

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency

CRS COMMUNITY CERTIFICATIONS

OMB Control Number: 1660-0022
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Public reporting burden for this form is estimated to average 24 hours for annual recertification, 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 the form. This collection of information is required to obtain voluntary benefits. You are not required to respond to this collection of information unless it displays a valid OMB control number. 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, 500 C Street, S.W., Washington, D.C. 20472, Paperwork Reduction Project (1660-0022). NOTE: Do not send your completed form to this address.

Appendix E

This appendix contains forms for the community certifications that are part of the documentation needed to obtain credit for certain activities under the National Flood Insurance Program's Community Rating System (CRS). The certification forms are designed to be used in conjunction with the *CRS Coordinator's Manual*.

Two required certifications are not included here. The AW-501 (Repetitive Loss Update Certification) and the AW-501 Transmittal Sheet are generated separately by the Federal Emergency Management Agency (FEMA) and provided to the community when needed.

The certifications of compliance with environmental and historic preservation requirements can be found in Appendix F.

Contents

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- CC-230 Verification
- CC-RL The Repetitive Loss List
- CC-530 Retrofitted Buildings

The following community certifications are part of the documentation needed to obtain credit for certain activities under the National Flood Insurance Program's Community Rating System (CRS). These certifications are designed to be used in conjunction with the *CRS Coordinator's Manual*.

Sections in each certification correspond to the same numbered sections in the *Coordinator's Manual*. If a section appears to be missing, it is because that section does not call for the submission of a specific item.

It is recommended that these certifications be photocopied before they are used. They are also available in Microsoft Word® and as fillable pdf files at www.CRSresources.org/200.

The "CID" at the top of each page signifies the six digit National Flood Insurance Program (NFIP) community identification number, which can be found on the community's Flood Insurance Rate Map and other NFIP documents.

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

CC-213 Recertification

Date _____

Chief Executive Officer

CRS Coordinator

Name _____

Title _____

Address _____

Phone number _____

E-mail address _____

I hereby certify that _____ [community name] is implementing the following activities on the attached pages as credited under the Community Rating System and described in our original application to the CRS and subsequent modifications.

I hereby certify that, to the best of my knowledge and belief, we are in full compliance with the minimum requirements of the NFIP and we understand that we must remain in full compliance with the minimum requirements of the NFIP. We understand that at any time we are not to be in full compliance, we will retrograde to a CRS Class 10.

I hereby certify that we will continue to maintain FEMA Elevation Certificates on all new buildings and substantial improvements constructed in the Special Flood Hazard Area following the date at which we joined the CRS.

I hereby certify that if there are one or more repetitive loss properties in our community that we must take certain actions that include reviewing and updating the list of repetitive loss properties, mapping repetitive loss areas, describing the cause of the losses, and sending an outreach project to those areas each year, and if we have fifty (50) or more unmitigated repetitive loss properties we must earn credit under Activity 510 (Floodplain Management Planning) for either a repetitive loss area analysis (RLAA) or a floodplain management plan (FMP).

I hereby certify that, to the best of my knowledge and belief, we are maintaining in force all flood insurance policies that have been required of us as a condition of federal financial assistance for insurable buildings owned by us and located in the Special Flood Hazard Area (SFHA) shown on our Flood Insurance Rate Map. I further understand that disaster assistance for any community-owned building located in the SFHA is reduced by the amount of National Flood Insurance Program (NFIP) flood insurance coverage (structure and contents) that a community should be carrying on the building, regardless of whether the community is carrying a policy.

Signature _____ (Chief Executive Officer)

CC-213-1

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

CRS Program Data Table	A. In the SFHA	B. In a regulated floodplain outside the SFHA	C. In the rest of the community
1. Last report's number of buildings in the SFHA (bSF) (line 6, last report)			
2. Number of new buildings constructed since last report	+		
3. Number of buildings removed/demolished since last report	-		
4. Number of buildings affected by map revisions since last report (+ or -)			
5. Number of buildings affected by corporate limits changes (+ or -)			
6. Current total number of buildings in the SFHA (bSF) (total lines 1-5)			
7. Number of substantial improvement/damage projects since last report			
8. Number of repetitive loss properties mitigated since last report			
9. Number of LOMRs and map revisions (not LOMAs) since last report			
10. Acreage of the SFHA (aSFHA) as of the last report (line 13, last report)			
11. Acreage of area(s) affected by map revisions since last report (+ or -)			
12. Acreage of area(s) affected by corporate limits changes (+ or -)			
13. Current acreage of the SFHA (total lines 10-12)			
14. Primary source for building data:			
15. Primary source for area data:			
16. Period covered:	Current FIRM date		
<i>If available, the following data would be useful:</i>			
17. Number of new manufactured homes installed since last report			
18. Number of other new 1 -4 family buildings constructed since last report			
19. Number of all other buildings constructed/installed since last report			

Comments:

(Please note the number of the line to which the comment refers.)

