

## 210 CRS APPLICATION COVER PAGE

1. Community Name: \_\_\_\_\_ State: \_\_\_\_ BCEGS: \_\_\_\_/\_\_\_\_  
NFIP Number: \_\_\_\_\_ FIRM Effective Date: \_\_\_\_\_, \_\_\_\_\_  
Population: \_\_\_\_\_ Current FIRM Date: \_\_\_\_\_, \_\_\_\_\_  
Application Date: \_\_\_\_\_, 200\_\_\_\_ County: \_\_\_\_\_

2. Chief Executive Officer CRS Coordinator  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Coordinator's telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Coordinator's email: \_\_\_\_\_

3. Attached is our letter from FEMA stating that we are in full compliance with the minimum requirements of the National Flood Insurance Program.

4. 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 verification visit and will submit the documentation and annual recertification needed to validate our program.

<input checked="" 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 checked="" 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"/> 410 Additional Flood Data	<input type="checkbox"/> 540 Drainage System Maintenance
<input type="checkbox"/> 420 Open Space Preservation	<input type="checkbox"/> 610 Flood Warning Program
<input type="checkbox"/> 430 Higher Regulatory Standards	<input type="checkbox"/> 620 Levee Safety
<input type="checkbox"/> 430LD Land Development Criteria	<input type="checkbox"/> 630 Dam Safety

5. Attached are the worksheet pages and the documentation for the checked activities as well as the page for Section 720, showing that we have at least 500 points for CRS credit.

6. 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 flooded public buildings in the Special Flood Hazard Area will be reduced by the amount of flood insurance available from the National Flood Insurance Program for the buildings, even if we do not have a policy.

7. Signed: \_\_\_\_\_ (Chief Executive Officer)