ELEVATION CERTIFICATE U.S. DEPARTMENT OF HOMELAND SECURITY OMB No. 1660-0008 FEDERAL EMERGENCY MANAGEMENT AGENCY Expiration Date: July 31, 2015 National Flood Insurance Program Important: Read the instructions on pages 1-9. FOR INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION Policy Number: A1. Building Owner's Name Annette Spivey Company NAIC Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2540 W Shadow Valley Ranch Rd City Prescott State AZ ZIP Code 86305 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Yavapai County APN 115-02-001 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 34.5843 Long. -112.5085 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 4 A9. For a building with an attached garage: A8. For a building with a crawlspace or enclosure(s): a) Square footage of attached garage 1340 a) Square footage of crawlspace or enclosure(s) sq ft Number of permanent flood openings in the attached garage b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0 within 1.0 foot above adjacent grade Total net area of flood openings in A9.b 0 sq in Total net area of flood openings in A8.b 0 sq in Engineered flood openings? ☑ No d) Engineered flood openings? ⊠ No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State B1. NFIP Community Name & Community Number B2. County Name AZ Yavapai, Unicorporated Area Yavapai County 040093 B9 Base Flood Elevation(s) (Zone B4. Map/Panel Number B5. Suffix **B6. FIRM Index Date B7. FIRM Panel** B8. Flood Zone(s) AO, use base flood depth) 3-2-2015 Effective/Revised Date 04025C2035 G 5380.3 9-3-2010 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ Community Determined ☐ Other/Source: ☐ FIRM B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 ☑ NAVD 1988 ☐ Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ⊠ No ☐ CBRS □ OPA Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Construction Drawings* ☐ Building Under Construction* C1. Building elevations are based on: *A new Elevation Certificate will be required when construction of the building is complete. 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, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: ERM 291 Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929

NAVD 1988

Other/Source: _ Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. ☐ meters a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 5380.86 meters 5387.93 b) Top of the next higher floor ☐ feet ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet meters N/A. d) Attached garage (top of slab) meters 5381.43 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) meters 5381.09 f) Lowest adjacent (finished) grade next to building (LAG) meters 5388.43 q) Highest adjacent (finished) grade next to building (HAG) ⊠ feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 5388.28 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.

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.

Were latitude and longitude in Section A provided by a licensed land surveyor?

Yes No

Check here if attachments.

Check here if attachments.

Certifier's Name Brandon Van Horn

Title CEO

Company Name VH Land Survey

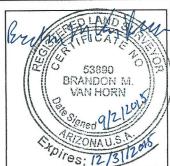
Address 7585 E Pharlap Lane

City Prescott Valley

State AZ ZIP Code 86315

Signature

Date 9 1/2 1/2 City Telephone 928-710-9700



ELEVATION CERTIFICATE, pa	age 2					
IMPORTANT: In these spaces, of	FOR I	NSURANCE COMPANY USE				
Building Street Address (including Apt 2540 W Shadow Valley Ranch Rd	Policy	Number:				
City Prescott	State AZ	ZIP Code 86305	Comp	any NAIC Number:		
SECTION	D – SURVEYOR, ENGINEER, OR ARCHIT	ECT CERTIFICATION	N (CONTIN	IUED)		
Copy both sides of this Elevation Cert	ificate for (1) community official, (2) insurance age	nt/company, and (3) build	ding owner.			
Comments Lowest machinery is a water heater located in the basement servicing the residential structure. Total enclosures has three (3) tiered separate enclosures. The finished basement is a 320 Sq. feet +/-; The east enclosure is appoxamatly 500 sq. feet +/-; the west one is 520 +/- Braudin M Jan Jan						
Signature	Date					
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY NOT RI	EQUIRED) FOR ZON	E AO AND	ZONE A (WITHOUT BFE)		
 and C. For Items E1–E4, use natural E1. Provide elevation information fo grade (HAG) and the lowest adjance and an Top of bottom floor (including b) Top of blatform of slab) is E3. Attached garage (top of slab) is E4. Top of platform of machinery an E5. Zone AO only: If no flood depth 	basement, crawlspace, or enclosure) is	In Puerto Rico only, enter show whether the elevariant in the show whether the elevariant in the show whether the elevariant in the show whether the show or in the show or in the show or in the show in the show in the show whether the show in the show whether the elevariant in the show whether the show which is shown in the show whether the show which is shown in the sh	er meters. tion is above ters	ve or below the highest adjacent ve or below the HAG. ve or below the LAG. instructions), the next higher floor G. or below the HAG.		
	F – PROPERTY OWNER (OR OWNER'S F		CERTIFIC	ATION		
The property owner or owner's author	ized representative who completes Sections A, B, ements in Sections A, B, and E are correct to the b	and E for Zone A (without				
Property Owner's or Owner's Authoriz	zed Representative's Name			9 - 22 9		
Address	City	\$	State	ZIP Code		
Signature	Date		Telephone			
Comments						
				☐ Check here if attachments		
	SECTION G - COMMUNITY INFORI	MATION (OPTIONAL)				
of this Elevation Certificate. Complete the G1. The information in Section C	w or ordinance to administer the community's floodpe applicable item(s) and sign below. Check the mea was taken from other documentation that has bee elevation information. (Indicate the source and details)	olain management ordinar surement used in Items (n signed and sealed by a	nce can com G8-G10. In F a licensed su	Puerto Rico only, enter meters. urveyor, engineer, or architect who		
G2. A community official complete	ed Section E for a building located in Zone A (with	out a FEMA-issued or co				
	ems G4–G10) is provided for community floodplain					
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate (ompilan	ce/Occupancy Issued		
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Im	provement				
G8. Elevation of as-built lowest floor (i	, , ,	feet meter		um		
G9. BFE or (in Zone AO) depth of floo G10. Community's design flood elevation		feet meter		um um		
Local Official's Name	Titl	le				
Community Name	Te	lephone		<u> </u>		
Signature	Da	te				
Comments				Check have # -ttach		
		Mary and the second and the second and the second		☐ Check here if attachments		

Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2540 W Shadow Valley Ranch Rd			Policy Number:
City Prescott	State AZ	ZIP Code 86305	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.





Building PhotographsContinuation Page

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2540 W Shadow Valley Ranch Rd			Policy Number:
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If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.





