FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Daker ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number CITY Kenburg STATE ZIP CODE 85390 CRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 201-13-092 (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) New Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.####") NAD 1927 __| NAD 1983 USGS Quad Map X Other: See Section SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE avapai County 040093 lava par **B4. MAP AND PANEL B5. SUFFIX** B6. FIRM INDEX B7. FIRM PANEL B9. BASE FLOOD ELEVATION(S) B8. FLOOD NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) 0402563515 6-6-01 6-6-01 143.2 msl B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. __| FIRM __ | Community Determined Other (Describe): See B11. Indicate the elevation datum used for the BFE in 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 Designation Date: 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. Building Diagram Number _____ (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, AR/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. _ Conversion/Comments _ See Section Elevation reference mark used_ Does the elevation reference mark used appear on the FIRM? a) Top of bottom floor (including basement or enclosure) 5 ft.(m) b) Top of next higher floor ft.(m) c) Bottom of lowest horizontal structural member (V zones only) d) Attached garage (top of slab) ft.(m) e) Lowest elevation of machinery and/or equipment _ ft.(m) \(\frac{1}{2} \) servicing the building (Describe in a Comments area.) ☐ f) Lowest adjacent (finished) grade (LAG) ☐ g) Highest adjacent (finished) grade (HAG) o ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade. ☐ i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME LICENSE NUMBER //852 TITLE COMPANY NAME Engineerin Baseline ADDRESS SIGNATURE

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.			For Insurance Company Use:
35975 S.	Gold Rock Circle		Policy Number
city Wickenbu		Z 85358	
SECTION'Ó - 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 Used Vi	sta Royale's Pro	ject Bench M	ark 3" Brass Cap
in concrete ADOT R/W Monument Elev. = 2150.00 Cassumed date			
USGS Datum Elev. = 2478.24 @ NE corner of Vista Royale Unit			
Flood Elev. assigned by Engineer of the subdivision Check here if attachments			
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)			
	BFE), complete Items E1. through E4.	If the Elevation Certificate is in	ntended for use as supporting
information for a LOMA or LOMR-F, Section C must be completed.			
E1. Building Diagram Number (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.) E2. The top of the bottom floor (including basement or enclosure) of the building is _ _ ft.(m) _ above or _ below			
(check one) the highest adjacent grade. (Use natural grade, if available.)			
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is			
[ft.(m) lin.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.			
E4. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to			
the best of my knowledge.			
	S AUTHORIZED REPRESENTATIVE'S NAM	lE	
ADDRESS	CITY		
SIGNATURE	DAT	E TELI	EPHONE
COMMENTS			
			Check here if attachments
	SECTION G - COMMUNITY INF		
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. G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor,			
engineer, or architect who is authorized by state or local 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. 33 The following information (Items G4-G9) is provided for community floodplain management purposes.			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	ISSUED	OF COMPLIANCE/OCCUPANCY
G7. This permit has been issued fo		antial Improvement	
	or (including basement) of the building is		ft.(m) Datum:
G9. BFE or (in Zone AO) depth of f	looding at the building site is:		ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME TELEPHONE			
SIGNATURE DATE			
COMMENTS			
			Check here if attachments
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