ELEVAIIUN CEMIITICALE

O.M.B. No. 3067-0077 Expires July 31, 1999

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE F GRAM

ATTENTION: Use of this certificate was not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR). You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form.

Instructions for completing this form can be found on the following pages.

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SECTION A PRO	FOR INSURANCE COMPANY USE							
BUILDING OWNER'S NAME Devey E. B	POLICY NUMBER							
STREET ADDRESS (Including Apt., Unit, State and/or Bldg. N	COMPANY NAIC NUMBER							
OTHER DESCRIPTION (Lot and Block Numbers. etc.) Valley High Indian Meadows Lot 42 N								
Dewey			STATE	ZIP CODE 56327				
SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
Provide the following from the proper FIRM (See Instructions):								
1. COMMUNITY NUMBER 2. PANEL NUMBER 1280	3. SUFFIX	4. DATE OF FIRM INDEX 9-20-96	5. FIRM ZONE	6. BASE FLOOD ELEVATION (in AO Zones, use depth)				
7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): NGVD '29 Other (describe on back) 8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE: Feet NGVD (or other FIRM datum—see Section B, Item 7).								
SECTION	NC BUILDIN	IG ELEVATION INFORM	ATION	The special control of the control o				
 Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level								
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)								
6. The elevation of the lowest grade immediately adjacent to the building is: feet NGVD (or other FIRM datum-see Section B, Item 7).								
SECTION D COMMUNITY INFORMATION								
1. If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is:								

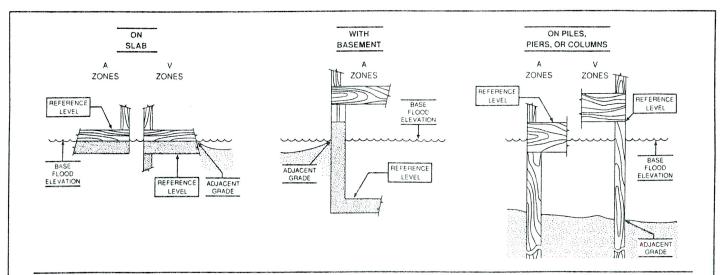
SECTION E CERTIFICATION

This certification is to be signed by a land surveyor, engineer, or architect who is authorized by state or local law to certify elevation information when the elevation information for Zones A1–A30, AE, AH, A (with BFE),V1–V30,VE, and V (with BFE) is required. Community officials who are authorized by local law or ordinance to provide floodplain management information, may also sign the certification. In the case of Zones AO and A (without a FEMA or community issued BFE), a building official, a property owner, or an owner's representative may also sign the certification.

Reference level diagrams 6, 7 and 8 - Distinguishing Features—If the certifier is unable to certify to breakaway/non-breakaway wall, enclosure size, location of servicing equipment, area use, wall openings, or unfinished area Feature(s), then list the Feature(s) not included in the certification under Comments below. The diagram number, Section C, Item 1, must still be entered.

I certify that the information in Sections 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 (or Affix Seal)							
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		COMPANY NAME							
Owe	ner Box 1194								
ADDRESS		CITY		STATE	ZIP				
HC 61	Box 1194	Devey	12	- 86327					
SIGNATURE	1	7	DATE	PHONE	to a distribution of the second and				
Copies should be m	ade of this Certificate for: 1	I) community official, 2) in	nsurance agent/compa	any, and 3) building	owner.				
COMMENTS:	House				and when a second of the shift will be of the shift of th				
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The diagrams above illustrate the points at which the elevations should be measured in A Zones and V Zones.

Elevations for all A Zones should be measured at the top of the reference level floor.

Elevations for all V Zones should be measured at the bottom of the lowest horizontal structural member.