, and AR/AO. The Elevation Certificate is not required for Pre-FIRM buildings unless the building is being rated under the optional Post-FIRM flood insurance rules.

As part of the agreement for making flood insurance available in a community, the NFIP requires the community to adopt floodplain management regulations that specify minimum requirements for reducing flood losses. One such requirement is for the community to obtain the elevation of the lowest floor (including basement) of all new and substantially improved buildings, and maintain a record of such information. The Elevation Certificate provides a way for a community to document compliance with the community's floodplain management ordinance.

Use of this certificate does not provide a waiver of the flood insurance purchase requirement. Only a LOMA or LOMR-F from the Federal Emergency Management Agency (FEMA) can amend the FIRM and remove the Federal mandate for a lending institution to require the purchase of flood insurance. However, the lending institution has the option of requiring flood insurance even if a LOMA/LOMR-F has been issued by FEMA. The Elevation Certificate may be used to support a LOMA or LOMR-F request. Lowest floor and lowest adjacent grade elevations certified by a surveyor or engineer will be required if the certificate is used to support a LOMA or LOMR-F request. A LOMA or LOMR-F request must be submitted with either a completed FEMA MT-EZ or MT-1 package, whichever is appropriate.

This certificate is used only to certify building elevations. A separate certificate is required for floodproofing. Under the NFIP, nonresidential buildings can be floodproofed up to or above the Base Flood Elevation (BFE). A floodproofed building is a building that has been designed and constructed to be watertight (substantially impermeable to floodwaters) below the BFE. Floodproofing of residential buildings is not permitted under the NFIP unless FEMA has granted the community an exception for residential floodproofed basements. The community must adopt standards for design and construction of floodproofed basements before FEMA will grant a basement exception. For both floodproofed non-residential buildings and residential floodproofed basements in communities that have been granted an exception by FEMA, a floodproofing certificate is required.

Additional guidance can be found in FEMA Publication 467-1, Floodplain Management Bulletin: Elevation Certificate, available on FEMA's website at https://www.fema.gov/media-library/assets/documents/3539?id=1727.

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

					3) building owner.

		TION A - PROPERTY					IRANCE COMPANY USE	
A1. Building Owner							Policy Number:	
George H White, Tru								
A2. Building Street A Box No. Cripple Creek Rd								
City	City State ZIP Code							
Murfreesboro				Tenness	ee	37130		
A3. Property Descri	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
Tract 5, Bill D Boner	Tract 5, Bill D Boner Survey; Tax Map 132, Parcel 10.03; Record book 1435, Page 2887							
A4. Building Use (e.	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) No Building. Pad Only							
A5. Latitude/Longitu	ide: Lat. 3	5°46'13.2" N	Long. 8	6°12'54.7" W	Horizonta	l Datum: 🗌 NAD	1927 X NAD 1983	
A6. Attach at least 2	2 photograp	hs of the building if the	e Certific	ate is being u	used to obtain floo	d insurance.		
A7. Building Diagrar	n Number							
A8. For a building w	ith a crawls	pace or enclosure(s):						
		space or enclosure(s)			sq ft			
		ood openings in the cra	_			t above adjacent d	rade	
c) Total net area			awispac			above adjacent g		
				sq ir	I			
d) Engineered f	lood openin	igs? 🗌 Yes 🗌 N	0					
A9. For a building wit	th an attach	ed garage:						
a) Square footag	ge of attach	ed garage		sq ft				
b) Number of pe	ermanent flo	ood openings in the att	tached g	arage within	1.0 foot above adj	acent grade		
c) Total net area	a of flood op	enings in A9.b		sq	in			
d) Engineered fl	ood openin	gs? 🗌 Yes 🦳 N	lo					
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION		
B1. NFIP Community		ommunity Number		B2. County			B3. State	
Rutherford County 4	70165			Rutherford (County		Tennessee	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel ective/	B8. Flood Zone(s)	B9. Base Flood (Zone AO, us	Elevation(s) se Base Flood Depth)	
47149C0315H	н	10-16-2008	01-07-2	vised Date 2007	AE & X	746.0		
R10 Indicate the sec	uree of the	Base Flood Elevation		ata ar basa fl	and donth ontorod	in Itom PO:		
		Community Deterr				in ten ba.		
B11. Indicate elevati	ion datum u	sed for BFE in Item B	9: 🗌 N	GVD 1929	× NAVD 1988	Other/Source		
B12. Is the building	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No							
Designation Da								
200.9.100011.00			00110					

