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.

important. Head the instructions on pages 1-7.						
	TION A - PROPERTY OWI	NER INFORMATION	N	For Insurance Company Use:		
BUILDING OWNER'S NAME 1 st American Title Insurance Agency Yavapai, I	Policy Number					
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, 425 Pittsburgh Road	Company NAIC Number					
CITY Paulden	STA AZ	TE	ZIP CC 86334	DDE		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax 304-07-325	Parcel Number, Legal Desc	aiption, etc.)				
BUILDING USE (e.g., Residential, Non-residential, Addition	Accessory etc. Use a Cor	nments area if nece	ssan/)			
Manufactured Home	, , , , , , , , , , , , , , , , , , , ,	mirene area, ir ricec.	55di y. /			
	ORIZONTAL DATUM: AD 1927 ⊠ NAD 1983	SOUF	RCE: GPS (Typ USGS Qu			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER YAVAPAI COUNTY - 040093	B2. COUNTY NAME YAVAPAI COUNTY			33. STATE ARIZONA		
B4. MAP AND PANEL NUMBER B5. SUFFIX B6. FIRM INDE:	B7. FIRM		8. FLOOD ZONE(S)	B9. BASE FLCOD ELEVATION(S) (Zone AO, use depth of flooding)		
04025C0990 F 6/6/01	6/6/	01	A	4408.0		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood cepth entered in B9. FIS Profile						
B11. Indicate the elevation datum used for the BFE in B9: \boxtimes NGV		■ NAVD 1988				
B12. Is the building located in a Coastal Barrier Resources System	(CBRS) area or Otherwise Pro	tected Area (OPA)?	☐ Yes ☒ No	Designation Date		
SECTION C - BUIL	DING ELEVATION INFOR	MATION (SURVEY	REQUIRED)			
C1. Building elevations are based on: Construction Drawings*	☐ Building Under Cons	truction" X Finis	ned Construction			
*A new Elevation Certificate will be required when construction of the puilding is complete.						
C2. Building Diagram Number $\&$ (Select the building diagram most s	imilar to the building for which	this certificate is being	completed - see pag	es 6 and 7. If no diagram		
accurately represents the building, provide a sketch or photogra		-		90.50 Ober 100		
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 C3a-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 22 Does the elevation reference	mark used appear on the FiR	M? ⊠ Yes □ No				
□ a) Top of bottom floor (including pasement or enclosure)	44 <u>07.40</u>	t.(m)	<u></u>	OD LAND		
☐ a) Top of next higher floor	4411 45	t.(m)	d Se	ANTICATE AND		
☐ c) Bottom of lowest horizontal structural member (V zones o	nly) <u>NA</u> ft.	.(m)	sse	19/6 ANAN		
☐ d) Attached garage (top of slab)	NAf		od in	DANIEL ALLEN		
☐ e) Lowest elevation of machinery and/or equipment			一 一 。	LEND FOSTER VALUE IN		
servicing the building (Describe in a Comments area)	4408 42	t.(m)	nbe	1 130		
☐ f) Lowest adjacent (finished) grade (LAG)	4407.37	t.(m)	Nur	20cd.2		
☐ g) Hignest adjacent (finisned) grade (HAG)	4408, 10 f	L(m)	8 7	ZICAL USTAL		
☐ h) No. of permanent openings (flood vents) within 1 ft. above	adjacent grade 2		License Number, Embossed Seal, Signature, and Date) PHILA Toler		
☐ i) Total area of all permanent openings (flood vents) in C3.h	1728 sq. in. (sq. cm)					
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signed and sealed by a land survey				mation.		
I certify that the information in Sections A, B, and C on this c						
Lunderstand that any false statement may be punishable by	fine or imprisonment under					
CERTIFIER'S NAME D. ALLEN TOSTER		LICE	NSE NUMBER R	LS #37930		
TITLE	COM	PANY NAME	-			
OWNER		tos		EYING INC.		
P.O. Box 4363	CIT/	CHIND VALL	STATE	AZ 86323		
SIGNATURE D. Pillen Fixtur	DATE	3/29/06	TELEPHO	ONE 928-636-9184		
The court four		2/01/04		100 000 1107		

iMPORTANT: In these spaces, copy the corresponding information from			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Su or Bldg, No.) OR P.O. ROUTE	AND BOX NO.		Policy Number
CITY 425 PITTSE, ELEH ROAD	STATE	ZIP CODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, O	B ARCHITECT CERTIFIC	CATION (CONTINUED	1
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance as			<u>'</u>
COMMENTS	genicompany, and (3) buildin	ig owner.	
The elevation of the lowest structure			
a double wide manufactured home on a t	olak stemwall.	The lowest	elevation of machino
or equipment is to an electrical pedistal.		~10~~	Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVE	Y NOT REQUIRED) FOR	R ZONE AO AND ZON	E A (WITHOUT BFE)
For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation	n Certificate is intended for us	se as supporting information	on for a LOMA or LOMR-F.
Section C must be completed.		partinount Distribution 4 (0.00 pt) Gallerina of Solidon State	
E1. Building Diagram Number _(Select the building diagram most similar to the building represents the building, provide a sketch or photograph.)	g for which this certificate is be	eing completed – see pagi	es 6 and 7. If no diagram accurately
E2. The top of the bottom floor (including basement or enclosure) of the building is	ft.(m) in.(cm) above or	r Delow (check one) th	ne hichest adiacent crade. (Use
natural grade, if available).	_ \- /_		gillatin grador (000
E3. For Building Diagrams 6-3 with openings (see page 7), the next higher floor or eleva-	ated floor (elevation b) of the c	building isft.(m)in.((cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form.	ft (m) in (am) I above or	r D bolow (about ana) th	an highast adingont grade. The
E4. The top of the platform of machinery and/or equipment servicing the building is natural grade, if available).	irr(irr)irr(crii) [_] above or	☐ pelow (check one) (t	ie riignest aujacent grade. (USE
E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor	or elevated in accordance with	th the community's floodpla	ain management ordinance?
Yes No Unknown. The local official must certify this information in S	Section G.		
SECTION F - PROPERTY OWNER (OR OV		The same of the sa	
The property owner or owner's authorized representative who completes Sections A. I			out a FEMA-issued or community-
issued BFE) or Zone AO must sign here. The statements in Sections A. B. C, and E a		knowledge.	
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAMI	Ē		
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPI	HONE
COMMENTS			

			Check here if attachments
SECTION G - COMMUNIT			. A D O / - EV O - i this E
The local official who is authorized by law or ordinance to administer the community's flo Certificate. Complete the applicable item(s) and sign below.	oddiain management ordinar	nce can complete Sections	A, B, C (or E), and G of this Elevation
G1. The information in Section C was taken from other documentation that has been	n siched and embossed by a	licensed surveyor, engine	er, or architect who is authorized by sta
or local law to certify elevation information. (Indicate the source and date of the			
G2. \square A community official completed Section E for a building located in Zone A (witho		unity-issued BFE) or Zone	AO.
G3. \square The following information (Items G4-G9) is provided for community floodplain m	anagement purposes.		
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	G6. DATE	E CERTIFICATE OF COMPL	IANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: New Construction Substantial Improveme	ont		
ar. This permit has been issued for: new Construction substantial improveme GB. Elevation of as-built lowest floor (including pasement) of the building is:	51 K	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		
State (September 1995) And Anthon (September 1995) Ant			
COMMUNITY NAME	TELEPHONE		
SIGNATURE	DATE		A C C C C C C C C C C C C C C C C C C C
COMMENTS			
			Check here if attachments