



Henrico County Tips for Completing an Elevation Certificate Form

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: _____	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: _____	Company NAIC Number: _____
City: _____ State: _____ ZIP Code: _____	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: _____	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): _____	
A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: _____	<i>Must be: 1A, 1B, 2A, 2B, 3, 4, 5, 6, 7, 8, 9. Building diagram details and examples are included in the FEMA Elevation Certificate instructions.</i>
*A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): _____ sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: _____ Engineered flood openings: _____	
d) Total net open area of non-engineered flood openings in A8.c: _____ sq. ft.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): _____ sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): _____ sq. ft.	
*A9. For a building with an attached garage:	
a) Square footage of attached garage: _____ sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: _____ Engineered flood openings: _____	
d) Total net open area of non-engineered flood openings in A9.c: _____ sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): _____ sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): _____ sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: Henrico County	B1.b. NFIP Community Identification Number: 510077
B2. County Name: Henrico	B3. State: VA B4. Map/Panel No.: _____ B5. Suffix: _____
B6. FIRM Index Date: _____	B7. FIRM Panel Effective/Revised Date: _____
B8. Flood Zone(s): _____ B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): _____	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

All items in Sections A-F must be completed. If an item is not applicable, instead of leaving it blank, it must be completed with "NA".

Don't forget to add photos at the end of the document. There must be at least 2.

*If a garage is located below the finished floor (e.g., garage with apartment above), A8 should be used. If a garage is attached to the side of a structure (e.g., ranch style home with garage at end), A9 should be used.

If located in a Community SFHA, complete the appropriate FIRM information in B4-B7. In B8, list "X, County [A or AE]". In B9, list the County BFE. You may have to call DPW to obtain this value.

The values in (d) must be greater than or equal to the values in (a), even if engineered flood openings are used, as per Sec. 10-10(b)(4) of the Henrico County Code.

If engineered flood openings are used, use (d) for the actual opening size and (e) for the engineered size. Certification documentation must be attached to the Elevation Certificate.

BFE source for B10 should never be "FIRM" because it is rounded. Henrico has model backed BFEs for all flood zones. "FIS Profile" should be used for FEMA AE zones, "Community Determined" or "Other" should be used for all other flood zones.

There is currently no LiMWA in Henrico.

This information is from the US Fish and Wildlife Service. There are currently no CBRS or OPA in Henrico.



Sections C and D must be completed by a Licensed Architect (construction drawings only), Licensed Land Surveyor, or Professional Engineer.

There are no V Zones in Henrico, so C2(c) is always "NA".

Items (a), (f), and (g) must always be completed.

Remember to check this box if attachments are included

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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: _____
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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.

C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
 Benchmark Utilized: _____ Vertical Datum: _____

Indicate elevation datum used for the elevations in items a) through h) below.
 NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No
 If Yes, describe the source of the conversion factor in the Section D Comments area.

		Check the measurement used:
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor (see Instructions):	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (see Instructions):	NA	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab):	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest Adjacent Grade (LAG) next to building: <input type="checkbox"/> Natural <input type="checkbox"/> Finished	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input type="checkbox"/> Finished	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state 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.

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

Check here if attachments and describe in the Comments area.

Certifier's Name: _____ License Number: _____
 Title: _____
 Company Name: _____
 Address: _____
 City: _____ State: _____ ZIP Code: _____
 Signature: _____ Date: _____
 Telephone: _____ Ext.: _____ Email: _____

Place Seal Here

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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):
 This comment section must include information about the mechanical equipment measured in C2(e) and a list of any attachments included with the Elevation Certificate. If datum conversions were used, include here or attach. Other information may be relevant or helpful in the comments, such as whether access inside of the structure was available or where the measurements were taken for C2(a) and C2(b).

1. "Construction Drawings" should be selected when completing an Elevation Certificate as part of a permit application for a new structure.

2. "Building Under Construction" should be selected when completing an Elevation Certificate for the lowest floor confirmation, which is required after the lowest floor of a new structure has been completed and before further construction has begun.

