EDERAL EMERGENCY MANAGEMENT AGE ATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATEImportant: Read the instructions on pages 1 - 7.

CECTION A PROPERTY OWNER INCOMME		
BUILDING OWNER'S NAME	ION	For Insurance Company Use: Policy Number
Cory Burk		T Officy Huttiber
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX I	NO.	Company NAIC Number
CITY	STATE	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, APN 103-01-202-4	Legal Descriptior	n, etc.)
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc.	. Use Comments	area if necessary.)
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: _ GPS (Type):		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME		B3. STATE
yanapai County 040093 yanapai	•	AZ
		B9. BASE FLOOD ELEVATION(S)
B4 MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL EFFECTIVE/REVISED DATE 04025C1750 F 6-6-01 6-6-01	ZONES	101.38
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.		
_ FIS Profile _ FIRM Community Determined _ Other (Describe):		
B11. Indicate the elevation datum used for the BFE in B9: \(\lambda \) NGVD 1929 NAVD 1988 Other (Describe):		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [Yes X No Designation Date:		
SECTION C - BUILDING ELEVATION INFORMATION	SURVEY REQU	IRED)
C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction		
*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see		
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)		
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, A	R/A, AR/AE, AR/	A1-A30, AR/AH, AR/AO
Complete Items C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion		
calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.		
Datum Conversion/Comments		
Elevation reference mark used Does the elevation reference	0.7005	ear on the FIRM? <u> K</u> Yes No
a) Top of bottom floor (including basement or enclosure)		
□b) Top of next higher floor ft. ☐c) Bottom of lowest horizontal structural member (V zones only) /0.Z58 ft.	(m) 9 0	EO LAND S
	Embossed (W)	LE CONFIGATE NO 2
e) Lowest elevation of machinery and/or equipment	and Em (m)	G MICHAEL WIG
servicing the building (Describe in a Comments area.)————————————————————————————————————	m ber (m)	HAYWOOD 9 E
g) Highest adjacent (finished) grade (EAG)		A N Tombolis
h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	Sie	A MARTINE
i) Total area of all permanent openings (flood vents) in C3.h sq. in. (sq.	cm) 💆 📗	200 Miles
SECTION D - SURVEYOR, ENGINEER, OR ARCHITEC	T CERTIFICATION	ON
This certification is to be signed and sealed by a land surveyor, engineer, or archit	The Party of the P	4
information. I certify that the information in Sections A, B, and C on this certificate		
available. I understand that any false statement may be punishable by fine or impri	50 AES	
	NUMBER	2.L.S. 13941
TITLE COMPANY NAME	, 1	10
ADDRESS CITY	NOOCI AS STATE	SOCI INC.
1 115 E GOODWIN DESCOT	314	ZIP CODE
SIGNATURE - OIL DATE	TELEP	PHONE
Mull 11.16.04	,	928 778-5101
FEMA Form 81-31, January 2003 SEE REVERSE SIDE FOR CONTINUATION	REPLAC	CES ALL PREVIOUS EDITIONS

