



FEMA



Pre-QR3 Submission Questionnaire and Self-Certification Form

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Study Name	
MIP Case Number	
Mapping Partner	
Sub-consultant(s)	
Project Manager (Name, email, phone)	
Project Type (PMR, CW, Revised-Prelim, Watershed PMR)	
FIS Volumes/Printed Panels/# of Communities/Miles of detailed study	
Was Datum conversion performed?	
Were LOMRs outside of the PMR footprint included in the FIS?	
Please provide the FBS passing date and the location of the report on the MIP if available at this time (required by 30 days post-Preliminary)	
QR2 Passing Date	
Planned QR3 Submittal Date	
What is the Project's present SPI? If out of FEMA tolerance, please describe any quality factors you feel contribute to the variance.	
What is the Project's present CPI? If out of FEMA tolerance, please describe any quality factors you feel contribute to the variance.	



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Please list the flooding source(s) that are newly studied or restudied with this map action.

Please also indicate those flooding sources where redelineation was performed (using updated terrain data) without new engineering analysis.

Please indicate the results of your assessment of potential mismatches between adjacent counties. Provide details for identified mismatches. If there are no mismatches, please indicate how this was determined.

Please describe your pre-QR3 internal validation (inspection) activities. You may use the Comments section as needed. Also attach your quality records lists, call sheets, etc. that demonstrate internal reviews were conducted.

Please provide any FEMA-approved project-related decisions that directly affect the results shown on the study being submitted for independent review, including SID exceptions. Please upload materials to the Correspondence folder.



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Please itemize issues or concerns you wish to be known before the QR3 review begins.

If your comments are extensive, please use the "Comments" section below or create a separate document to attach to this form.

To the best of your knowledge, does this study comply with all FEMA standards identified in the project Mapping Activity Statement and/or Scope of Work and has passed the QR2 review stage?

☐ Yes

☐ No

If you selected "No", please provide an explanation in the "Comments" section below.

Comments:

Self-Certification

I certify that the information provided on this form is complete and correct and the study being submitted for QR3 is ready for independent review.

Mapping Partner Signature

Date

Printed Name