3. "Finished Construction" should be selected when completing an Elevation Certificate to submit for a final compliance check, prior to receiving a Certificate of Occupancy. For the purposes of an Elevation Certificate, "Finished Construction" is when all machinery and/or equipment have been installed and the grading around the building is completed.

Measurements should be taken in feet.

The Elevation Certificate must be signed and sealed to be accepted/ approved.



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City: _____ State: _____ ZIP Code: _____	Policy Number: _____
	Company NAIC Number: _____

**SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED)
FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)**

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the 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 1–2 of Instructions), the next higher floor (C.2.b in applicable Building Diagram) 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

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

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments:

Section E should not be used because all A Zones in Henrico County have model backed data for a BFE, and there are currently no AO Zones mapped. Section C should be used for all structures.

Section F is used to certify the information in Section E. This should only be completed if Section E is completed.



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IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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: _____
SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)	
<p>The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:</p>	
<p>G1. <input type="checkbox"/> 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)</p> <p>G2.a. <input type="checkbox"/> A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.</p> <p>G2.b. <input type="checkbox"/> A local official completed Section H for insurance purposes.</p> <p>G3. <input type="checkbox"/> In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.</p> <p>G4. <input type="checkbox"/> The following information (Items G5–G11) is provided for community floodplain management purposes.</p> <p>G5. Permit Number: _____ G6. Date Permit Issued: _____</p> <p>G7. Date Certificate of Compliance/Occupancy Issued: _____</p> <p>G8. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p> <p>G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet <input type="checkbox"/> meters Datum: _____</p> <p>G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet <input type="checkbox"/> meters Datum: _____</p> <p>G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet <input type="checkbox"/> meters Datum: _____</p> <p>G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet <input type="checkbox"/> meters Datum: _____</p> <p>G11. Variance issued? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach documentation and describe in the Comments area.</p> <p>The local official who provides information in Section G must sign here. <i>I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.</i></p> <p>Local Official's Name: _____ Title: _____</p> <p>NFIP Community Name: _____</p> <p>Telephone: _____ Ext.: _____ Email: _____</p> <p>Address: _____</p> <p>City: _____ State: <input type="checkbox"/> ZIP Code: _____</p> <p>Signature: _____ Date: _____</p> <p>Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>	

Section G must be completed by DPW staff and should be left blank.

At a minimum, DPW staff will complete G8 and G11 on all approved ECs.



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City: _____ State: _____ ZIP Code: _____	Policy Number: _____
	Company NAIC Number: _____

SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–9. Top of bottom floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is: _____ feet meters above the LAG

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: _____ feet meters above the LAG

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments:

Section H is for insurance purposes only and does not need to be completed for permit approval.

Section I should be completed to certify the information in Sections A, B, and H. This should only be completed if Section H is completed.



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IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS
 Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
City: _____ State: _____ ZIP Code: _____	
	Policy Number: _____
	Company NAIC Number: _____

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo Three

Photo Three Caption:

Photo Four

Photo Four Caption:

At least 2 photos are required, with dates . Front view and rear-view photos of the structure are required. However, it is highly recommended that photos of all sides of the structure be included.

Henrico County requires that flood openings be located on at least 2 different walls. If flood openings are not located on both the front and rear sides of the structure, additional photos must be provided so DPW can confirm this requirement has been met.

Photos should be taken in such a way that the entire structure can be seen from that view. For example, the front view of a home should show the entire front side of the home (ground to roof, side to side), not just the front door.

Photos are not required for ECs that are based on Construction Drawings. However, architectural drawings and construction plans must be submitted with the permit application.



ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS
 See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
City: _____ State: _____ ZIP Code: _____	Policy Number: _____
	Company NAIC Number: _____

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo One

Photo One Caption:

Photo Two

Photo Two Caption:

At least 2 photos are required, with dates . Front view and rear-view photos of the structure are required. However, it is highly recommended that photos of all sides of the structure be included.

Henrico County requires that flood openings be located on at least 2 different walls. If flood openings are not located on both the front and rear sides of the structure, additional photos must be provided so DPW can confirm this requirement has been met.

Photos should be taken in such a way that the entire structure can be seen from that view. For example, the front view of a home should show the entire front side of the home (ground to roof, side to side), not just the front door.

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