

**CERTIFICATE OF SEISMIC COMPLIANCE
BENCHMARK BUILDING**

Date: _____

This affirms that _____ served as engineer in charge of the seismic evaluation of the building located at _____.

The building has the following characteristics:

ASCE Building Type:	No. of Stories:	Approx. Area:
Building Design Code:	Year of Design Code:	Year of Construction:

On the basis of the building characteristics and to the extent permitted by this level of evaluation, it is my opinion that the subject Building qualifies as a Benchmark Building as indicated in ASCE/SEI 31, Table 1-1.

Affix Stamp and Sign Here

Engineer's Name:

Firm:

Address:

Telephone:

License No.:

License State:

Expiration Date:

