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.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE	
A1. Building Owner's Name					Policy Num	ber:	
Michael &Laura Sp							
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2610 N. Thomas Paine Circle 					Company N	NAIC Number:	
	aine Circle				*************************************		
City Camp Verde						ZIP Code 86322	
A3. Property Desc APN# 403-20-015		nd Block Numbers, Ta	ax Parce	l Number, Le	gal Description, et	C.)	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residentia	al	
		4°36′31.90″N		11°53'45.80"'	***************************************	-	1927 🗶 NAD 1983
		hs of the building if the	e Certific	ate is being u	used to obtain floo	d insurance.	
A7. Building Diagr		(MidNelder and Anthropology and Anthropo					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		-	N/A sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosur	e(s) within 1.0 foo	t above adjacent gra	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	1		
d) Engineered	l flood openir	ngs? Yes 🗆 Yes	No				
A9. For a building v	A9. For a building with an attached garage:						
a) Square foot	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 ar	ea of flood o	penings in A9.b		N/A sq	in		
d) Engineered	d) Engineered flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number Town of Camp Verde #040131				B2. County Name Yavapai, Independent City			B3. State Arizona
P4 Man/Danal	DC 0.46	DO EIDMAL	T	<u></u>	T =	T	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
04025C2157	Н	8-24-2021	Rev 10-16-2	vised Date 2015	AE	3140.0	
P10 Indicate the course of the Day 51 of 5							
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)? Yes X No							
Designation Date: CBRS OPA							
	-						

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE			
2610 N. Thomas Paine Circle				Policy Number:		
City Cam	1.7		P Code 3322	Company NAIC Number		
	SECTION C – BUILDING E	ELEVATION INFORM	ATION (SURVEY RE	EQUIRED)		
C1.	Building elevations are based on: Construct *A new Elevation Certificate will be required when		uilding Under Constru	uction* 🗵 Finished Construction		
C2.	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: NGS-W30 PID-ES0464 Vertical Datum: 3294.13' NAVD88					
	Indicate elevation datum used for the elevations in	n items a) through h) be	low.			
	☐ NGVD 1929 ☒ NAVD 1988 ☐ Other Datum used for building elevations must be the sa		BFE.	Check the measurement used.		
	a) Top of bottom floor (including basement, crawl	Ispace, or enclosure floo	or)3	3150.1 X feet meters		
	b) Top of the next higher floor			N/A feet meters		
	c) Bottom of the lowest horizontal structural mem	iber (V Zones only)		N/A feet meters		
	d) Attached garage (top of slab)			N/A feet meters		
	e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co	ervicing the building omments)	3	8148.3 X feet meters		
	f) Lowest adjacent (finished) grade next to buildi	ng (LAG)	3	3141.2 X feet meters		
	g) Highest adjacent (finished) grade next to build	ing (HAG)	3	3148.5 X feet meters		
	h) Lowest adjacent grade at lowest elevation of d structural support	leck or stairs, including	3	8148.5 X feet meters		
	SECTION D – SURVEYO	R, ENGINEER, OR A	RCHITECT CERTIF	ICATION		
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.						
	e latitude and longitude in Section A provided by a	·	? XYes No	Check here if attachments.		
1000000	ifier's Name ne M. Nauert, RLS	License Number RLS 48860		111		
Title		7120 40000		- LAND SUPERING		
Company Name Heritage Land Surveying and Mapping Inc.				48860 0 SHANE M.		
Add 738	ress S. Parks Drive			NAUERT SOMED SOMED		
City Can	p Verde	State Arizona	ZIP Code 86322	CHOITES 12 12 12023		
Sign	ature	Date	Telephone	Ext.		
Conv	vall pages of this Elevation Certificate and all attache	09-03-2021	(928) 567-9170	agast/company and (2) building assuran		
Com Low Low	ments (including type of equipment and location, pest Elevation of Machinery is AC Unit Pad on Westest Elevation of Deck or Stairs is Natural ground at Structure is a Site Built home.	per C2(e), if applicable) t Side. Elevation=3148.3	35'			

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Building Street Address (including Apt., Unit, Suite, a 2610 N. Thomas Paine Circle	Policy Number:					
City		ZIP Code	Company NAIC Number			
Camp Verde		86322	L			
SECTION E – BUILDING I FOR ZO	ELEVATION INFORMA NE AO AND ZONE A		OT 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.						
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).a) Top of bottom floor (including basement,						
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet me	eters above or below the HAG.			
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent floor	I openings provided in S		eters above or below the LAG.			
the next higher floor (elevation C2.b in the diagrams) of the building is			eters above or below the HAG.			
E3. Attached garage (top of slab) is		feet me	eters above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		feet me	eters above or below the HAG.			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	able, is the top of the bot	om floor elevated in The local official mu	accordance with the community's ust certify this information in Section G.			
SECTION F - PROPERTY O	WNER (OR OWNER'S F	EPRESENTATIVE)	CERTIFICATION			
SECTION F PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.						
Property Owner or Owner's Authorized Representation	ve's Name					
Address	City		State ZIP Code			
Signature	Date		Telephone			
Comments						
			Check here if attachments.			

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City Camp Verde	State Arizona	ZIP Code 86322	Company NAIC Number			
SECTIO	ON G - COMMUNITY INFOR	RMATION (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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section or Zone AO.						
G3. The following information (Items G4-	G10) is provided for commu	ınity 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 Sub	stantial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	ı basement)	feet	meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet	meters Datum			
G10. Community's design flood elevation:	***************************************	feet	meters Datum			
Local Official's Name	Title	е				
Community Name	Tel	ephone				
Signature	Dat	ie				
Comments (including type of equipment and location, per C2(e), if applicable)						
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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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 Caption West Face

Clear Photo One



Photo Two Caption South Face

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy to	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt. 2610 N. Thomas Paine Circle	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.

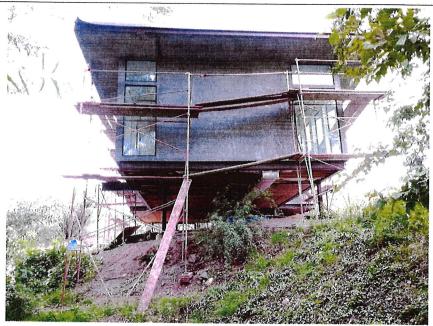


Photo Three

Photo Three Caption East face

Clear Photo Three

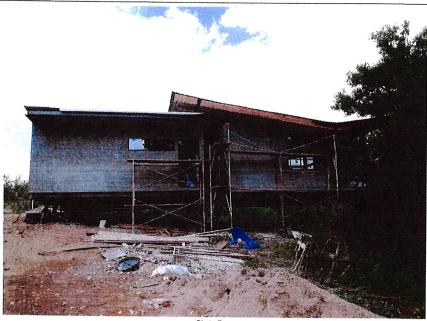


Photo Four

Photo Four Caption North Face

Clear Photo Four