

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME TRACY SHARP		For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 295 W. LA JOLLA LANE		Company NAIC Number	
CITY PAULDEN	STATE AZ	ZIP CODE 86334	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 304-04-339B HOLIDAY LAKE ESTATES LOT 439			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use 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 040043		B2. COUNTY NAME YAVAPAI COUNTY		B3. STATE ARIZONA	
B4. MAP AND PANEL NUMBER 04025C 0990	B5. SUFFIX F	B6. FIRM INDEX DATE 6-6-01	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6-6-01	B8. FLOOD ZONES AE	B9. BASE FLOOD ELEVATION(S) 4397.6

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)

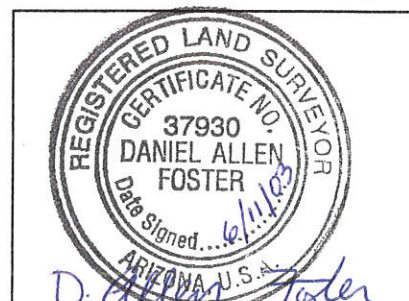
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number **8** (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 **NGVD 29** Conversion/Comments _____
 Elevation reference mark used **RM22 ERM111** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	4396	36	ft. (m)
<input type="checkbox"/> b) Top of next higher floor	4400	15	ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	4398	65	ft. (m)
<input type="checkbox"/> d) Attached garage (top of slab)	N/A		ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	N/A		ft. (m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	4396	36	ft. (m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	4396	65	ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	2 LARGE		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	±4032		sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



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 D. ALLEN FOSTER		LICENSE NUMBER R.L.S. # 37930	
TITLE LAND SURVEYOR	COMPANY NAME D. ALLEN FOSTER RLS 37930		
ADDRESS P.O. Box 4363	CITY CHINO VALLEY	STATE AZ	ZIP CODE 86323
SIGNATURE D. Allen Foster	DATE 6/12/03	TELEPHONE 928-636-0095	

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. LA JOLLA LANE			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
 ELEVATION OF C3-C IS TO THE BOTTOM OF THE STRUCTURAL FRAME OF A MANUFACTURED HOME. HOME IS ELEVATED ON MOBILE HOME JACKS. HOME HAS SKIRTING, AND WAS LEFT OPEN ON THE NORTH & SOUTH ENDS FOR FLOOD PURPOSES.

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.
- 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 _____
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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 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 _____

Check here if attachments

ELEVATION OF FLOODPLAIN PROPERTY

When Completed Return To: Yavapai County Development Services – Floodplain Unit
500 S. Marina St., Prescott, AZ, 86303 (928) 771-3197 FAX 771-3427

DATE 11/14/02

ASSESSOR'S PARCEL NUMBER 304-04-339B

SUBDIVISION NAME UNIT/PHASE AND LOT NUMBER HOLIDAY LAKE ESTATES LOT 439

OWNER TRACY SHARP

SITUS ADDRESS LA JOLLA LN

BASE BENCHMARK: Number RM22 - ERM 1411 Elevation 4393.79'

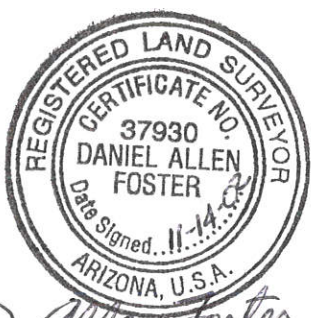
PROPERTY BENCHMARK ① 1/2" RB @ SW COR = 4395.56' ② 1/2" RB (BENCH) = 4395.92'

DESCRIPTION OF PROPERTY BENCHMARK 1/2" REBAR STANDING ± 0.20' ABOVE GROUND.

GROUND ELEVATIONS AT BUILDING SITE ③ = 4395.72' ④ = 4395.63 ⑤ 4395.60'
(Please provide a minimum of three (3) elevations points, representative of the site)

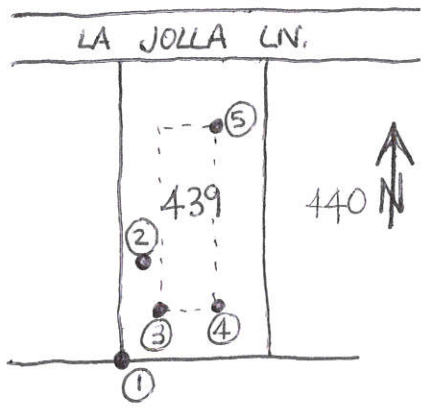
Sketch of Lot
(include location of property benchmark and building site elevations)

Remarks PROPERTY IS FLAT
WITH A DITCH CUT IN ON
THE SOUTH PROPERTY LINE.



D. Allen Foster

(Seal)



D. Allen Foster
Signed
D. ALLEN FOSTER R.L.S. #37930
Company Name
P.O. BOX 4363
Address
CHINO VALLEY, AZ 86323
Telephone 928-636-0095

FOR YAVAPAI COUNTY FLOOD CONTROL DISTRICT USE: _____ Date: _____

Base Flood Elevation 4397.6 + 1.0' = Regulatory Elevation 4398.6

* ELEVATION DETERMINATIONS ARE BASED ON BEST AVAILABLE DATA WHEN CALCULATED. ELEVATIONS ARE SUBJECT TO CHANGE WHEN NEW OR REVISED FLOOD STUDIES OR DATA IS SUPPLIED TO THE DISTRICT.