

ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name R. W. & DIANA M. CROSTHWAITE		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 35775S. GOLD ROCK CIR.		Company NAIC Number
City WICKENBURG State AZ ZIP Code 85390		

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 YAVAPAI CO. APN 201-13-089

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL - GUEST HOUSE

A5. Latitude/Longitude: Lat. 34o01'55.5 Long. 112o50'29.3 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 1B

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) N/A sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A

c) Total net area of flood openings in A8.b N/A sq in

d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

a) Square footage of attached garage N/A sq ft

b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A

c) Total net area of flood openings in A9.b N/A sq in

d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFP Community Name & Community Number YAVAPAI CO. INC/UNINC. AREAS 040093		B2. County Name YAVAPAI		B3. State AZ	
B4. Map/Panel Number 0425C3490	B5. Suffix G	B6. FIRM Index Date 9-3-2010	B7. FIRM Panel Effective/Revised Date 9-3-2010	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) FFE 2152.36 NAVD88

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) VISTA ROYALE SUBD. HYDROLOGY

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)? Yes No
 Designation Date _____ CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *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, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
 Benchmark Utilized SEE COMMENTS Vertical Datum NAVD 88 CALCULATED
 Conversion/Comments SEE COMMENTS

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 2159.85 feet meters (Puerto Rico only)

b) Top of the next higher floor NONE feet meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters (Puerto Rico only)

d) Attached garage (top of slab) NONE feet meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 2159.24 feet meters (Puerto Rico only)

f) Lowest adjacent (finished) grade next to building (LAG) 2157.89 feet meters (Puerto Rico only)

g) Highest adjacent (finished) grade next to building (HAG) 2158.99 feet meters (Puerto Rico only)

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 2159.49 feet meters (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.

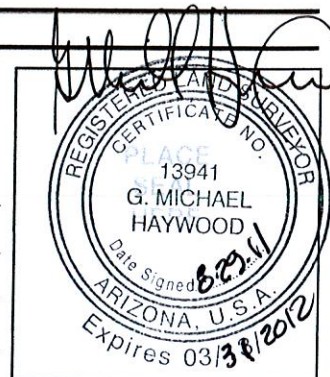
Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name G. MICHAEL HAYWOOD License Number AZ LS 13941

Title _____ Company Name _____

Address P. O. BOX 1001 City PRESCOTT State AZ ZIP Code 86302

Signature [Signature] Date 8-27-2011 Telephone 928-778-5101



IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

35775 GOLD ROCK CIR.

City WICKENBURG State AZ ZIP Code 85390

For Insurance Company Use:

Policy Number

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 BENCHMARK = 3" ADOT DISC IN CONC. @ N.E. COR VISTA ROYALE PHASE 1. USCGS ELEV. = 2478.24 NAVD29 = PROJECT BENCHMARK ELEV. = 2150.00 NGVD ASSUMED. AT PROJECT LAT./LONG. ADD 2.26 FEET TO NGVD 29 FOR NAVD 88 PER VERTCON. ELEVATIONS SHOWN ARE CORRECTED TO PROJECT ELEVATION AT NAVD 88. SECTION C2E FOR HEAT PUMP IN PHOTO NO. 2

Signature 

Date 8-27-2011

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 35775 GOLD ROCK CIR.	For Insurance Company Use: Policy Number
City WICKENBURG State AZ ZIP Code 85390	Company NAIC Number
<p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p>	

PHOTO NO. 1: EAST SIDE (FRONT) OF RESIDENCE



Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 35775 S. GOLD ROCK CIR..	For Insurance Company Use:
City WICKENBURG State AZ ZIP Code 85390	Policy Number
Company NAIC Number	
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."	

PHOTO NO. 2: SOUTH (HEAT PUNP PER SECTION C2E) & WEST SIDE (REAR) OF RESIDENCE

