## FF ERAL EMERGENCY MANAGEMENT AGENCY IONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

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

BUILDING OWNER'S NAME	N A - PROPERTY OWNER INFO	RMATION	For Inc.	
ACAM	TEMOLE IV	111	Policy Num	ice Company Use iber
BUILDING STREET ADDRESS (Including Apt., Unit, Suite 9645 N. ANTONOE WEADS	e, and/or Bldg. No.) OR P.O. ROUTE AND	BOX NO.		IAIC Number
		STATE		ZIP CODE
PROPERTY DESCRIPTION (Lot as	nd Block Numbers, Tax Parcel Nui 03-01-242 A	mber, Legal Descrip	tion, etc.)	
BUILDING USE (e.g., Residential, I	Non-residential Addition Agence	ry, etc. Use Comme	nts area if nece	ssan/\
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL DATUM:			
(## - ##' - ##.##" or ##.####*°)	NAD 1927    NAD 1983	SOURCE:    (	ad Man I I Oth	0.5:
SECTION B - I	LOOD INSURANCE RATE MAP	(FIRM) INFORMAT	ION	el
Va us Od: COMMUNITY NUMBI	R B2. COUNTY N		B3. ST	ATE
7 010	// 10	IAPA1	00.01	AZ
1	M INDEX B7. FIRM PANEL ATE EFFECTIVE/REVISED	B8. FLOOD	B9. BASE FLO	DOD ELEVATION(
04025C1750 F 6-6	1			
310. Indicate the source of the Base Flood Eleva	ation (BFE) data or base flood dep	oth entered in R9	18.00	CHOSVITED
310. Indicate the source of the Base Flood Eleva   FIS Profile   FIRM   Community	nity Determined   X   Other (D	escribe): Factor	d Cross-Sect	ions by D. All
112. Is the building located in a Coastal Barrier s	in B9:    NGVD 1929    NAVI	0 1988 \ Other (E	Describe): 1560	imed Floration
312. Is the building located in a Coastal Barrier Folgonation Date:	resources System (CBRS) area or	Otherwise Protecte	ed Area (OPA)?	_  Yes  \ No
SECTION C. PI	II DING ELEVATION DE			4
Building elevations are based on: [_ Constru*     *A new Elevation Certificate will be required v	iction Drawings*   Building Unde	er Construction* IX	(UIRED)	munti-
4. Bullding Diagram Number 1 (Colort the 1	" " " " " " " " " " " " " " " " " " "	complete.	i misned Const	ruction
22. Building Diagram Number (Select the bupages 6 and 7. If no diagram accurately repress. 3. Elevations – Zones A1-A30, AF, AH, A (with the second content of the second	most similar to the besents the building, provide a sket	uilding for which this	certificate is being	ng completed - se
Complete Items C3 asi below according to the	BFE), VE, V1-V30, V (with BFE), A	R, AR/A, AR/AE. AF	R/A1-A30 AR/A	H ARIAO
uid udulli used for the REE in Soction D	o o o o o o o o o o o o o o o o o o	oz. State the datum	Used If the dat	um is different for
Calculation. Ose the space provided or the Cor	nments area of Section D or Section	BFE. Show field mo	easurements an	d datum convers
Elevation reference mark used	rersion/Comments		to document the	e datum conversio
a) Top of bottom floor (including basement	Does the elevation refe	rence mark used ap	pear on the FIR	M?  _  Yes  _
b) Top of next higher floor	or enclosure)00 . 3	<u>6</u> ft.(m)	A SU	N. S.
c) Bottom of lowest horizontal structural member	(V zones only)	_ ft.(m)	1000	200
De) Lowest elevation of marking	8 <i>O</i> 0	5 ft.(m) 8 ℃	19 STITLE	WE TE
	uipment iments area.)—————.	4/	DANIEL DANIEL	20 S 12
- ') - o west adjacent ninishen arada (LAC)	78 0	e ft.(m)	DANIEL ROST	
g) Highest adjacent (finished) grade (HAG) h) No. of permanent openings (flood vents) within		2 ft.(m) William Signature	1 18	10/00
i) Total area of all permanent openings (flood ve	1 ft. above adjacent grade	sol	The same of	Till and the second
		License Number, III.		102 / Col
SECTION D - SUR	VEYOR, ENGINEER, OR ARCHI		ION	7 101
				v elevation
ormation. I certify that the information in Sec ailable. I understand that any false statement	tions A, B, and C on this certific	ate represents my	best efforts to	interpret the da
ailable. I understand that any false statement	y are particulable by fille of fill	iprisonment unde	r 18 U.S. Code,	Section 1001.
D. ALIPAL FACTO	$\mathcal R$	NSE NUMBER 🔍	_	
OWNER	COMPANY NAME T	_	LS#37930	2
P.O. Box 4363	CITY	STCO SURVE	YING	ZIP CODE
NATURE DAMAGE	DATE 12/20/20	ty	PHONE	86323
MA Form 81 21 Inches	10/29/04		928-	636-9184
MA Form 81-31, January 2003 SEE REVE	RSE SIDE FOR CONTINUATION	I REPLA	CES ALL PREVI	IOUS EDITIONS