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

Instructions

At the first verification visit after the 2013 *CRS Coordinator's Manual* takes effect, ONLY LINES 6 AND 13 NEED TO BE COMPLETED. These lines form the baseline data about the number of buildings and area of the SFHA for when the table is completed as part of the next annual recertification. The "period covered" entered in line 16 is the date that lines 6 and 13 are first completed.

At all subsequent annual recertifications and cycle verification visits, the entire table is completed. The information in lines 6 and 13 from the last report is transferred to lines 1 and 10 in the next report.

Instructions for the Columns

Column A numbers are for the SFHA (the A and V Zones shown on the Flood Insurance Rate Map) (FIRM)). Use the FIRM currently in effect, not a draft or pending revision.

Column B is completed only if the community receives CRS credit for regulating floodplain development outside the SFHA under Activity 410 (Floodplain Mapping) or Activity 430 (Higher Regulatory Standards).

Column C numbers help relate what happens in the floodplain to what is happening in the rest of the community.

Enter "0" if there are no numbers to report for this period. Do not leave a cell blank. Do not fill in the shaded boxes.

Instructions for the Lines

Lines 1-7 deal with buildings.

- o Section 301.a of the *CRS Coordinator's Manual* defines what constitutes a "building" and lists examples of structures that are not counted as "buildings" by the CRS.
- o Section 302.a of the *CRS Coordinator's Manual* describes how the CRS counts buildings. For example, accessory structures are not counted.
- o As noted in Section 302.a, to determine building counts, communities may use any method that yields reasonably good estimates of the number of buildings. Examples of acceptable methods are listed in Section 302.a. Precision is less important for large numbers. For example, the impact of the numbers will not change much if there are 10,000 buildings or 10,100 buildings.
- o If a building is out of the SFHA, but in a parcel that is partly in the SFHA, it is not counted in column A --In the SFHA.
- o In line 14, note how the building counts were obtained or estimated. Use the comments area, if needed.

Line 4 refers to map revisions. These include physical map revisions, Letters of Map Revision (LOMR), and Letters of Map Amendment (LOMA). If a building is removed from the SFHA by FEMA through a LOMA, but the community still administers its floodplain management regulations on the property, the building should not be included in the line 4 count in column A --In the SFHA. However, communities that still regulate areas removed by LOMAs can receive credit under Activities 410 or 430. If the community is receiving such credit, the building should be counted under column B --In a regulated floodplain outside the SFHA.

Line 7 is for the total number of buildings that were substantially improved plus the number of buildings that were substantially damaged during the period covered.

Lines 10 -13 deal with areas.

- o These areas are based on the areas shown on the community's FIRM including LOMRs or LOMAs. Section 403.b discusses those portions of the SFHA that are subtracted from the area of the SFHA to calculate the community's aSFHA used in credit calculations.
- o Section 403.e of the *CRS Coordinator's Manual* discusses calculating areas for CRS purposes.
- o Section 403.e notes that communities "should not spend an inordinate amount of time measuring areas." As with buildings, communities may use any method that yields reasonably good estimates. Examples of acceptable approaches are listed in Section 403.e.
- o Line 13 asks for the current acreage of the SFHA. The best source for this number is a GIS layer that shows the SFHA. If the community does not have GIS, the county, regional agency, or state NFIP mapping office may have SFHA layers and may be able to provide the data. If the community has a relatively recent FIRM, the study contractor or consulting engineer may have the data.
- o In line 15, note how the area calculations were obtained or estimated. Use the comments area, if needed.

Lines 17 -19 are voluntary, if the numbers are readily available.

- o Line 17 includes replacing an existing manufactured home with a new one. The newly placed manufactured home is counted as a new, post-FIRM, building.
- o The total of lines 17 -19 should equal the value entered in line 2.

