FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

*	Important: Rea	d the instructions on pages	s 1 - 5.			
	ON	For Insurance Company Use:				
BUILDING OWNER'S NAME RAYMOND LEE	E RUBIN O'DON'	OLD SMITH		Policy Number		
BUILDING STREET ADDRESS (III	ncluding Apt., Unit, Suite, and/or E	Bldg. No.) OR P.O. ROUTE AND BO	OX NO.	Company NAIC Number		
CITY WICKENBURG	1	STATE		ZIP CODE		
PROPERTY DESCRIPTION (Lot a		lumber, Legal Description, etc.)				
	Non-residential, Addition, Access	sory, etc. Use comments section if	necessary.)			
LATITUDE/LONGITUDE (OPTION (##° - ##' - ##.##" or ##.####"	NAL) HORIZONTAL	0001102	GPS (Type: USGS Quad Map			
	SECTION B - FLOOD INS	SURANCE RATE MAP (FIRM) I	NFORMATION			
B1. NFIP COMMUNITY NAME & COUNTY	COMMUNITY NUMBER B2	COUNTY NAME	В	3. STATE AZ		
NUMBER	SUFFIX B6. FIRM INDEX DATE 6601	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6/6/01	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)		
310. Indicate the source of the	Base Flood Elevation (BFE) d	ata or base flood depth entered		6.07.1		
FIS Profile		Determined Other (Desc				
		NGVD 1929 NAVD 1988				
Designation Date:	Coastal Barrier Resources S	ystem (CBRS) area or Otherwis	e Protected Area	a (OPA)? LYes XINO		
	SECTION C - BUILDING EL	EVATION INFORMATION (SUI	RVEY REQUIRE	:D)		
1 Building elevations are base		rings* Building Under C				
		ruction of the building is complet		[Z]Fillished Constituction		
				ertificate is being completed - see		
		building, provide a sketch or pho		ertificate is being completed - see		
		/1-V30. V (with BFE), AR, AR/A,		A30 AR/AH AR/AO		
Complete Items C3a-		1 100: 1 (Will B) E), 7 1 1, 7 1 07 1,		d. If the datum is different from		
	ost-it® Fax Note 7671	Date 6-8-10 pages //	7	ements and datum conversion		
calculation. Use the To	1	From pages //	propriate, to	document the datum conversion.		
Datum Co.	/Dept//	Co. Fishette	-	-		
Elevation reference n	Kelsont rehard CI	VEFE		on the FIRM2		
a) rop or bottom r	Jile #	Phone # (928) 771-3197	(m).			
□ b) Top of next hig Fax	×# (602) 634-2360	Fax # 771-3457	(m).	See Card Se		
c) Bottom of lowe:			Embossed (II):	S CONTRACTOR S S S S S S S S S S S S S S S S S S S		
☐ d) Attached garagu (,	nachinery and/or equipment		(m).	28780		
servicing the building			ft.(m)	RICHARD T.		
servicing the building f) Lowest adjacent grade (LAG) ft.(m) ft.(m) ft.(m) ft.(m)						
g) Highest adjacent grade (HAG)						
☐ h) No. of permanent ope	enings (flood vents) within 1 ft	. above adjacent grade	ft.(m)	POMA U.S.P.		
i) Total area of all perma	anent openings (flood vents) is	n C3h sq. in.	(sq. cm)			
	SECTION D - SURVEYOR	, ENGINEER, OR ARCHITECT	CERTIFICATIO	N		
This certification is to be signe	ed and sealed by a land surve	yor, engineer, or architect autho	rized by law to c	certify elevation information.		
		certificate represents my best e				
	atement may be punishable by	y fine or imprisonment under 18		tion 1001.		
	Nead	LS 78730	ISE NUMBER			
TITLE Owner		COMPANY NAME	NEAD LA	ND SURVEYOR		
ADDRESS P. (1. Base	20218	CITY WICKENBURG	STATE 2	ZIP CODE		
SIGNATURE) 1	1	DATE 8/13/03	TELEPHO	80 33 8 84-5046		
photod). Il	1 WB	5/13/03	428 6	04-5046		

SIGNATURE Laboration of Mand

IMPORTANT: In these space	s, copy the corresponding infor	mation from Sec	ction A.	For Insurance Company Use:			
BUILDING STREET ADDRESS (In	cluding Apt., Unit, Suite, and/or Bldg. I			Policy Number			
21575 W. D CITY WICKENBURG	STAT	E 2	ZIP CODE	Company NAIC Number			
	ON D - SURVEYOR, ENGINEER						
opy both sides of this Elevation	on Certificate for (1) community of	ficial, (2) insuranc	ce agent/company, and (3	3) building owner.			
BFE DATUM	PRELIMINARY PLAT-VISTA	ROYAL SUB, "	BENCHMARG DESCRIB	ED AS "TOP OF 3" BRASS			
DISCIN CONCRETE, AE	ARAGE FLOOR = 2150.8'	KLEV, = 21	50 (Assumed DATA). MIN FIN FLOOR = 2137.			
SECTION E - BUILDING	E ELEVATION INFORMATION (S	LIRVEY NOT RE	OURED) FOR ZONES	Check here if attachment			
	E), complete items E1 through E3						
see pages 4 and 5. If no dia . The top of the bottom floor (i (check one) the highest adja . For Zone AO only: If no floo floodplain management ordi	(Select the building diagram agram accurately represents the brackets accurately represents the brackets accurately represents the brackets accurately accuratel	uilding, provide a of the building is e top of the bottor Juknown. The lo	sketch or photograph.) L ft.(m) L ir m floor elevated in accordated official must certify thi	above or below dance with the community's sinformation in Section G.			
	ON F - PROPERTY OWNER (OR						
he property owner or owner's ommunity-issued BFE) or Zon	authorized representative who co e AO must sign here.	mpletes Sections	A, B, and E for Zone A (without a FEMA-issued or			
ROPERTY OWNER'S OR OWNE	ER'S AUTHORIZED REPRESENTATI	VE'S NAME					
DDRESS		CITY	STATE	ZIP CODE			
IGNATURE		DATE	TELEPH	IONE			
OMMENTS							
				Check here if attachment			
	SECTION G - COMMU						
ections A, B, C (or E), and G on the information in Section engineer, or architect we elevation data in the Control A community official control Zone AO.	ed by law or ordinance to administ fithis Elevation Certificate. Check on C was taken from other documents authorized by state or local formments area below.) Impleted Section E for a building local (Items G4-G9) is provided for can be approximately supported to the content of the content of the content of the can be approximately supported to the content of the	the applicable be nentation that has law to certify eleve ocated in Zone A	ox(es) and sign below. been signed and embos ration information. (Indicate) (without a FEMA-issued of	sed by a licensed surveyor, ate the source and date of the or community-issued BFE) or			
4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		66. DATE CERTIFICATE OF	F COMPLIANCE/OCCUPANCY			
Elevation of as-built lowest	I for: New Construction floor (including basement) of the bof flooding at the building site is:	Substantial Ir		ft.(m) Datum: ft.(m) Datum:			
OCAL OFFICIAL'S NAME		TITLE					
OMMUNITY NAME		TELEPHONE					
SIGNATURE		DATE					
COMMENTS							
				Check here if attachmen			