U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

ELEVATION CERTIFICATE

JOSE 0 7258

Important: Read the instructions on pages 1-8.

OMB No. 1660-0008 Expires February 28, 2009

SEC	TION A - PROPERTY INFORMATION	For Insurance Company Use:
A1 Building Owner's Name DAVID 4 CA	PAI VIACK	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or		Company NAIC Number
City State ZIP Code	PEEPLES VALLEY AZ	
A3. Property Description (Lot and Block Numbers, Tax Parcel	Number Legal Description, etc.)	
	202-	- 21-238
A4. Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.)	
A5. Latitude/Longitude: Lat. Long	Horizontal Datum:	☐ NAD 1927 ☐ NAD 1983
A7. Building Diagram Number A8. For a building with a crawl space or enclosure(s), provide	CRAWL SPAI	CE WALLS NOT IN PLACE
a) Square footage of crawl space or enclosure(s)	A9. For a building with an attack sq ft a) Square footage of attac	
 No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 	b) No. of permanent flood	openings in the attached garage
c) Total net area of flood openings in A8.b	walls within 1.0 foot abo	ve adjacent grade penings in A9.b sq in
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INFORMATION	34 11
B1. NFIP Community Name & Community Number	P2 County No.	33. State
YAVAPA COUNTY UNINCORP. B4. Map/Panel Number B5. Suffix B6 FIRM Index	1/HVHPA)	ARIZONA
Les de la marca	B7. FIRM Panel B8. Flood Effective/Revised Date Zone(s)	B9. Base Flood Elevation(s) (Zone
04025C2770 - 6/06/01	- X LINHAI 11-X	AO, use base flood depth) 4535. 2
B10. Indicate the source of the Base Flood Elevation (BFE) data ☐ FIS Profile		
A Sommany Sca		
B12. Is the building located in a Coastal Barrier Resources Systematics.	GVD 1929 NAVD 1988 Other (Describe) m (CBRS) area or Otherwise Protected Area (OPA)?	_
Designation Date	☐ CBRS ☐ OPA	□Yes KNo
SECTION C - BUILDING E	LEVATION INFORMATION (SURVEY REQUIRE	
C1. Building elevations are based on: Construction Dear	wings! Duilding U. J. O. J. J.	
A new Elevation Certificate will be required when construction	n of the huilding is complete	Finished Construction
 Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V. below according to the building diagram specified in Item A7. 	30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH,	, AR/AO. Complete Items C2.a-g
Benchmark Utilized #16 Vertical Datum 29	RM#16/ LISTED ON FI	RN
Conversion/Comments		
Top of bottom floor (including basement, crawl space, or enclose)	Check the measurement	
b) Top of the next higher floor	hi A	
Bottom of the lowest horizontal structural member (V Zord)		(Puerto Rico only)
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the	MA feet meters	(Puerto Rico only)
(Describe type of equipment in Comments)		(Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG)		(Puerto Rico only)
		(Puerto Rico only)
SECTION D - SURVEYOR	ENGINEER, OR ARCHITECT CERTIFICATION	
This certification is to be signed and sealed by a land surveyor, en information. I certify that the information on this Certificate represent understand that any lates statement may be surjusted to the control of the certificate representation.		and the same of th
and any raiso statement may be punishable by fine o	r imprisonment under 18 U.S. Code, Section 1001.	SED LAND
☐ Check here if comments are provided on back of form.		TIFICATE D
Certifier's Name	15336	15336 0 0
Til	License Number	DON DON MILLER O.
Address Address	MILLER LAND SURVEYING IN	
Address 131 S. ZOTAST City PHOE	WIX State AZZIP Code 85034	ned
Signature And Mai O Date 9/10/07 Telephone 603 & 243-7193		
The state of the s	((() () () ()	- Don Milly
4	1	PR 52