CC-213-3

Community _____ State _____ CID _____
(6-digit NFIP Community Identification Number)

CC-230 Verification

Date of Visit		Initial FIRM Date	
Population		Current FIRM Date	
County		ISO/CRS Specialist	
<i>Coordinator's Manual Year</i>			
Chief Executive Officer		CRS Coordinator	
Name			
Title			
Address			
Phone number			
E-mail address			

I hereby certify that _____ [community name] is implementing the following activities [check the ones that apply]. We will continue to implement these activities and will advise FEMA if any of them are not being conducted in accordance with this certification. We will cooperate with the ISO/CRS Specialist's verification visit and will submit the documentation and annual recertification needed to validate our program.

- | | |
|---|---|
| <input type="checkbox"/> 310 (Elevation Certificates) | <input type="checkbox"/> 440 (Flood Data Maintenance) |
| <input type="checkbox"/> 320 (Map Information Service) | <input type="checkbox"/> 450 (Stormwater Management) |
| <input type="checkbox"/> 330 (Outreach Projects) | <input type="checkbox"/> (Repetitive Loss Requirements) |
| <input type="checkbox"/> 340 (Hazard Disclosure) | <input type="checkbox"/> 510 (Floodplain Management Planning) |
| <input type="checkbox"/> 350 (Flood Protection Information) | <input type="checkbox"/> 520 (Acquisition and Relocation) |
| <input type="checkbox"/> 360 (Flood Protection Assistance) | <input type="checkbox"/> 530 (Flood Protection) |
| <input type="checkbox"/> 370 (Flood Insurance Promotion) | <input type="checkbox"/> 540 (Drainage System Maintenance) |
| <input type="checkbox"/> 410 (Floodplain Mapping) | <input type="checkbox"/> 610 (Flood Warning and Response) |
| <input type="checkbox"/> 420 (Open Space Preservation) | <input type="checkbox"/> 620 (Levees) |
| <input type="checkbox"/> 430 (Higher Regulatory Standards) | <input type="checkbox"/> 630 (Dams) |

I hereby certify that, to the best of my knowledge and belief, we are in full compliance with the minimum requirements of the NFIP and we understand that we must remain in full compliance with the minimum requirements of the NFIP. We understand that at any time we are not to be in full compliance, we will retrograde to a CRS Class 10.

CC-230-1

Community _____ State _____ CID _____
(6-digit NFIP Community Identification Number)

I hereby certify that we will maintain FEMA Elevation Certificates on all new buildings and substantial improvements constructed in the Special Flood Hazard Area following the date at which we joined the CRS.

I hereby certify that if there are one or more repetitive loss properties in our community that we must take certain actions that include reviewing and updating the list of repetitive loss properties, mapping repetitive loss areas, describing the cause of the losses, and sending an outreach project to those areas each year, and if we have fifty (50) or more repetitive loss properties must also prepare a plan of how it will address its repetitive flood problem.

I hereby certify that, to the best of my knowledge and belief, we are maintaining in force all flood insurance policies that have been required of us as a condition of Federal financial assistance for insurable buildings owned by us and located in the Special Flood Hazard Area shown on our Flood Insurance Rate Map. I further understand that disaster assistance for any community-owned building located in the Special Flood Hazard Area is reduced by the amount of National Flood Insurance Program flood insurance coverage (structural and contents) that a community should be carrying on the building, regardless of whether the community is carrying a policy.

Signature _____ (Chief Executive Officer)

CC-230-2

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

CRS Program Data Table	A. In the SFHA	B. In a regulated floodplain outside the SFHA	C. In the rest of the community
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2. Number of new buildings constructed since last report	+		
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4. Number of buildings affected by map revisions since last report (+ or -)			
5. Number of buildings affected by corporate limits changes (+ or -)			
6. Current total number of buildings in the SFHA (bSF) (total lines 1 -5)			
7. Number of substantial improvement/damage projects since last report			
8. Number of repetitive loss properties mitigated since last report			
9. Number of LOMRs and map revisions (not LOMAs) since last report			
10. Acreage of the SFHA (aSFHA) as of the last report (line 13, last report)			
11. Acreage of area(s) affected by map revisions since last report (+ or -)			
12. Acreage of area(s) affected by corporate limits changes (+ or -)			
13. Current acreage of the SFHA (aSFHA) (total lines 10-12)			
14. Primary source for building data:			
15. Primary source for area data:			
16. Period covered:		Current FIRM date	
<i>If available, the following data would be useful:</i>			
17. Number of new manufactured homes installed since last report			
18. Number of other new 1 -4 family buildings constructed since last report			
19. Number of all other buildings constructed/installed since last report			

Comments:

(Please note the number of the line to which the comment refers.)

