

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME DONNA LUCKOW		For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. P.O. Box 974		Company NAIC Number	
CITY CHINO VALLEY	STATE AZ	ZIP CODE 86323	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL 306-02-510C + 510D now 527			
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 040093		B2. COUNTY NAME Yavapai County		B3. STATE Arizona	
B4. MAP AND PANEL NUMBER 0402561705	B5. SUFFIX F	B6. FIRM INDEX DATE 6/6/01	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6/6/01	B8. FLOOD ZONES unshaded	B9. BASE FLOOD ELEVATION(S) 4792.3

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: _____

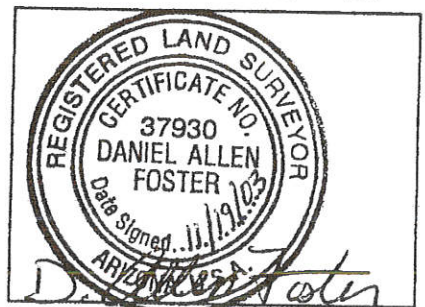
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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 1929** Conversion/Comments _____
 Elevation reference mark used **RM6-A (4898.9)** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	4803 . 27 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	4805 . 74 ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) *	4804 . 48 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)	4803 . 27 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	4804 . 60 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)



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 SURVEY DEPT HEAD	COMPANY NAME FOSTCO SURVEYING
ADDRESS P.O. Box 4363	CITY CHINO VALLEY
SIGNATURE D. Allen Foster	STATE AZ
DATE 11/19/03	ZIP CODE 86323
	TELEPHONE 928-636-0095

WARNING: In these spaces, copy the corresponding information from Section A.

MAILING STREET ADDRESS (Including Apt., Unit, S ind/or Bldg. No.) OR P.O. ROUTE AND BOX NO. P.O. BOX 974		For Insurance Company Use: Policy Number	
CITY CHINO VALLEY, AZ		STATE AZ	ZIP CODE 86323
		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, C3-A IS THE GROUND UNDERNEATH THE HOME, C3-B IS THE ELEVATION OF THE HOME FLOOR, HOME IS SET ON A BLOCK STEMWALL.

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.

- 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.)
- 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.)
- 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.
- 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.)
- 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.

- 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.)
- A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- The following information (Items G4-G9) is provided for community floodplain management purposes.

4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
------------------	------------------------	---

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

3. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____
 3. 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

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

BUILDING OWNER'S NAME: DONNA LUCKOW For Insurance Company Use:
 Policy Number: _____
 BUILDING STREET ADDRESS (including Apt. Unit, Suite, and/or Bldg. No.): P.O. Box 474 Company NAIC Number: _____
 CITY: CHINO VALLEY STATE: AZ ZIP CODE: 86323
 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): PARCEL 306-02-510C 510D
 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments area if necessary.): RESIDENTIAL
 LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): _____
 (##-##-###.### or ###.###) NAD 1927 NAD 1983 USGS Quad Map Other: _____

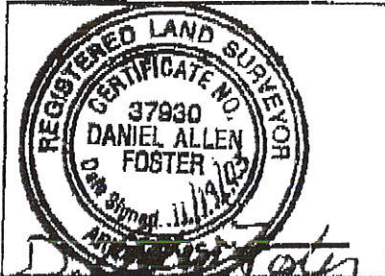
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIP COMMUNITY NAME & COMMUNITY NUMBER: YAVAPAI COUNTY #040093 B2. COUNTY NAME: YAVAPAI B3. STATE: AZ
 B4. MAP PANEL NUMBER: 402C1705 B5. SUFFIX: F B6. FIRM INDEX DATE: 6-6-01 B7. FIRM PANEL EFFECTIVE/REVISED DATE: 6-6-01 B8. FLOOD ZONES: UNSHADDED B9. BASE FLOOD ELEVATION(S): 4792.3

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 IS 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
 New Elevation Certificate will be required when construction of the building is complete.
 C2. Building Diagram Number: B (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. Elevation - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V6 (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 1929 Conversion/Comments: _____
 Elevation reference mark used: RMG-A (4803) Does the elevation reference mark used appear on the FIRM? Yes No
 a) Top of bottom floor (including basement or enclosure) 4803.27 ft.(m)
 b) Top of next higher floor 4805.74 ft.(m)
 c) Bottom of lowest horizontal structural member (V zones only) 4804.46 ft.(m)
 d) Attached garage (top of slab) N/A ft.(m)
 e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) N/A ft.(m)
 f) Lowest adjacent (finished) grade (LAG) 4803.27 ft.(m)
 g) Highest adjacent (finished) grade (HAG) 4804.60 ft.(m)
 h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0
 i) Total area of all permanent openings (flood vents) in C3.h 0 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: D. ALLEN FOSTER LICENSE NUMBER: R.L.S. #37930
 TITLE: SURVEY DEPT HEAD COMPANY NAME: FOSTCO SURVEYING
 ADDRESS: P.O. Box 4363 CITY: CHINO VALLEY STATE: AZ ZIP CODE: _____
 SIGNATURE: D. Allen Foster DATE: 11/19/03 TELEPHONE: 928-636-0095

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.)	P.O. ROUTE AND BOX NO.	For Insurance Company Use:	
CITY	STATE	Policy Number	Company NAIC Number

BUILDING ADDRESS: P.O. BOX 974
 CITY: CHINO VALLEY, AZ STATE: AZ ZIP CODE: 86323

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. C3-A IS THE GROUND UNDERneath THE HOME. C3-B IS THE ELEVATION OF THE 1ST FLOOR HOME IS SET ON A BLOCK STEMWALL.

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. 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. 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 Section 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 (for 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