



Top of Foundation Certificate

This Certificate is to be completed and returned with the Spot Survey.

This Certificate relates to Lot _____ of _____

Subdivision, also known as (street address) _____.

I, _____, Owner or principal of the firm listed below hereby certify that the foundation on the lot listed above is not below or does not exceed six (6) inches above the minimum foundation elevation shown on the approved drainage plan for this subdivision and the foundation setback zoning requirements are met. **A stop work order will be issued if a Top of Foundation Certificate is not received prior to framing.**

Approved Foundation Elevation: _____

As-Built Foundation Elevation: _____

Approved Setback Requirement:

Front: _____
Side: _____
Side: _____
Rear: _____

Colored Seal:

As-Built Setbacks:

Front: _____
Side: _____
Side: _____
Rear: _____

Firm Name: _____

Address: _____

Signature: _____

Date: _____

Accepted: _____

Director of Public Works

Date

Building Inspector

Date
