U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official. (2) insurance agent/company, and (3) building owner.

				(1) 001111110111	.y omolai, (2)	modranoo	- agont compan	y, and (b) ballaring owner.
SECTION A - PROPERTY INFORMATION					ANCE COMPANY USE			
A1. Building Owner's Name PROVISION FUNDING INC.				Policy Numb	per:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2896 N. VERDE RIVER DRIVE					Company N	AIC Number:		
	VEK DRIVE						L	
City CAMP VERDE	*			State Arizona			ZIP Code 86322	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN:403-08-003, LOT 2, VERDE RIVER ESTATES, PLAT 1							
A4. Building Use (e	e.g., Resider	ntial, Non-Residential,	Addition,	, Accessory,	etc.) RES	IDENTIAL	9	
	-	4° 36' 43.30" N						927 🕱 NAD 1983
		hs of the building if the	e Certific	ate is being ι	sed to obtair	n flood insu	rance.	v
A7. Building Diagra								
_		pace or enclosure(s):						
(95) #		space or enclosure(s)	-	1				
1400		ood openings in the cra				0 foot abov	e adjacent gra	ide <u>1</u>
		penings in A8.b		384.00 sq in	l			
d) Engineered	flood openir	ngs? 🗌 Yes 🗵 N	No					
A9. For a building with an attached garage:								
a) Square footage of attached garageN/A sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net area of flood openings in A9.b N/A sq in								
d) Engineered flood openings?								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Communi		Community Number		B2. County				B3. State
Town of Camp Verde #040131 Yavapai, Independent City Arizona								
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	В9.	Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
04025C2157	Н	08-24-2021	10-16-2		AE	313	1.8	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile 🗵 FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Types X No								
Designation Date: CBRS OPA								

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o 2896 N. VERDE RIVER DRIVE	Policy Number:				
CityStateZIP CodeCAMP VERDEArizona86322			Company NAIC Number		
SECTION C – BUILDING E	LEVATION INFORMAT	ION (SURVEY RE	EQUIRED)		
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. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: ERM 107A Vertical Datum: 3130.4' (NAVD 88)					
Indicate elevation datum used for the elevations in					
☐ NGVD 1929 🗷 NAVD 1988 ☐ Other					
Datum used for building elevations must be the sai		FE.	Charlette management and		
a) Top of bottom floor (including basement, crawls	enace or enclosure floor)	.3	Check the measurement used.		
b) Top of the next higher floor	space, or enclosure floor)	1	1129.8 × feet meters		
c) Bottom of the lowest horizontal structural memb	per (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)	per (v Zones only)		N/A feet meters		
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co	ervicing the building mments)	3	3129.8 🗷 feet 🗌 meters		
f) Lowest adjacent (finished) grade next to buildir		3	8127.1 🗙 feet 🗌 meters		
g) Highest adjacent (finished) grade next to building		3	8127.3 × feet meters		
h) Lowest adjacent grade at lowest elevation of de structural support		3	3127.3 🗷 feet 🗌 meters		
SECTION D – SURVEYOR	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 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.					
Were latitude and longitude in Section A provided by a			⊠ Check here if attachments.		
Certifier's Name SHANE M. NAUERT, RLS	License Number 48860		TANO		
Title REGISTERED LAND SURVEYOR			FICATE		
Company Name			48860 9		
HERITAGE LAND SURVEY AND MAPPING INC.			SHANE M. NAUERT 1		
Address 738 S, PARKS DRIVE			Herco:		
City CAMP VERDE	State Arizona	ZIP Code 86322	Spires 12/3/1903		
Signature	Date 08-18-2022	Telephone (928) 567-9170	Ext.		
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable) Lowest Elevation of Machinery is a Water heater with outside access door at rear of Structure. Elevation=3129.80' Lowest adjacent grade at Lowest Elevation of deck or stairs is the centerline/ bottom of front porch stairs. Elevation=3127.30'					

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, a 2896 N. VERDE RIVER DRIVE	and/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:				
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number				
SECTION E – BUILDING E FOR ZO	ELEVATION INFORM NE AO AND ZONE A	ATION (SURVEY NO (WITHOUT BFE)	T REQUIRED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement,	E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).						
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet met					
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent floor	d openings provided in S		State of the State				
the next higher floor (elevation C2.b in the diagrams) of the building is		feet _ met					
E3. Attached garage (top of slab) is			ers above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet _ met	ers above or below the HAG.				
E5. 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 O	WNER (OR OWNER'S	REPRESENTATIVE)	CERTIFICATION				
The property owner or owner's authorized represents community-issued BFE) or Zone AO must sign here.	ative who completes Se The statements in Sec	ctions A, B, and E for 2 tions A, B, and E are c	Zone A (without a FEMA-issued or prect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative	ve's Name						
Address	City	5	State ZIP Code				
Signature	Date	7	elephone				
Comments							
			Check here if attachments.				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 2896 N. VERDE RIVER DRIVE	uite, and/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Complete the ap	mmunity's floodplain man plicable item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was takengineer, or architect who is authorized that in the Comments area below.)			
G2. A community official completed Sect or Zone AO.	ion E for a building located in	Zone A (without a FEM/	A-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for commur	nity floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Subs	stantial Improvement	
G8. Elevation of as-built lowest floor (includin of the building:	g basement)		meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title	9	
Community Name	Tele	ephone	
Signature	Date	е	
Comments (including type of equipment and lo	cation, per C2(e), if applicable	e)	
			☐ Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., L 2896 N. VERDE RIVER DRIVE	Policy Number:		
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption SOUTH FACE

Clear Photo One



Photo Two

Photo Two Caption WEST FACE

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Ul 2896 N. VERDE RIVER DRIVE	Policy Number:		
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption NORTH FACE, REAR

Clear Photo Three

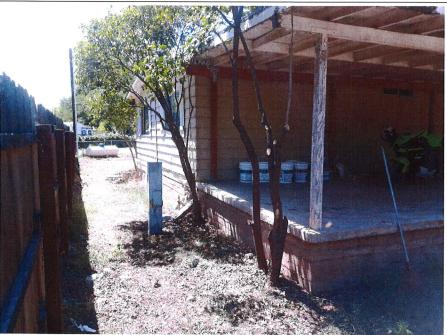


Photo Four

Photo Four Caption EAST FACE

Clear Photo Four