OMB No.	1660-000	08		
Expiration	Date: N	ovember	30,	2018

ELEVATION CERTIFICATE	Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Cripple Creek Rd	, Suite, and/or Bldg. No.) or P	O. Route and Box No.	Policy Number:
City Murfreesboro	State Tennessee	ZIP Code 37130	Company NAIC Number
SECTION C - B	UILDING ELEVATION INFO	RMATION (SURVEY	REQUIRED)
 C1. Building elevations are based on: A new Elevation Certificate will be red C2. Elevations – Zones A1–A30, AE, AH, Complete Items C2.a–h below accordine Benchmark Utilized: RCC-046 Indicate elevation datum used for the end NGVD 1929 X NAVD 198 Datum used for building elevations mutual a) Top of bottom floor (including bases b) Top of the next higher floor c) Bottom of the lowest horizontal strution d) Attached garage (top of slab) e) Lowest elevation of machinery or end 	 ✓ Construction Drawings* quired when construction of the A (with BFE), VE, V1–V30, V ing to the building diagram spression of the building diagram sp	Building Under Cons e building is complete. (with BFE), AR, AR/A, A ecified in Item A7. In Pue Datum: NAVD1988 h) below. or the BFE.	truction* Finished Construction R/AE, AR/A1–A30, AR/AH, AR/AO. erto Rico only, enter meters. Check the measurement used. Check
f) Lowest adjacent (finished) grade no	ext to building (LAG)		747.40 X feet meters
g) Highest adjacent (finished) grade n	ext to building (HAG)		747.92 X feet meters
 h) Lowest adjacent grade at lowest ele structural support 	evation of deck or stairs, inclu	ding	feet meters
SECTION D - S	SURVEYOR, ENGINEER, C	R ARCHITECT CERT	FICATION
This certification is to be signed and sealed I certify that the information on this Certifica statement may be punishable by fine or imp Were latitude and longitude in Section A pr	ate represents my best efforts prisonment under 18 U.S. Coc	to interpret the data ava le, Section 1001.	ilable. I understand that any false
Certifier's Name	License Numb	er	C. R
Michael C Roberts Title Land Surveyor, Owner Company Name Roberts Land Surveying Address 203 High Point Lane	2064		AGRICULTURE AGRICULTURE
City	State	ZIP Code	- 11 NA
Woodbury	Tennessee	37190	SEE No.
Signature Michael C Roth Digitally signed by Michael C I Date 2017 07 17 00 34 27 48	Roberts, PLS 07-17-2017	Telephone (615) 563-1462	Ext.
Copy all pages of this Elevation Certificate an	id all attachments for (1) comm	unity official, (2) insuranc	e agent/company, and (3) building owner.
Comments (including type of equipment and There is no structure on this property. The elevations shown in C2(f) and C2(g) and			

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPO	ORTANT: In these spaces, copy the corresp		FOR INSURANCE COMPANY USE					
Buil	ding Street Address (including Apt., Unit, Suite	, and/or Bldg. No.) or P.(D. Route and Box I	No.	Policy Number:			
· ·	ple Creek Rd							
City	freesboro	State Tennessee	ZIP Code 37130		Company NAIC Number			
- Within	SECTION E – BUILDING							
		ONE AO AND ZONE						
com	Zones AO and A (without BFE), complete Item plete Sections A, B,and C. For Items E1–E4, u er meters.							
E1.	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.			
	For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided in	Section A Items 8	and/or 9] meters				
E3.	Attached garage (top of slab) is		feet] meters	above or below the HAG.			
E4.	Top of platform of machinery and/or equipmer servicing the building is	nt	feet	meters	above or below the HAG.			
	Zone AO only: If no flood depth number is ava floodplain management ordinance?				ordance with the community's ertify this information in Section G.			
	SECTION F - PROPERTY	OWNER (OR OWNER'S	REPRESENTATI	VE) CE	RTIFICATION			
The com	property owner or owner's authorized represer munity-issued BFE) or Zone AO must sign her	ntative who completes S e. The statements in Se	ections A, B, and E ctions A, B, and E	E for Zon are corre	e A (without a FEMA-issued or ect to the best of my knowledge.			
Prop	perty Owner or Owner's Authorized Representa	ative's Name						
Add	ress	City		Stat	te ZIP Code			
Sigr	nature	Dat	e	Tele	ephone			
Com	nments							
					Check here if attachments.			

ELEVATION CERTIFICATE

OMB No.	1660-0	8000			
Expiration	Date:	November	30,	2018	;

ELEVATION CERTIFICATE			Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the corr	esponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S Cripple Creek Rd	uite, and/or Bldg. No.) o	r P.O. Route and Box N	p. Policy Number:
City Murfreesboro	State Tennessee	ZIP Code 37130	Company NAIC Number
SECTIO	ON G - COMMUNITY IN	IFORMATION (OPTION	AL)
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	n Certificate. Complete th hter meters.	ne applicable item(s) and	I sign below. Check the measurement
			ed and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed Sect or Zone AO.	ion E for a building locat	ed in Zone A (without a	FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for cor	mmunity floodplain mana	gement purposes.
G4. Permit Number	G5. Date Permit Issue	ed (66. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:		Substantial Improvemer	t
of the building:			feet meters Datum
G9. BFE or (in Zone AO) depth of flooding atG10. Community's design flood elevation:	the building site:	L	feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment and log	cation, per C2(e), if appli	icable)	
			Check here if attachments.

ELEVATION CERTIFICATE	See Instructions	for Item A6.	Expiration Date: No	
IMPORTANT: In these spaces, copy the c	orresponding information	from Section A.	FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit Cripple Creek Rd	t, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Murfreesboro	Tennessee	37130		mber
If using the Elevation Certificate to obta instructions for Item A6. Identify all photog "Left Side View." When applicable, photo vents, as indicated in Section A8. If submit	raphs with date taken; "Fron graphs must show the four	nt View" and "Rear View"; a ndation with representative	nd, if required, "Right e examples of the floo	Side View" and
	,			
	Photo C	Dne		
	Photo On			
Photo One Caption		e		Clear Photo One
	Photo T	wo		
Photo Two Caption	Photo Two	0		Clear Photo Two

BUILDING PHOTOGRAPHS

OMB No. 1660-0008

ELEVATION CERTIFICATE	RTIFICATE Continuation Page			OMB No. 1660-0008 Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy the c	orresponding information	from Section A.	FOR INSURANCE	COMPANY USE		
Building Street Address (including Apt., Unit Cripple Creek Rd			Policy Number:			
City Murfreesboro	State Tennessee	ZIP Code 37130	Company NAIC N	umber		
If submitting more photographs than will with: date taken; "Front View" and "Re photographs must show the foundation wit	ar View"; and, if required,	"Right Side View" and	"Left Side View." W	hen applicable,		
	Photo Th	ree				
	Photo Thre					
Photo Three Caption				Clear Photo Three		
	Photo Fe	our				
	Photo Fou	r				
Photo Four Caption				Clear Photo Four		

BUILDING PHOTOGRAPHS