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

Instructions

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Column B is completed only if the community receives CRS credit for regulating floodplain development outside the SFHA under Activity 410 (Floodplain Mapping) or Activity 430 (Higher Regulatory Standards).

Column C numbers help relate what happens in the floodplain to what is happening in the rest of the community.

Enter "0" if there are no numbers to report for this period. Do not leave a cell blank. Do not fill in the shaded boxes.

Instructions for the Lines

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- o If a building is out of the SFHA, but in a parcel that is partly in the SFHA, it is not counted in column A --In the SFHA.
- o In line 14, note how the building counts were obtained or estimated. Use the comments area, if needed.

Line 4 refers to map revisions. These include physical map revisions, Letters of Map Revision (LOMR), and Letters of Map Amendment (LOMA). If a building is removed from the SFHA by FEMA through a LOMA, but the community still administers its floodplain management regulations on the property, the building should not be included in the line 4 count in column A --In the SFHA. However, communities that still regulate areas removed by LOMAs can receive credit under Activities 410 or 430. If the community is receiving such credit, the building should be counted under column B --In a regulated floodplain outside the SFHA.

Line 7 is for the total number of buildings that were substantially improved plus the number of buildings that were substantially damaged during the period covered.

Lines 10 -13 deal with areas.

- o These areas are based on the areas shown on the community's FIRM including LOMRs or LOMAs. Section 403.b discusses those portions of the SFHA that are subtracted from the area of the SFHA to calculate the community's aSFHA used in credit calculations.
- o Section 403.e of the *CRS Coordinator's Manual* discusses calculating areas for CRS purposes.
- o Section 403.e notes that communities "should not spend an inordinate amount of time measuring areas." As with buildings, communities may use any method that yields reasonably good estimates. Examples of acceptable approaches are listed in Section 403.e.
- o Line 13 asks for the current acreage of the SFHA. The best source for this number is a GIS layer that shows the SFHA. If the community does not have GIS, the county, regional agency, or state NFIP mapping office may have SFHA layers and may be able to provide the data. If the community has a relatively recent FIRM, the study contractor or consulting engineer may have the data.
- o In line 15, note how the area calculations were obtained or estimated. Use the comments area, if needed.

Lines 17 -19 are voluntary, if the numbers are readily available.

- o Line 17 includes replacing an existing manufactured home with a new one. The newly placed manufactured home is counted as a new, post-FIRM, building.
- o The total of lines 17 -19 should equal the value entered in line 2.

CC-230-4

Community _____ State _____ CID _____
 (6-digit NFIP Community Identification Number)

CC-RL The Repetitive Loss List

(See Section 501 in the *CRS Coordinator's Manual*).

- We have reviewed the repetitive loss list dated: _____, 20 _____, and [check one]
 - Attached are updated Repetitive Loss Update Certifications, AW-501; or
 - There are no changes to FEMA's repetitive loss list.

As the current CRS Coordinator for _____ [community name], I have examined the repetitive loss data provided for each of our _____ [number] assigned repetitive loss properties. For each property in need of update, I have attached an AW-501 that reflects the current and accurate address, the correct National Flood Insurance Program (NFIP) community identification number, and all known mitigation actions with the primary source of funding noted. To the best of my knowledge and belief, any AW-501 not updated and submitted as part of this application has been checked and is not in need of update at this time.

Signature _____ (Community CRS Coordinator)

To facilitate verification, please provide the names of the CRS Coordinator and local repetitive loss contact person, if other than the CRS Coordinator

CRS Coordinator	Repetitive Loss Contact
Name	
Title	
Phone number	
Fax number	
Address	
E-mail address	

Comments:

Federal Emergency Management Agency

National Flood Insurance Program

NFIP REPETITIVE LOSS UPDATE WORKSHEET (AW-501)

THE INFORMATION ON THIS FORM IS BASED ON CLAIMS ON OR BEFORE:

REPETITIVE LOSS NUMBER:

Internal use only A N/A FRR

NFIP Community Name:

CID#:

Local Property Identifier:

Current Property Address

Previous Property Address/Community ID#

Last Claimant:

Last Claimant:

Insured:

Name Insured:

Date of Losses:

Total Number of Losses for Property:

REQUESTED UPDATES

MARK ALL UPDATES BELOW THAT APPLY (IMPORTANT - SEE INSTRUCTIONS)

1. **INFORMATION PROVIDED NOT SUFFICIENT TO IDENTIFY PROPERTY.**

Choose this update if all attempts to locate the property fail. Please describe the steps you took to locate the property in the comments section below.

