
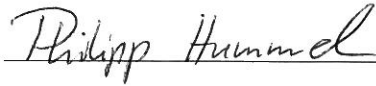


Project Name:	Region 1: Blackstone, Massachusetts – Elevation Data Acquisition	
Statement of Work No.:	FEMA TASK ORDER NUMBER: HSFEHQ-10-J-0005 WORK ORDER NUMBER: CP HQ 10 001	
Interagency Agreement No.:	STARR PROJECT NUMBER: 400000058 STARR PARTNER TRACKING NUMBER: CP HQ 10 001	
CTP Agreement No.:	N/A	
Statement/Agreement Date:	10/ 10/10	
Certification Date:	5/16/11	
Tasks/Activities Covered by This Certification (Check All That Apply)		
<input type="checkbox"/>	Base Map	
<input type="checkbox"/>	Topographic Data Development	
<input checked="" type="checkbox"/>	Survey: Including Ground Control Points (GCPs), Fundamental Vertical Accuracy Testing (FVA), and Consolidated Vertical Accuracy Testing (CVA).	
<input type="checkbox"/>	Hydrologic Analysis	
<input type="checkbox"/>	Hydraulic Analysis	
<input type="checkbox"/>	Alluvial Fan Analysis	
<input type="checkbox"/>	Coastal Analysis	
<input type="checkbox"/>	Floodplain Mapping	
<p>This is to certify that the work summarized above was completed in accordance with the statement/agreement cited above and all amendments thereto, together with all such modifications, either written or oral, as the Regional Project Officer and/or Assistance Officer or their representative have directed, as such modifications affect the statement/agreement, and that all such work has been accomplished in accordance with the provisions contained in <i>Guidelines and Specifications for Flood Hazard Mapping Partners</i> cited in the contract document, and in accordance with sound and accepted engineering practices within the contract provisions for respective phases of the work. This is also to certify that data files submitted for the work summarized above are complete and final. Any revisions made to the already submitted data are included in the final submittal.</p>		
Name:	Philipp H. Hummel, PLS	 <p>For and on behalf of Compass Data, Inc. Job. No.: 1508</p>
Title:	Professional Land Surveyor, Geodesist	
Firm Represented:	Compass Data, Inc.	
Registration No.:	38155	
Signature:		
<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.</p>		