## U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

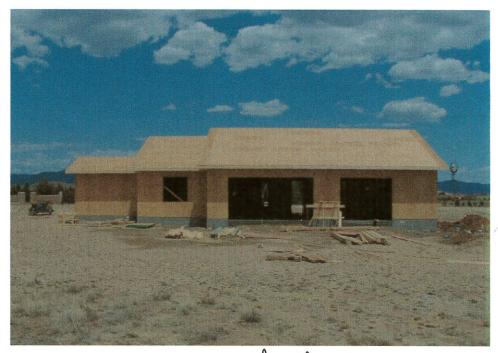
Important: Read the instructions on pages 1-8.

| SECTION A - PROPERTY INFORMATION   | For Insurance Company Use:   |  |  |
|--|--|--|--|
| A1. Building Owner's Name<br>I Scott and Tami Lee De Arman   | Policy Number  |  |  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  | Company NAIC Number  |  |  |
| Prescott Valley State AZ   | IP Code 863/4  |  |  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  Tax Parcel # 103-01-087E - Application No. A12006000124  |  |  |  |
| enclosure(s) walls within 1.0 foot above adjacent grade  c) Total net area of flood openings in A8.b  walls within 1.0 foot abo  sq in  Total net area of flood openings in A8.b   | ned garage, provide: hed garage sq ft openings in the attached garage we adjacent grade penings in A9.b sq in                                  |  |  |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  |  |  |  |
| B1. NFIP Community Name & Community Number B2. County Name B2. | 33. State<br>Ari Zona  |  |  |
| B4. Map/Panel Number         B5. Suffix         B6. FIRM Index         B7. FIRM Panel         B8. Flood           Date         Effective/Revised Date         Zone(s)           04025 (1750)         F         6-6-01         6-6-01         MX  | B9. Base Flood Elevation(s) (Zone AO, use base flood depth)  |  |  |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.  | 10/9./   |  |  |
| FIS Profile FIRM Community Determined Other (Describe)   |  |  |  |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe)  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  CBRS OPA   |  |  |  |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE   | ED)  |  |  |
| *A new Elevation Certificate will be required when construction of the building is complete.  C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH below according to the building diagram specified in Item A7.  Benchmark Utilized PO & FRM 00 2 Vertical Datum  Conversion/Comments G1 at a gathered: 4897.24 Reference flee: 4897.24 R | Py MAD 1983 7.22  ent used. ers (Puerto Rico only) |  |  |
| e) Lowest elevation of machinery or equipment servicing the building feet meters (Puerto Rico only) (Describe type of equipment in Comments)   |  |  |  |
| f) Lowest adjacent (finished) grade (LAG) 4877 .53 x feet meter  | ers (Puerto Rico only)<br>ers (Puerto Rico only)   |  |  |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION   |  |  |  |
| This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.  |  |  |  |
| Check here if comments are provided on back of form.  Tho mas A. Linzzo  Gertifier's Name Lond Surveyor RST Land Surveying Inc.  Title 3720N Robert Rd Ste. 2 Company Name Inc.  City 5-29-07  Signature Date Telephone  See reverse side for continuation   | Replaces all previous editions   |  |  |

| <u> </u>   |  |   |  |
|--|--|---|--|
| IMPORTANT: In these spaces, of   |  |   | For Insurance Company Use:   |
| 8215 E Marrow 1  | Unit, Suite, and/or Bldg. No.) or P.O. I   | Route and Box No.   | Policy Number  |
| City State ZIP Code<br>Prescott Valley AZ  | 86314  |   | Company NAIC Number  |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)   |  |   |  |
| Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.   |  |   |  |
| Comments #AG = High  | nest Grade on Lo   | Ywhich 40   | from Struzture   |
| Lucatron   |  |   |  |
| +1-1.  | 1.   |   |  |
| Signature / Os/  | 5  | Date 6-22-0   | Check here if attachments  |
| SECTION E - BUILDING ELEV  | VATION INFORMATION (SURVEY   | 0   | AO AND ZONE A (WITHOUT BFE)  |
| For Zones AO and A (without BFE), co and C. For Items E1-E4, use natural get.  E1. Provide elevation information for grade (HAG) and the lowest adja a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including clevation C2.b in the diagrams)  E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth ordinance?  Yes No | omplete Items E1-E5. If the Certificate is grade, if available. Check the measurer the following and check the appropriate acent grade (LAG).  basement, crawl space, or enclosure) is basement, crawl space, or enclosure) is been anneal flood openings provided in Stoff the building is feet meters d/or equipment servicing the building is number is available, is the top of the bomaton of the bomaton of the complete section of the property of the complete section of the comp | s intended to support a LOMA or LOment used. In Puerto Rico only, entered boxes to show whether the elevation is feet meters feet meters above or below above or below feet meters above or below feet meters atom floor elevated in accordance with eartify this information in Section G. | MR-F request, complete Sections A, B, r meters.  In is above or below the highest adjacent above or below the HAG.  Is above or below the LAG.  Is of Instructions), the next higher floor with the HAG.  Is above or below the HAG.  Is above or below the HAG. |
| Property Owner's or Owner's Authorize  Scott DeArman *  Address  | Representative's Name TAMI-LEE DEATH   | ναλ<br>City _ Sta   | te ZIP Code  |
|  | d. trescott Velley   | AZ.   | 86314  |
| Signature Durant +   | lami- fee Sellina  | Date 7-14-07 928  | ephone<br>710-1068 on 710-1065   |
|  |  |   | ☐ Check here if attachments  |
|  |  | INFORMATION (OPTIONAL)  |  |
| and G of this Elevation Certificate. Comp<br>G1. The information in Section C w<br>is authorized by law to certify e<br>G2. A community official completed   | plete the applicable item(s) and sign be   | ow. Check the measurement used in<br>thas been signed and sealed by a lic<br>ce and date of the elevation data in t<br>e A (without a FEMA-issued or comm   | ensed surveyor, engineer, or architect who he Comments area below.)  |
| G4. Permit Number  | G5. Date Permit Issued   | G6. Date Certificate Of 0   | Compliance/Occupancy Issued  |
| G7. This permit has been issued for: G8. Elevation of as-built lowest floor (incl G9. BFE or (in Zone AO) depth of floodin   | uding basement) of the building:   | antial Improvement  |  |
| Local Official's Name  |  | Title   | 9  |
| Community Name   |  | Telephone   |  |
| Signature  |  | Date  |  |
| Comments   |  |   |  |
|  |  |   |  |
|  |  |   | ☐ Check here if attachments  |



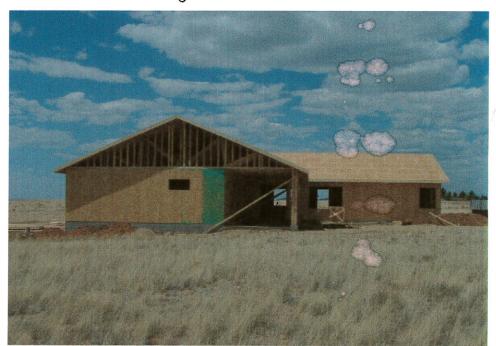
Left Side View



Right Side View



Front View



Rear View