

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		For Insurance Company Use:	
BUILDING OWNER'S NAME <i>Neal Klein Construction</i>		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <i>2275 W Agave Pl</i>		Company NAIC Number	
CITY <i></i>	STATE <i>AZ</i>	ZIP CODE <i>86323</i>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <i>APN 306-07-442</i>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments area if necessary.) <i>Residential</i>			
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 <i>Yavapai County 040093</i>		B2. COUNTY NAME <i>Yavapai</i>		B3. STATE <i>AZ</i>	
B4. MAP AND PANEL NUMBER <i>04025C 1340</i>	B5. SUFFIX <i>F</i>	B6. FIRM INDEX DATE <i>6-6-01</i>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <i>6-6-01</i>	B8. FLOOD ZONES <i>unshaded X</i>	B9. BASE FLOOD ELEVATION(S)

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): *MAP P.E. 4571.0*

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.

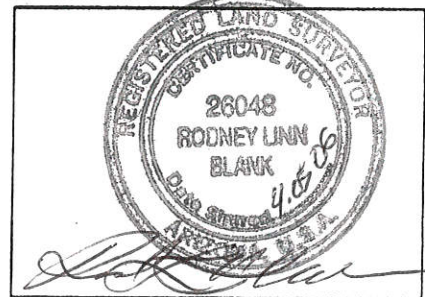
C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 SEE ATTACHED Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>4573.7</u>	<u>3</u>	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>NA</u>	<u> </u>	ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>NA</u>	<u> </u>	ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>4573.7</u>	<u>5</u>	ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	<u>4572</u>	<u>5</u>	ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>4572</u>	<u>5</u>	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>4572</u>	<u>5</u>	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u> </u>	<u> </u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	<u>NA</u>	<u> </u>	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 <i>RODNEY L. BLANK</i>		LICENSE NUMBER <i>ALS 26048</i>	
TITLE <i>ALS</i>		COMPANY NAME	
ADDRESS <i>207 EL CAMINO CORVO</i>	CITY <i>PRESCOTT</i>	STATE <i>AZ</i>	ZIP CODE <i>86301</i>
SIGNATURE <i>Rodney L. Blank</i>	DATE <i>9/05/06</i>	TELEPHONE <i>928-78-0636</i>	

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. <i>2275 W. HOGWATER CR.</i>			Policy Number
CITY <i>CHAND VALLEY</i>	STATE <i>AZ</i>	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

SEE ATTACHMENT

BY

RLS. RICHARD L. BLANK

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.
- 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

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.

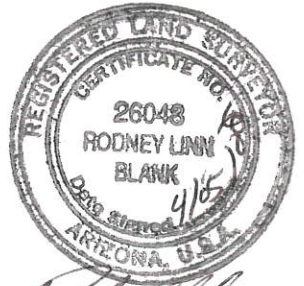
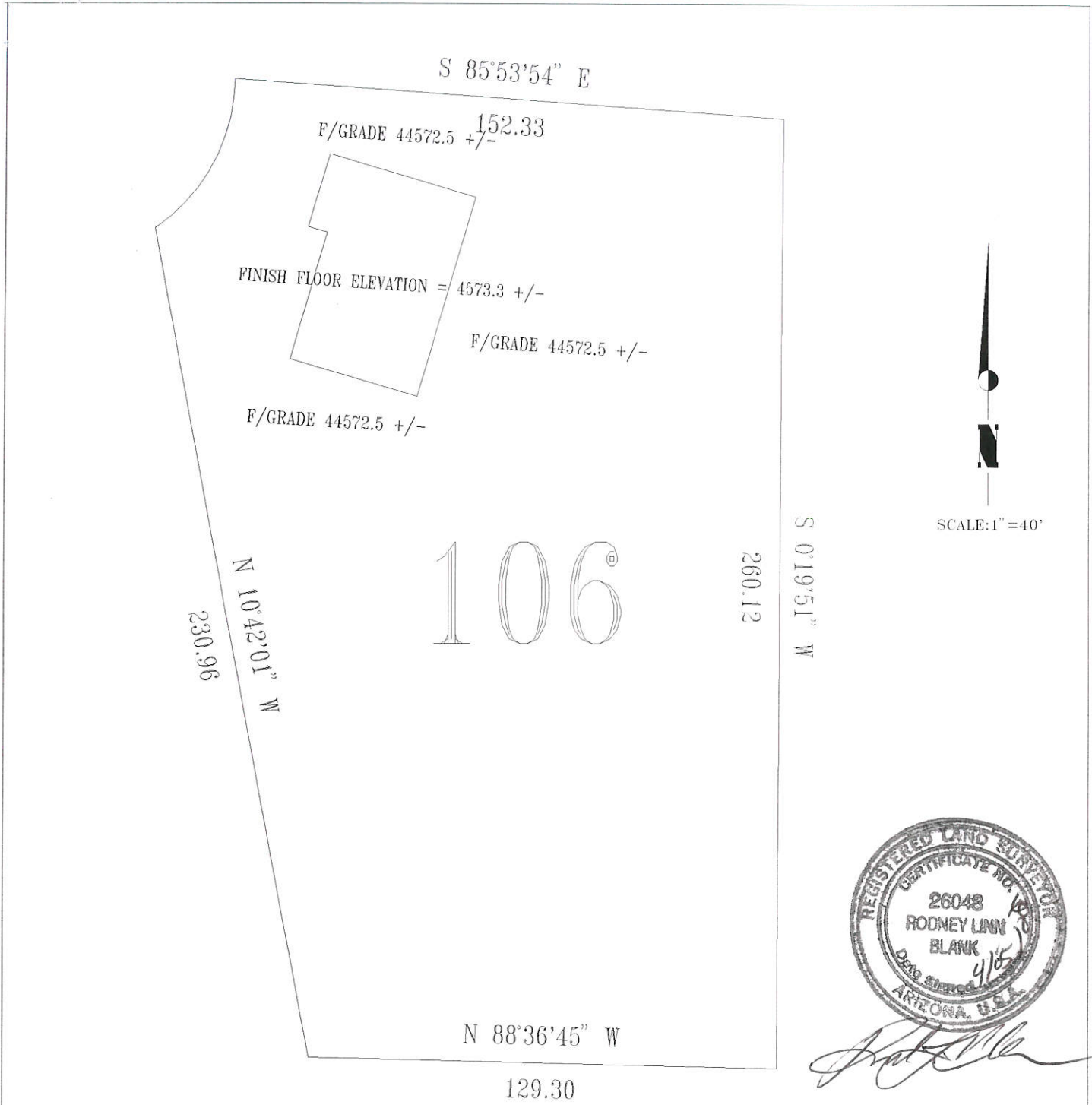
G4. PERMIT NUMBER _____	G5. DATE PERMIT ISSUED _____	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED _____
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) 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