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.	Olor B.O. Posts	For Insurance Company Use:
	o.) of P.O. Route and Box No.	Policy Number
City State ZIP Code		Company NAIC Number
SECTION D - SURVEYOR ENGIN	EED OR ADOLUTE	
Copy both sides of this Elevation Certificate for (1) community office Comments	EER, OR ARCHITECT CERTIFICATIO	ON (CONTINUED)
Comments	iar, (2) insurance agent/company, and (3) be	uilding owner.
PHOTOS ATT	ACHED	
0 1.00		
Jon Willes	aliala	
Signature	Date 7/10/0 /	
SECTION E - BUILDING FI EVATION INCOMMATION	OLIO VIE	Check here if attachm
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZON	E AO AND ZONE A (WITHOUT REE
For Zones AO and A (without BFE), complete Items E1-E5. If the C and C. For Items E1-E4, use natural grade, if available. Check the	Certificate is intended to support a LOMA or	LOMR-F request complete Sections A. D.
and C. For Items E1-E4, use natural grade, if available. Check the E1. Provide elevation information for the following and charts the	measurement used. In Puerto Rico only, e	nter meters.
E1. Provide elevation information for the following and check the algrade (HAG) and the lowest adjacent grade (LAG).	ppropriate boxes to show whether the eleva	tion is above or below the highest adjacer
b) Top of bottom floor (including basement, crawl space, or end	closure) is	ters Пabove or Пhelow the HAC
E2. For Building Diagrams 6.8 with possessed 8	closure) is feet mei	ters \ \ above or \ \ \ helow the LAC
(elevation C2.b in the diagrams) of the building is	_ ☐ feet ☐ meters ☐ above or ☐ be	e 8 of Instructions), the next higher floor
E3. Attached garage (top of slab) is	meters above or below the HAG.	ion the ring.
E4. Top of platform of machinery and/or equipment servicing the bull. E5. Zone AO only: If no flood depth number is available, is the top	illding is [] feet [] meters	above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the top ordinance? Yes No Unknown. The local official	of the bottom floor elevated in accordance	with the community's floodplain managen
	The whombadon in Section G.	*
SECTION F - PROPERTY OWNER (I	OR OWNER'S REPRESENTATIVE) C	ERTIFICATION
		t a FEMA-issued or community issued Br
or Zone AO must sign here. The statements in Sections A, B, and E a Property Owner's or Owner's Authorized Representative's Name	are correct to the best of my knowledge.	and the dead of community-issued Br
Address	tup k Klurk	
10517 W. PATRICK LAND	City	ate ZIP Code
Signature	Date of ACC - To	120 85J33
Comments	19-07 Te	lephone 623-572-5694
		3 10 3 01
SECTION G. COMM	INITY INCOME.	Check here if attachm
e local official who is authorized by law or ordinance to administer the d G of this Elevation Certificate. Complete the applicable item(s) and	UNITY INFORMATION (OPTIONAL)	
d G of this Elevation Certificate. Complete the applicable item(s) and: The information in Section C was taken from attraction.	sign below. Check the measurement used	ance can complete Sections A, B, C (or E in Items G8, and G9
The information in Section C was taken from other documental is authorized by law to certify elevation information. (Indicate the	tion that has been signed and sealed by a li	censed surveyor engineer or architect
A community official completed Section E for a building located	ne source and date of the elevation data in	the Comments area below.)
The following information (Items G4G9.) is provided for comm	unity floodolain management	munity-issued BFE) or Zone AO.
4. Permit Number G5 Date Permit Issued	The second secon	
78260 8-17-07	G6. Date Certificate Of (Compliance/Occupancy Issued
This permit has been issued for: New Construction	Substantial Improvement	
Lievation of as-built lowest floor (including basement) of the building	feet meters (PR) Da	• · · · · ·
BFE or (in Zone AO) depth of flooding at the building	feet meters (PR) Da	tum
BFE or (in Zone AO) depth of flooding at the building site:		
cal Official's Name		
cal Official's Name	Title	
cal Official's Name mmunity Name		
cal Official's Name	Title	
cal Official's Name mmunity Name	Title Telephone	
cal Official's Name mmunity Name inature	Title Telephone	
cal Official's Name mmunity Name inature	Title Telephone	
cal Official's Name mmunity Name inature	Title Telephone	
cal Official's Name mmunity Name inature mments	Title Telephone	☐ Check here if attachment

Building Photographs Continuation Page

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

APN-202.21.238

For Insurance Company Usa: Policy Number

City

State

ZIP Code

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."









