FENERAL EMERGENCY MANAGEMENT AGENC TONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

REPLACES ALL PREVIOUS EDITIONS

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION BUILDING OWNER'S NAME For Insurance Company Use: Policy Number HNNY TEVENS BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number STATE ZIP CODE PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN# 306-02-382G BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments area if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: (###"-##" or ##.###") SOURCE: [] GPS (Type): _| NAD 1927 |__| NAD 1983 L__ USGS Quad Map |__ Other: _ SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2 COUNTY NAME B3. STATE AP AND PANEL NUMBER **B6. FIRM INDEX B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) EFFECTIVE/REVISED DATE ZONES 04025 (1705 6-6-01 6-6-01 4762.0 AE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. X FIRM Community Determined Ul Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: |X | 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 | X | No SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: [__|Construction Drawings* |__|Building Under Construction* |X|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 ______ Conversion/Comments ______ Elevation reference mark used RM(&-A (489,59) Does the elevation reference mark used appear on the FIRM? ∠ Yes | No a) Top of bottom floor (including basement or enclosure) 85 ft.(m) □b) Top of next higher floor 45 ft.(m) * (V zones only) Embossed, and Date ft.(m) d) Attached garage (top of slab) e) Lowest elevation of machinery and/or equipment ft.(m) servicing the building (Describe in a Comments area.) ft.(m) DANIEL ALLEN f) Lowest adjacent (finished) grade (LAG) 27 ft.(m) FOSTER g) Highest adjacent (finished) grade (HAG) 78 ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 2 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 4363 ZIP CODE SIGNATURE DATE TELEPHONE FEMA Form 81-31, January 2003 SEE REVERSE SIDE FOR CONTINUATION

IMPORTANT: In Piese spaces, copy the			
	responding information for the control of the contr		For Insurance Company Use: Policy Number
CITY CHINO VALLEY	STATE	AZ 2 21P. CODE	Company NAIC Number
			ONTINUED)
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 C3-C is	TO THE LOWEST S	TRUCTURAL FRAME	OF A MANUFACTURED
	EXCEPT ON THE	SOUTH END OF	40ME, ELEV= 4763.18
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		ii tile Elevation Certificate is ii	mended for use as supporting
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 enctosure) of the building is _ _ ft.(m) _ lin.(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) lin.(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.			
		REPRESENTATIVE) CERTIF	
The property owner or owner's authorized representation			
(without a FEMA-issued or community-issued B	3FE) or Zone AO must sigr	n here. The statements in Sect	ions A, B, C, and E are correct to
the best of my knowledge. PROPERTY OWNER'S OR OWNER'S AUTHO	RIZED REPRESENTATIV	E'S NAME	
ADDRESS	CITY	STAT	E ZIP CODE
SIGNATURE	DATE	TELE	PHONE
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.			
	TE PERMIT ISSUED		OF COMPLIANCE/OCCUPANCY
G7. This permit has been issued for: New (Construction Substanti		
G8. Elevation of as-built lowest floor (including	basement) of the building i	s:	ft.(m)Datum:
G9. BFE or (in Zone AO) depth of flooding at the	e building site is:	Commence of the commence of th	ft.(m)Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	Magany 1, 2011 pp. marketing - Commission and Marketing Co. 100 (100 (100 (100 (100 (100 (100 (100
COMMENTS			
FEMA Form 81-31, January 2003			Check here if attachments
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