FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7. **SECTION A - PROPERTY OWNER INFORMATION** For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number hurchill, James E and Margaret M BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 3980 N Gamble Ridge Dr ZIP CODE A2 86323 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN # 306-07-300

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: | | GPS (Type): (##° - ##' - ##.##" or ##.####") NAD 1927 | NAD 1983 **USGS Quad Map** SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** B3. STATE 040093 avapai County lavapai Arizona **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER DATE EFFECTIVE/REVISED DATE un shaded (Zone AO, use depth of flooding) 04025C 1340 6/6/01 6/6/01 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. __ FIRM 1 FIS Profile Community Determined Other (Describe): MFFE = 4644.93 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 Designation Date: 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 ___ (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. Conversion/Comments Elevation reference mark used Does the elevation reference mark used appear on the FIRM? a) Top of bottom floor (including basement or enclosure) ☐ b) Top of next higher floor ft.(m) c) Bottom of lowest horizontal structural member (V zones only) ft.(m) d) Attached garage (top of slab) ft.(m) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) ft.(m) f) Lowest adjacent (finished) grade (LAG) ft.(m) ☐ g) Highest adjacent (finished) grade (HAG) ft.(m) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

____ sq. in. (sq. cm)

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 b	by fine or imprisonment under 18 U.S. Code, Section 1001.		
CERTIFIER'S NAME	LICENCE NUMBER		
Mark E. Evans	33985		
TITLE	COMPANY NAME		
President	M.E. Evans & Associates Inc.		
ADDRESS H25 Industrial Drive	CITY STATE ZIP CODE		
SIGNATURE	DATE TELEPHONE		
	04-08-04 928-636-0102		

i) Total area of all permanent openings (flood vents) in C3.h

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	
3980 N Gamble Rid	SE Dr STATE	ZIP CODE	Company NAIC Number	
Chino Valley	AZ	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 The constructed Finish Floor elevation is 0.93 feet above the minimum finish floor elevation				
revised to H644.00 per M.E. Evans + Associates letter dated 2-12-03. A swale was construct				
to direct water away from this home				
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 E5. If the Elevation Certificate is intended for use as supporting				
information for a LOMA or LOMR-F, Section C must be completed.				
	(Select the building diagram most similar		ertificate is being completed -	
	ram accurately represents the building, provi cluding basement or enclosure) of the buildin		(aux) Jaharra and Jhalarr	
	ent grade. (Use natural grade, if available.)	g is it. (iii) iii. ((cm) [above or [below	
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. 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.				
The state of the s	F - PROPERTY OWNER (OR OWNER'S I		The state of the s	
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	S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	CITY	CTATE	710 0005	
	CITY	STATE	ZIP CODE	
SIGNATURE	DATE	TELEPHO	DNE	
COMMENTS				
			Check here if attachments	
	SECTION G - COMMUNITY INFORM	IATION (OPTIONAL)	Officer field if attachments	
The local official who is authorized l	by law or ordinance to administer the commu	nity's floodolain 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	C was taken from other documentation that I	nas been signed and embosse	ed 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 BFF) or				
Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes.				
G4. PERMIT NUMBER		<u> </u>		
G4. FERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF C	COMPLIANCE/OCCUPANCY	
G7. This permit has been issued for	: _ New Construction Substantia	I Improvement		
G8. Elevation of as-built lowest floor	(including basement) of the building is:	200 T 100 C 100 T 100 C	ft. (m) Datum:	
G9. BFE or (in Zone AO) depth of flo	ooding at the building site is:		ft. (m) Datum:	
LOCAL OFFICIAL'S NAME	TITL	F		
COMMUNITY NAME TELEPHONE				
SIGNATURE DATE				
COMMENTS				
www.				
			I Chock hore if attachment	
			Check here if attachments	