[Handwritten Signature]

2275 W. AGAVE CIRCLE

NOTE: STRUCTURE IS STICK FRAME, NEW CONSTRUCTION ON CONCRETE SLAB, MIN.F/F= 4571.00
 BENCHMARK AS PER FINAL PLAT OF QUAIL RIDGE #2, UNIT #2 , RECORD 50 & PAGE 02 OF MAPS. Y.C.R.O.
 RM 55 ELEVATION 4552.49, 1/2" REBAR CAP, SEC. 33, T17N, R2W.

CONTRACT SURVEYING, INC. ROD BLANK R. L. S. 707 EL CAMINO CORVO LN. PRESCOTT, ARIZONA 86301 928-778-0636	(FEMA) ELEVATION CERIFICATE OF FINISH FLOOR QUAIL RIDGE PHASE 2 UNIT #2, LOT #106 YAVAPAI, COUNTY ARIZONA		
SCALE:1"=40'	DATE:4-05-06	FILE #:QUAIL106	JOB #:
FOR: NEAL KLIEN DEVELOPMENT		PARCEL #:306-07-442	

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 (928) 771-3427 Office - Prescott
10 S. 6th St., Cottonwood, AZ 86326 (928) 639-8151 FAX (928) 639-8118 Cottonwood

DATE: 4/05/06

ASSESSOR'S PARCEL NUMBER 306-07-442

SUBDIVISION NAME UNIT PHASE AND LOT NUMBER QUAIL RIDGE #2 UNIT 1, LOT #106

OWNER NEAL KLEIN DEVELOPMENT, INC.

SITE'S ADDRESS 2245 HIGHWAY 69 STE #3

BASE BENCHMARK Number RM55 Elevation 4552.49

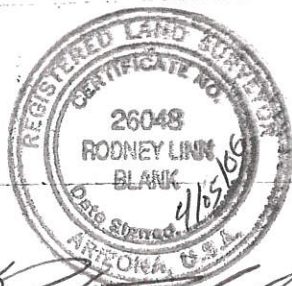
PROPERTY BENCHMARK QUAIL RIDGE PHASE #2 UNIT #1

DESCRIPTION OF PROPERTY BENCHMARK FEMA RM55 ELEVATION 4552.49 BEING 1/2" REBAR WITH ALUMINUM CAP STAMP "AMC CVB 601"

GROUND ELEVATIONS AT BUILDING SITE 4572.5 +/-

(Please provide a minimum of three (3) elevation points representative of the site.)

Sketch of Lot _____ Remarks _____
(include location of property benchmarks and building site elevations)



[Handwritten Signature]

Signed _____

CONTRACT SURVEYING, INC.

Address _____

707 E CAMINO CORVO LANE

PRESCOTT, AZ 86301

Telephone _____

(928)-778-0636

FOR YAVAPAI COUNTY FLOOD CONTROL DISTRICT USE:

Base Flood Elevation _____

Regulator Elevation _____

• ELEVATION DETERMINATIONS ARE BASED ON BEST AVAILABLE DATA WITH THE FOLLOWING ELEVATIONS ARE SUBJECT TO CHANGE WHEN NEW OR REVISOR FLOOD STUDIES ARE SUPPLIED TO THE DISTRICT