## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: July 31, 2015

National Flood Insurance Program	DRTANT: Foll	low the instructions on page	es 1–9.	Expiration Date: July 31, 2015
SE	CTION A -	PROPERTY INFORMAT	FION F	OR INSURANCE COMPANY USE
1. Building Owner's Name ROBERT & LINDA SULLIVAN			p	olicy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 4525 CAUGHRAN ROAD				ompany NAIC Number:
City CAMP VERDE State AZ Z			<sup>P Code</sup> 86322	
A3. Property Description (Lot and Block Numbers, Tax Pa LOT 6 RIVER RANCH ESTATES APN 403-1			F MAPS, PAGE 47	7, YCR
A4. Building Use (e.g., Residential, Non-Residential, Addi				
A5. Latitude/Longitude: Lat. N34°38'13.41" A6. Attach at least 2 photographs of the building if the C		W111°54'32.84		atum: 🗌 NAD 1927 🛛 NAD 1983
A7. Building Diagram Number 8	ertificate is		nsurance.	
A8. For a building with a crawlspace or enclosure(s):	0.47	A9. For a	building with an atta	
a) Square footage of crawlspace or enclosure(s)	212	Jq (t a) t	equare footage of atta	
<ul> <li>b) Number of permanent flood openings in the crawl or enclosure(s) within 1.0 foot above adjacent gra</li> </ul>	ade 4		lumber of permanent vithin 1.0 foot above a	flood openings in the attached garage
c) Total net area of flood openings in A8.b	412	20	otal net area of flood	· · · · · · · · · · · · · · · · · · ·
d)Engineered flood openings? 🗌 Yes 🛛 No		d) E	ingineered flood oper	nings? 🗌 Yes 🛛 No
	DOD INSU	RANCE RATE MAP (FIF	M) INFORMATION	
B1. NFIP Community Name & Community Number CAMP VERDE # 040131		B2. County Name YAVAPAL AN INDEPE		B3. State ARIZONA
B4. Map/Panel Number B5. Suffix B6. FIRM Ind	ex Date	B7. FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone
04025C1795 G 09/03/2	2010	Revised Date 09/03/2010	SHADED X	AO, use base flood depth) 3161.8
B10. Indicate the source of the Base Flood Elevation (BFE	/			
FIS Profile FIRM Community Determine	ed 🗌 Oth	ner/Source:	· · ·	·····
B11. Indicate elevation datum used for BFE in Item B9:		· · <b>·</b>	Other/Source:	
B12. Is the building located in a Coastal Barrier Resources	•		tected Area (OPA)?	🗌 Yes 🛛 No
Designation Date: / / C	BRS [			
SECTION C – BUILD	DING ELEV	ATION INFORMATION	SURVEY REQUIR	ED)
C1. Building elevations are based on: Construct *A new Elevation Certificate will be required when co	ion Drawing	s* 🗌 Building Under		ED)
<ul> <li>C1. Building elevations are based on: Construct *A new Elevation Certificate will be required when co</li> <li>C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, C2.a–h below according to the building diagram spece</li> </ul>	ion Drawing Instruction o V1–V30, V	s* Building Under f the building is complete. (with BFE), AR, AR/A, AR/AI A7. In Puerto Rico only, en	Construction*	Finished Construction
<ul> <li>C1. Building elevations are based on: Construct *A new Elevation Certificate will be required when co</li> <li>C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, C2.a-h below according to the building diagram spect Benchmark Utilized: RM 97A</li> </ul>	ion Drawings Instruction o , V1–V30, V sified in Item	s* Building Under f the building is complete. (with BFE), AR, AR/A, AR/AI A7. In Puerto Rico only, en 	Construction*	Finished Construction , AR/AO. Complete Items
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FEMA	Form	086	0-33	(Revised	7/12	١

Signature

See reverse side for continuation.

Telephone (928) 443-1900

Date 12/11/2014

Expires Replaces all previous editions.