2. **COSMETIC CHANGES REQUIRED TO THE ADDRESS:**

Update the address shown above and/or add our local alternative property identifier such as a Tax Assessor #.

3. **PROPERTY NOT IN OUR COMMUNITY OR JURISDICTION:**

Choose this update if you have positively determined that the property shown is not located in your community. Please provide the correct NFIP community name and if known the NFIP community ID Number. If available, please attach a map showing the property location.

ASSIGN TO NFIP COMMUNITY NAME: _____ NFIP COMMUNITY ID#: _____

4. **FLOOD PROTECTION PROVIDED.**

Choose this update only if some type of structural intervention has occurred to the building, prop-erty or the source of flooding that protects the building from future events similar to those that occurred in the past. The update must be supported by documentation such as an Elevation Certifi-cate and the Mitigation action and funding below must be provided.

(Mitigation Action 1.)

(Source of Primary Mitigation Funding 3.)

(Secondary Source of Funding 3.)

5. **NO BUILDING ON PROPERTY.**

Choose this update only if the property in question can be positively identified as the site of the previously flooded building and documentation is available to support that an insurable building no longer exists at this site. The update must be supported by documentation such as a Demolition or Relocation Permit and the Mitigation action and funding information below must be provided.

(Mitigation Action 2.)

(Source of Primary Mitigation Funding 3.)

(Secondary Source of Funding 3.)

6. **DUPLICATE LISTING WITH RL NUMBER:** _____ **COMBINE AS ONE LISTING.**

Choose this update to identify two or more separate listings that are for the same building. List all other RL numbers that are duplicates to this property. Please indicate which address shown is the correct address to use.

7. **HISTORIC BUILDING:**

Choose this update if you know the building is or would be eligible to be listed on a State or National Historic Registry.

COMMENTS SECTION:

A signed RL transmittal sheet must accompany this form for approval of the update!

Community _____ State _____ CID _____
(6-digit NFIP Community Identification Number)

CC-530 Retrofitted Buildings

This certification is used for retrofitting projects that are not in a high-hazard area and that do not need to be designed or approved by a registered design professional. Completed FEMA Elevation Certificates are used for buildings retrofitted by elevation (TUE).

Part 1. For Credit Calculations Option 1 and Option 2

Part 1 is used for all submissions for credit under TUD, TUW, TUS, and TUB.

I certify that, for the buildings on the attached list,

___ All retrofitting projects were completed after the effective date of our initial FIRM:

_____ [Date];

___ All retrofitting projects provide protection to at least the 25-year flood level;

___ All required permits were issued for each project, or the project complies with all federal, state, and local codes and regulations;
None of the retrofitting projects was mandated by the substantial improvement or substantial damage requirements of our
___ floodplain management regulations; and

___ All retrofitting projects are currently in good condition.

Part 2. For Credit Calculation Option 2

Part 2 is needed only if the community is requesting credit under Section 533.b. Option 2 for buildings submitted for credit under TUD, TUW, and TUS.

One copy of this certification can be used for multiple properties that have the same score.

Dry floodproofed buildings (TUD)

The buildings listed as property numbers _____
have been dry floodproofed and [check one]

___ The project was designed by a registered design professional and the design accounts for openings, internal drainage, seepage, and underdrainage. (TU = 0.6)

___ The project does not depend on human intervention to close openings; the project protects to a level less than 3 feet over the first floor; the design accounts for internal drainage, seepage, and underdrainage; and the building does not have a basement (i.e., any floor below grade on all sides). (TU = 0.4)

___ There is no documentation of how openings, interior drainage, seepage, or underdrainage are handled. (TU = 0.2)

Community _____ State _____ CID _____
(6-digit NFIP Community Identification Number)

Wet floodproofed buildings (TUW)

The buildings listed as property numbers _____
have been wet floodproofed and [check one]

- The project was designed by a registered design professional. (TU = 0.5)
- The project was not designed by a registered design professional. (TU = 0.3)
- The furnace, water heater, electrical breaker box, and other utilities are relocated above flood level. (TU = 0.2)

Buildings protected from sewer or sump backup (TUS)

The buildings listed as property numbers _____, which
have been protected from sewer or sump backup and [check one]

- The building is located in the SFHA. (TU = 0.2)
- The building is located outside of the SFHA and the community has a building code or other regulations that require positive drain sewers or other measures that prevent sewer backup into new buildings. (TU = 0.1)

Name (printed) _____ Title _____

Signature _____ Date _____