IMPORTANT: In these spaces, copy the c			
	sponding information from Section Ae, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	For Insurance Company Use: Policy Number	
CITY			
#PN # 103-	, , , , , , , , , , , , , , , , , , , ,		
Copy both sides of this Elevation Certificate	YOR, ENGINEER, OR ARCHITECT CERTIFICATION (C for (1) community official, (2) insurance agent/comp	CONTINUED)	
COMMENTS			
- HOME IS A SITE-BU	TILT HOME ON A CONCRETE SLAB		
FLOOR ELEVATION OF 80,36'	FEET, AND WITH A L.A.G. OF 78.0	76', AND A	
H.A.G. OF 79.00'.			
SECTION E - BUILDING ELEVATION INCO	RMATION (SURVEY NOT REQUIRED) FOR ZONE AO	Check here if attachments	
information for a LOMA or LOMR-F, Section C E1. Building Diagram Number (Select the see pages 6 and 7. If no diagram accurate E2. The top of the bottom floor (including base (check one) the highest adjacent grade. (UE3. For Building Diagrams 6-8 with openings (including Diagrams 6-8 with op	ete Items E1. through E4. If the Elevation Certificate is in must be completed.  The building diagram most similar to the building for which by represents the building, provide a sketch or photograp ment or enclosure) of the building is     ft.(m)     is enatural grade, if available.)  The see page 7), the next higher floor or elevated floor (elevatest adjacent grade.  The requipment servicing the building is     ft. (m)     ende.  The servicing the building is     ft. (m)     ende.  The servicing the bottom floor elevated in accest     No     Unknown. The local official must certify this expensive who completes Sections A, B, C (Items C3.h and EFE) or Zone AO must sign here. The statements in Sections A.	this certificate is being completed – h.) in.(cm)    above or    below tion b) of the building is _  in. (cm)    above or    coordance with the community's information in Section G. FICATION and C3.i only), and E for Zone A ions A, B, C, and E are correct to	
SIGNATURE		PHONE	
COMMENTS	1666	FIJONE	
SEC	CTION G - COMMUNITY INFORMATION (OPTIONAL)	Check here if attachments	
The local official who is authorized by law or ord	linance to administer the community's floodplain manage	mont audice and	
decitors A, B, C (or E), and G of this Elevation	Certificate. Complete the applicable item(s) and sign belo	214/	
<ul> <li>G1.   The information in Section C was taken engineer, or architect who is authorized elevation data in the Comments area b</li> <li>G2.   A community official completed Section or Zone AO.</li> <li>G3.   The following information (Items G4-G9)</li> </ul>	from other documentation that has been signed and emit by state or local law to certify elevation information. (Ind	bossed by a licensed surveyor, licate the source and date of the ed or community-issued BFE)	
G4. PERMIT NUMBER G5. DAT	E PERMIT ISSUED G6. DATE CERTIFICATE (	OF COMPLIANCE/OCCUPANCY	
G7. This permit has been issued for:    New Co G8. Elevation of as-built lowest floor (including b	onstruction [  Substantial Improvement asement) of the building is:	ft.(m)Datum:	
G9. BFE or (in Zone AO) depth of flooding at the OCAL OFFICIAL'S NAME	building site is:	ft.(m)Datum:	
	TITLE		
COMMUNITY NAME	TELEPHONE		
SIGNATURE	DATE		
COMMENTS			
FEMA Form 81-31, January 2003	REPLA(	Check here if attachments CES ALL PREVIOUS EDITIONS	