



Certificate of Compliance of Submitted Data for FEMA-funded Flood Risk Projects

Project Name	Region V: Waushara County, Wisconsin – Elevation Data Acquisition
Statement of Work No.:	FEMA TASK ORDER NUMBER: HSFE05-17-J-0005 CDI WORK ORDER NUMBER: CDI 5319
Interagency Agreement No.:	STARR II PROJECT NUMBER: 400000370 STARR II PARTNER TRACKING NUMBER: CD S2 R05 17 T05 STARR II Task Code: R0502.20.D1
Cooperating Technical Partners (CTP) Agreement No.:	N/A
Mapping Activity Statement (MAS) No.:	
Statement/Agreement Date:	10/06/2017
Certification Date:	05/14/2018

Tasks/Activities Covered by This Certification
(Put an "X" in the box to the left of each item that applies. Add items as needed.)

<input type="checkbox"/>	Base Map	<input type="checkbox"/>	Alluvial Fan Analysis
<input checked="" type="checkbox"/>	Survey	<input type="checkbox"/>	Coastal Analysis
<input type="checkbox"/>	Hydrologic Analysis	<input type="checkbox"/>	Floodplain Mapping
<input type="checkbox"/>	Hydraulic Analysis	<input type="checkbox"/>	Produce Preliminary Maps
<input type="checkbox"/>	Levee Analysis	<input type="checkbox"/>	Develop Flood Insurance Rate Map (FIRM) Database
<input type="checkbox"/>		<input type="checkbox"/>	Flood Risk Assessment
<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	

Exceptions Approved on this Project


Standard ID	Date Approved	Approver	Reason

FEMA Standards for Flood Risk Analysis and Mapping

Certification

I certify that the work summarized above was completed in accordance with the statement/agreement cited above and all amendments thereto. The work complies with direction received from the Regional Project Officer and/or Assistance Officer or their representative and the applicable Standards for Flood Risk Analysis and Mapping except for the standards exceptions documented above. All the exceptions were approved by the appropriate program official, logged in the exception tracker, and documented fully in the project documentation.

I also certify that the work summarized above was completed in accordance with sound and accepted engineering practices within the contract provisions for respective phases of the work, and that data files submitted for the work summarized above are complete and final. Any revisions made to the already submitted data have been submitted in accordance with the Data Capture Technical Reference and associated guidance. The content of the files submitted is sufficient for subsequent users with appropriate professional expertise to be able to understand the scientific and technical basis of the analysis and reproduce the findings.

Name:	Philipp H. Hummel, PLS
Title:	Technical Director
Firm/Agency Represented:	CompassData
Registration No.:	PLS-ID 15114
Signature:	 <p>For and on behalf of CompassData, Inc. Job. No.: 5319</p>

This form must be signed by a representative of the firm or agency contracted to perform the work, who must be a registered or certified professional in the area of work performed, in compliance with Federal and State regulations.