FERERAL EMERGENCY MANAGEMENT AGENCY ATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number Mechana BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 740 N. Leonora lane STATE ZIP CODE AL 8633L PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 303-05-100G BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map (##° - ##' - ## ##" or ## #####°) ■ NAD 1927 ■ NAD 1983 Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3.STATE B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** AMEDUA Count avagar countr avapan B9. BASE FLOOD ELEVATION(S) **B7. FIRM PANEL** B4, MAP AND PANEL EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) **B5. SUFFIX B6. FIRM INDEX DATE** NUMBER 66001 616101 0402560970 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined FIS Profile FIRM ☐ NAVD 1988 ☐ Other (Describe) B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) X Finished Construction ☐ Building Under Construction* C1. Building elevations are based on:
Construction Drawings* *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. Datum 4399.89 Conversion/Comments 4394 50 ft.(m) o a) Top of bottom floor (including basement or enclosure) Embossed Seal 4398 .54ft.(m) o b) Top of next higher floor 4397 40 ft.(m) and Date o c) Bottom of lowest horizontal structural member (V zenes **NA**. __ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment icense Number, **A**. _ft.(m) servicing the building (Describe in a Comments area) 4394.50ft.(m) o f) Lowest adjacent (finished) grade (LAG) 4394 .75 ft.(m) o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade ____ o 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 35078 TITLE TELEPHONE SIGNATURE

IMPORTANT: In these spaces, cor	py the corresponding information from Sect	tion A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Induding Apt.	, Unit, Suite, and/c No.) OR P.O. ROUTE AND BOX	NO.	(3K)	Policy Number
CITY	STATE		ZIP CODE	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFICAT	TON (CONTINUED))
Copy both sides of this Elevation Certifica	ate for (1) community official, (2) insurance agent/com	pany, and (3) building ov	wner.	<u></u>
	HORIZONIAL STRUGURAL		ARE THE :	STEEL BEAMS
THAT SUPPOR	THE MANUFACTURED HOL	ME,		
D				
				Check here if attachments
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZO	ONE AO AND ZON	IE A (WITHOUT BFE)
or Zone AO and Zone A (without BFE), ∝	omplete Items E1 through E4. If the Elevation Certific	cate is intended for use a	is supporting informat	ion for a LOMA or LOMR-F,
represents the building provide a sket	e building diagram most similar to the building for which or photograph.) asement or enclosure) of the building is ft.(m)			
natural grade if available)	gs (see page 7), the next higher floor or elevated floo			
amda Complete items C3 h and C3 i	on front of form			
 The top of the platform of machinery ar natural grade, if available). 	nd/or equipment servicing the building isft.(m) _	_in.(cm) [] above or	below (check one)	the highest adjacent grade. (Use
5. For Zone AO only: If no flood depth nu	umber is available, is the top of the bottom floor eleva	ited in accordance with the	he community's flood	plain management ordinance?
☐ Yes ☐ No ☐ Unknown. Th	e local official must certify this information in Section	G.		
SEC	TION F - PROPERTY OWNER (OR OWNER d representative who completes Sections A, B, C (Ite	ome C3 h and C3 i only)	and F for Zone A (wit	thout a FEMA-issued or community-
The property owner or owner's authorized issued REE) or Zone AO must sign here	d representative who completes Sections A, B, C (lie . The statements in Sections A, B, C, and E are corr	ect to the best of my kno	wledge.	illouta i Enstriction de la company
	AUTHORIZED REPRESENTATIVE'S NAME	,		
Envy Homes		CITY	STAT	E ZIP CODE
3525 N. Hwy	89 Ch.	no Valley	W1	84323
SIGNATURE	2	DATE 16-03		PHONE -636-1100
COMMENTS COMMENTS	elle o	100	100	000 //-
OCHINETTO	2			
		and the second s		Check here if attachmer
	SECTION G - COMMUNITY INF	ORMATION (OPTION	NAL)	barred and the same of the sam
The local official who is authorized by law	or ordinance to administer the community's floodplai	n management ordinanc	e can complete Secti	ons A, B, C (or E), and G of this Elev
Cartificate Complete the applicable item/	's) and sign below			
G1 The information in Section C was	taken from other documentation that has been signed	ed and embossed by a lic	censed surveyor, eng	ineer, or architect who is authorized
or local law to certify elevation inf	formation. (Indicate the source and date of the eleva section E for a building located in Zone A (without a F	EMA-issued or commun	nity-issued BFE) or Zo	ne AO.
G2. The following information (Items (G4-G9) is provided for community floodplain manage	ement purposes.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE	CERTIFICATE OF COM	MPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for:	New Construction Substantial Improvement		ACOUNTS NO	
G8. Elevation of as-built lowest floor (inclu G9. BFE or (in Zone AO) depth of flooding	uding basement) of the building is:		ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME	-	TITLE		
		TELEPHONE		
COMMUNITY NAME				
COMMUNITY NAME SIGNATURE		DATE		