FFPERAL EMERGENCY MANAGEMENT AGENCY **ATIONAL FLOOD INSURANCE PROGRA**

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 For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 2280 WAgave ZIP CODE STATE CITY AZ 8632 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 306-07-441 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: I GPS (Type): __ NAD 1983 (##° - ##' - ##.##" or ##.####°) NAD 1927 USGS Quad Map I | Other SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** B3. STATE ava pai County 040093 lavapa **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) B8. FLOOD zone(s) NUMBER EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) DATE 16/01 16/01 0402501340 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIRM Other (Describe): Min FFE= | | Community Determined B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 INAVD 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 __ i __ (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 4552, 49 Does the elevation reference mark used appear on the FIRM? Yes □ a) Top of bottom floor (including basement or enclosure) ft.(m) D b) Top of next higher floor ft.(m) Date c) Bottom of lowest horizontal structural member (V zones only) ft.(m) d) Attached garage (top of slab) ft.(m) Emb e) Lowest elevation of machinery and/or equipment e Number, Signature, 33985 servicing the building (Describe in a Comments area.) ft.(m) MARK E f) Lowest adjacent (finished) grade (LAG) ft.(m) **EVANS** g) Highest adjacent (finished) grade (HAG) ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 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 Mark 985 COMPANY NAME Inc ADDRESS STATE ZIP CODE 86323 Williams Way Ste A SIGNATURE DATE TELEPHONE 10 928-636-0102

MINORTANT: In these spaces, copy the c young and the provided space of the provided the provided space of the provided space of the provided space of the provided space of the provid		The state of the s	Section A	For Insurance Company Use:
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) SOPP both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. SAMENTS ALCON 1.5 S.J., OP	MPORTANT: In these spaces, cop	sponding information from	OUTE AND BOX NC	
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rZone AQ and Zone A (without BFE), complete Items E1. through E5. If the Elevation Vehiclas the Committed 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 if t. (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 if the plant of the plant of membrinery and/or equipment servicing the building is if the plant of the plant of membrinery and/or equipment servicing the building is if the plant of the plant of membrinery and/or equipment servicing the building is if the plant of the plant of membrinery and/or equipment servicing the building is if the plant of the plant of membrinery and/or equipment servicing the building is if the plant of the building is	THE DIALO PLENT	TION INCORMATION (SURVEY NOT RE	EQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
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SECTION F - PROPERTY OWNER (OR OWNER S REPRESSANT AND COMMUNITY OF COMMUNITY INFORMATION (OPTIONAL) TELEPHONE SECTION G - COMMUNITY INFORMATION (OPTIONAL) 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 section C was taken from other documentation that has been signed and information (Items G4-G9) is provided for community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. 3.				
The property owner or owner's authorized representative who completes Sections A, B, C (trems C.S.1 and C.S. drin), representative who completes Sections A, B, C (trems C.S.1 and C.S. drin), representative statements in Sections A, B, C, and E are correct the best of my knowledge. ROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME IDDRESS CITY STATE IP CODE TELEPHONE COMMENTS L Check here if attact 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. 1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, elevation data in the Comments area below.) 2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. 3. 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 Title TITLE COMMUNITY NAME TELEPHONE DATE COMMUNITY NAME TELEPHONE DATE				
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actions A, B, C (or E), and G of this Elevation Certificate. Complete the application 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.) 2.		SECTION G - COMMUNITY INFOR	RMATION (OPTIONAL)	ti complete
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