

Application for Certification

Direct Applications and Correspondence to: The Certification Committee Chair's receipt of the Application and National Flood Determination Association Application Fee initiates the certification process. Cheryl Small, Certification Chair 11902 Burnet Road Completed Audit Report and Data Extract are required to complete Austin, TX 78758 the certification process. INFORMATION ON APPLICANT: Company Name: Address: Type of Entity: State of registration: City: State: Zip Code: Contact Person/Title: Telephone: Fax: E-mail: Web Address: INFORMATION ON CPA EVALUATOR: Company Name: Address: Davila Buschhorn & Associates 7207 McNeil Dr. Zip Code: City: State: E~mail: Austin TX 78729 Lane@dbtxcpa.com CPA Evaluator's Name: Telephone: Fax: A. Lane Buschhorn 512-258-6637 512-258-7699 COMPANY STATEMENT OF GOOD FAITH: In consideration of the acceptance of our application for certification and the certification of our company, the applicant ("Applicant") 1) agrees to be bound by the terms and conditions as established by the Code of Ethics of the NFDA and the 2013 Framework for Flood Zone Determination Certification and Administration guidebook, 2) certifies by execution of this application that the Applicant has read and understands that the decision of the Certification Committee is final and binding on the Applicant unless Applicant establishes with clear and convincing evidence that the decision of the Certification Committee was arbitrary and capricious, and any and all controversies, disputes, or claims arising out of or related to this application or the decision on the application shall be settled by binding arbitration by the American Arbitration Association in accordance with the Commercial Dispute Resolution Procedures as currently supplemented by the Certification Arbitration Program, September, 2005 (All such current supplements are available for review upon request or are available on the NFDA website, www.nfdaflood.com, 3) represents and warrants that all of the information provided to the NFDA in conjunction with this application is complete, true and correct, 4) shall hold the NFDA harmless and defend them against any claim against them because of our acts or failure to act, or for any other reason which is founded upon or arising out of our certification from the NFDA, 5) agrees to pay any costs and expenses in connection with the defense thereof and will indemnify or pay any judgment rendered against the NFDA arising out of such actions, and 6) certifies that the person executing this application for certification is duly authorized and has the requisite power and authority to bind the Applicant, and 7) recognizes that the NFDA will not act upon any application which is incomplete, will consider only the documents submitted in support of the application and the failure to timely submit such information may result in the denial of such application. Name & Title of Authorized Company Official: Date: Signature: PAYMENT OF FEES The application fee for certification is non-refundable and fully earned upon submission. Make checks payable to the National Flood Determination Association (NFDA) and enclose in the pre-addressed envelope. No application will be considered complete until all fees are paid. Check the appropriate fee and enclose payment of same

Non-Member (\$4000)

NFDA Member (\$2000)