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## **ELEVATION CERTIFICATE**, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COM	VPANY USE
Building Street Address (including Apt., Unit, S 4525 CAUGHRAN ROAD	uite, and/or Bldg. No.) or PO. Ro	* ***		
City CAMP VERDE	State AZ	ZIP Code 86322	Company NAIC Number:	
SECTION D – S	URVEYOR, ENGINEER, OR	ARCHITECT (	ERTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certificate for	or $(1)$ community official, $(2)$ insur	ance agent/cor	pany, and (3) building owner.	
Comments REGARDING C2. e) THE LOV	NEST ELEVATION OF MAC	HINERY OR I	EQUIPMENT SERVICING THE BUILD	ING IS THE A/C
UNIT LOCATED ON THE SO	UTH SIDE OF THE DWELLII WLSPACE). THE GARAGE	NG. REGARI	DING A9. THE GARAGE IS A CONCRE D OPENINGS WITHIN OR LESS THAI	ETE SLAB ON
Signature	~~~>	Date 12/11	/2014	
SECTION E BUILDING ELEVATION	N INFORMATION (SURVEY		D) FOR ZONE AO AND ZONE A (WIT	THOUT BFE)
For Zones AO and A (without BFE), complete It For Items E1–E4, use natural grade, if available	ems E1–E5. If the Certificate is in e. Check the measurement used	ntended to supp . In Puerto Rico	ort a LOMA or LOMR-F request, complete Se only, enter meters.	ections A, B,and C.
E1. Provide elevation information for the follow grade (HAG) and the lowest adjacent grade	e (LAG).			
<ul> <li>a) Top of bottom floor (including basement</li> <li>b) Top of bottom floor (including basement</li> </ul>		•	_	
<ul> <li>b) Top of bottom floor (including basement</li> <li>E2. For Building Diagrams 6–9 with permanent</li> </ul>	, , ,	ion A Items 8 a		SCIOW UIE LAG.
the next higher floor (elevation C2.b in the		i	$\_$ [] feet [] meters [] above or []	below the HAG.
E3. Attached garage (top of slab) is		_ ·	feet _ meters _ above or _	
E4. Top of platform of machinery and/or equip	ment servicing the building is	,		below the HAG.
E5. Zone AO only: If no flood depth number is	8 8		in accordance with the community's floodpla	
SECTION F - P	ROPERTY OWNER (OR OW	NER'S REPRI	SENTATIVE) CERTIFICATION	
The property owner or owner's authorized reprezented and the statements in Section 2010 The statements in Section 2010 Sec				nity-issued BFE) or
Property Owner or Owner's Authorized Represe	entative's Name			
Address		City	State ZIP Code	
Signature		Date	Telephone	
Comments				
		*****	Check her	re if attachments.
	SECTION G - COMMUNITY	INFORMATIC	N (OPTIONAL)	
The local official who is authorized by law or ord G of this Elevation Certificate. Complete the ap				
	evation information. (Indicate th	e source and da	ate of the elevation data in the Comments a	area below.)
G2. G2. A community official completed Section G3. The following information (Items G4-				ne AO.
G4. Permit Number	G5. Date Permit Issued	G	6. Date Certificate Of Compliance/Occupand	cy Issued
G7. This permit has been issued for: NG8. Elevation of as-built lowest floor (includin G9. BFE or (in Zone AO) depth of flooding at t	g basement) of the building:	tial Improvemen	t feet meters Datum feet meters Datum	
G10.Community's design flood elevation:	-		feet meters Datum	
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments				••••••••••••••••••••••••••••••••••••••
• • • • · · · · · · · · · · · · · · · ·			999 1999 1994 1997 - 19	·····
	en a de la companya d		No NA INTERNA DE LA COMPANISACIÓN DE LA	
			_	re if attachments.

FEMA Form 086-0-33 (Revised 7/12)

Replaces all previous editions.

## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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 PC	D. Route and Box No.	Policy Number:
City	State	ZIP Code	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.



FRONT VIEW 12/04/2014

## **BUILDING PHOTOGRAPHS**

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., L	nit, Suite, and/or Bldg. No.) or Po	0. Route and Box No.	Policy Number:
City	State	ZIP Code	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.



SIDE VIEW 12/04/2014