

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| | | | |
|--|-------------|--|--|
| SECTION A - PROPERTY OWNER INFORMATION | | | For Insurance Company Use: |
| BUILDING OWNER'S NAME JOHN DURRER | | | Policy Number |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. FEATHER MOUNTAIN CR | | | Company NAIC Number |
| CITY PAULDEN | STATE AZ | ZIP CODE 86334 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 304-01-059G SEC. 19, T18N, R2W, G&SRB&M, | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL | | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###.###" or ###.#####°) | | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 | SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____ |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|---|-----------------|-----------------------------------|---|---------------------------------|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER YAVAPAI COUNTY 040093 | | B2. COUNTY NAME YAVAPAI COUNTY | | B3. STATE ARIZONA | |
| B4. MAP AND PANEL NUMBER 04025C0970 | B5. SUFFIX F | B6. FIRM INDEX DATE 06-06-01 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 06-06-01 | B8. FLOOD ZONE(S) UNSHADED X | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

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 No 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 1 (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 NA Conversion/Comments _____
 Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) SEE COMMENTS
- o b) Top of next higher floor NA
- o c) Bottom of lowest horizontal structural member NA
- o d) Attached garage (top of slab) NA
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) SEE COMMENTS
- o g) Highest adjacent (finished) grade (HAG) SEE COMMENTS
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- o i) Total area of all permanent openings (flood vents) in C3.h NA 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 DUANE FAMAS RLS LICENSE NUMBER AZ REG 27737

| | | | |
|---------------------------------|---|------------------------------------|--------------------------|
| TITLE <u>LAND SURVEYOR</u> | COMPANY NAME <u>FAMAS LAND SURVEYORS, INC</u> | | |
| ADDRESS <u>PO BOX 4357</u> | CITY <u>PRESCOTT</u> | STATE <u>AZ</u> | ZIP CODE <u>86302</u> |
| SIGNATURE <u>Duane Famas</u> | DATE <u>04/08/04</u> | TELEPHONE <u>(928)-717-2844</u> | |

| | | | |
|--|-------------|-------------------|----------------------------|
| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | For Insurance Company Use: |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, or Bldg. No.) OR P.O. ROUTE AND BOX NO. FEATHER MOUNTAIN CR | | | Policy Number |
| CITY PAULDEN | STATE AZ | ZIP CODE 86334 | 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

AIRPLANE HANGAR ON CONCRETE SLAB WITH STUDIO APARTMENT INSIDE. THE PARCEL IS NOT WITHIN A DESIGNATED FLOOD HAZARD ZONE PER FEMA FIRM BUT HAS BEEN IDENTIFIED AS BEING WITHIN AN AREA IMPACTED BY LOCAL STORM AND/OR FLOOD RUNOFF. SURVEYED CROSS SECTIONS HAVE BEEN PROVIDED AND SHOWN ON THE ATTACHED MAP DATED 3/8/04 BY FAMAS LAND SURVEYORS, INC.

TOP OF BOTTOM FLOOR ELEV=4499.4

LOWEST ADJACENT GRADE ELEV=4497.5 HIGHEST ADJACENT GRADE ELEV=4498.8 NO FLOOD VENTS

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended 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) __ in.(cm) 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) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. 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.*

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.

- 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.
- 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 |
|-------------------|------------------------|---|

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

| | |
|-----------------------|-----------|
| LOCAL OFFICIAL'S NAME | TITLE |
| COMMUNITY NAME | TELEPHONE |
| SIGNATURE | DATE |
| COMMENTS | |

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| | | | |
|--|--|--|----------------------------|
| SECTION A - PROPERTY OWNER INFORMATION | | | For Insurance Company Use: |
| BUILDING OWNER'S NAME JOHN DURRER | | Policy Number | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. FEATHER MOUNTAIN CR | | Company NAIC Number | |
| CITY PAULDEN | STATE AZ | ZIP CODE 86334 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 304-01-059G SEC. 19, T18N, R2W, G&SRB&M, | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL | | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ###"###") | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 | SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____ | |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|--|-----------------|-----------------------------------|---|---------------------------------|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER YAVAPAI COUNTY 040093 | | B2. COUNTY NAME YAVAPAI COUNTY | | B3. STATE ARIZONA | |
| B4. MAP AND PANEL NUMBER 04025C0970 | B5. SUFFIX F | B6. FIRM INDEX DATE 06-06-01 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 06-06-01 | B8. FLOOD ZONE(S) UNSHADED X | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____ | | | | | |
| B11. Indicate the elevation datum used for the BFE in B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____ | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 1 (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 NA Conversion/Comments _____

Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) SEE COMMENTS
- o b) Top of next higher floor NA
- o c) Bottom of lowest horizontal structural member NA
- o d) Attached garage (top of slab) NA
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) SEE COMMENTS
- o g) Highest adjacent (finished) grade (HAG) SEE COMMENTS
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- o i) Total area of all permanent openings (flood vents) in C3.h NA 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 DUANE FAMAS RLS

LICENSE NUMBER AZ REG 27737

TITLE LAND SURVEYOR

COMPANY NAME FAMAS LAND SURVEYORS, INC

ADDRESS
PO BOX 4357

CITY
PRESCOTT

STATE
AZ

ZIP CODE
86302

SIGNATURE

Duane Famas

DATE
04/08/04

TELEPHONE
(928)-717-2844

| | | | |
|--|-------------|-------------------|----------------------------|
| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | For Insurance Company Use: |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, or Bldg. No.) OR P.O. ROUTE AND BOX NO. FEATHER MOUNTAIN CR | | | Policy Number |
| CITY PAULDEN | STATE AZ | ZIP CODE 86334 | 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

AIRPLANE HANGAR ON CONCRETE SLAB WITH STUDIO APARTMENT INSIDE. THE PARCEL IS NOT WITHIN A DESIGNATED FLOOD HAZARD ZONE PER FEMA FIRM BUT HAS BEEN IDENTIFIED AS BEING WITHIN AN AREA IMPACTED BY LOCAL STORM AND/OR FLOOD RUNOFF. SURVEYED CROSS SECTIONS HAVE BEEN PROVIDED AND SHOWN ON THE ATTACHED MAP DATED 3/8/04 BY FAMAS LAND SURVEYORS, INC.

TOP OF BOTTOM FLOOR ELEV=4499.4

LOWEST ADJACENT GRADE ELEV=4497.5 HIGHEST ADJACENT GRADE ELEV=4498.8 NO FLOOD VENTS

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended 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) __ in.(cm) 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) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. 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.*

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.

- 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.
- 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 |
|-------------------|------------------------|---|

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

| | |
|-----------------------|-----------|
| LOCAL OFFICIAL'S NAME | TITLE |
| COMMUNITY NAME | TELEPHONE |
| SIGNATURE | DATE |
| COMMENTS | |

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| | | |
|---|--|--|
| SECTION A - PROPERTY OWNER INFORMATION | | For Insurance Company Use: |
| BUILDING OWNER'S NAME <i>John Durres</i> | | Policy Number |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <i>2425 W. Winslock Dr.</i> | | Company NAIC Number |
| CITY <i>Paulden</i> | STATE <i>AZ</i> | ZIP CODE <i>86334</i> |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <i>APN 304-01-059G</i> | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <i>Residential</i> | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -##.###" or ##.#####) | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 | SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | |
|--|--|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <i>Yavapai County 040093</i> | B2. COUNTY NAME <i>Yavapai</i> | B3. STATE <i>AZ</i> |
| B4. MAP AND PANEL NUMBER <i>D4025C 0970</i> | B5. SUFFIX <i>F</i> | B6. FIRM INDEX DATE <i>6-6-01</i> |
| B7. FIRM PANEL EFFECTIVE/REVISED DATE <i>6-6-01</i> | B8. FLOOD ZONE(S) <i>Unshaded X</i> | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) |

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

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 No
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.
Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|---|--|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) _____ ft.(m) | License Number, Embossed Seal, Signature, and Date |
| <input type="checkbox"/> b) Top of next higher floor _____ ft.(m) | |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m) | |
| <input type="checkbox"/> d) Attached garage (top of slab) _____ ft.(m) | |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) _____ ft.(m) | |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) _____ ft.(m) | |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) _____ ft.(m) | |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____ | |
| <input type="checkbox"/> 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 |
| TITLE | COMPANY NAME |
| ADDRESS | CITY STATE ZIP CODE |
| SIGNATURE | DATE TELEPHONE |