

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME DEAN OWEN	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5300 E Long Horn Rd	Company NAIC Number
CITY Chino Valley	STATE AZ
ZIP CODE	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN # 306-01-039C New 306-01-039E	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments area if necessary.) RESIDENTIAL	
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####")	HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <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		B3. STATE AZ	
B4. MAP AND PANEL NUMBER 04025C1375 04025C1345	B5. SUFFIX F	B6. FIRM INDEX DATE 6-6-01	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6-6-01	B8. FLOOD ZONES A	B9. BASE FLOOD ELEVATION(S) 4723.92
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 type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe): MIN FFE per Aspen Creek					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" 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)

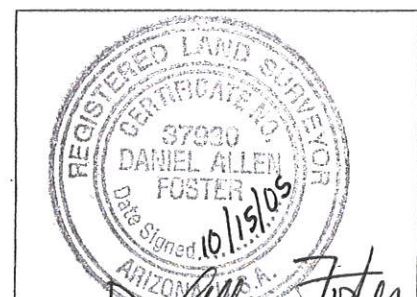
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

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 _____ Conversion/Comments _____
 Elevation reference mark used **SW COR LOT 1** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	4734	81	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	N/A		ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	N/A		ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	4734	41	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)	4733	91	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	4734	25	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	0		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	0		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 RLS # 37930
TITLE OWNER	COMPANY NAME FOSTCO SURVEYING
ADDRESS P.O. Box 4363	CITY CHINO VALLEY
SIGNATURE D. Allen Foster	DATE 10/15/05
	STATE AZ
	ZIP CODE 86323
	TELEPHONE 928-636-9184

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.			Policy Number
CITY	STATE	ZIP CODE	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

|_| 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. 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 5/23/05

ASSESSOR'S PARCEL NUMBER 306-01-039C "E"

SUBDIVISION NAME UNIT/PHASE AND LOT NUMBER A PORTION OF LOT 4A, HAYSTACK RANCHES

OWNER DEAN OWEN

SITUS ADDRESS _____

BASE BENCHMARK: Number NW COR. LOT #1 Elevation 125.30' (relative)

PROPERTY BENCHMARK ① NW PROP. COR (1/2" FOSTER) = 102.70', ⑥ BENCH = 100.85'

DESCRIPTION OF PROPERTY BENCHMARK ① = 1/2" FOSTER ± 0.20' ABOVE GROUND

⑥ = 1/2" REBAR ± 0.25' ABOVE GROUND

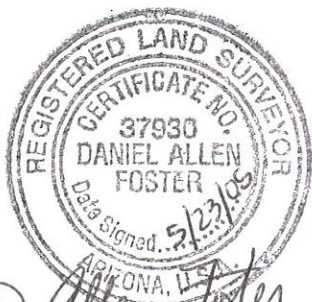
GROUND ELEVATIONS AT BUILDING SITE ② = 101.70', ③ = 100.00', ④ = 100.15', ⑤ = 101.80'
(Please provide a minimum of three (3) elevations points, representative of the site)

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

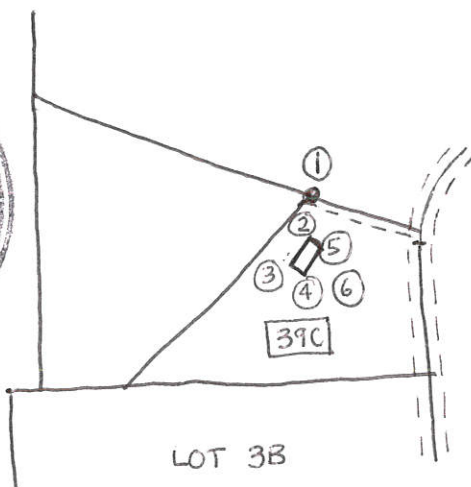
Remarks ELEVATION ARE BASED ON FLOOD STUDY FOR HAYSTACK RANCHES, BUILDING SITE LOCATIONS AS SHOWN ON PLOT PLAN.

D. Allen Foster

Signed _____
FOSTCO SURVEYING
Company Name _____
P.O. BOX 4363
Address _____
CHINO VALLEY, AZ 86323
Telephone (928) 636-9184



(Seal)



FOR YAVAPAI COUNTY FLOOD CONTROL DISTRICT USE:

Date: _____

Base Flood Elevation + 1.0' = Regulatory Elevation

* 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.