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 INSURANCE COMPANY USE			
A1. Building Owner's Name Policy Number: HELENE JOHNSTONE				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou Box No. 3751 S PEARCE LANE	te and Company NAIC Number:			
City State CAMP VERDE Arizona	ZIP Code 86322			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description 404-11-015U	otion, etc.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) R	SIDENTIAL			
A5. Latitude/Longitude: Lat. 34°30'51.4" N Long. 111°49'25.5" W H	orizontal Datum: ☐ NAD 1927 区 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obt	ain flood insurance.			
A7. Building Diagram Number6_				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) 1620.00 se	ş ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within	1.0 foot above adjacent grade N/A			
c) Total net area of flood openings in A8.b sq in				
d) Engineered flood openings? ☐ Yes ⊠ 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 ab	ove 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 (FIR	M) INFORMATION			
B1. NFIP Community Name & Community Number B2. County Name	B3. State			
YAVAPAI COUNTY #040093 YAVAPAI, UNINCORI	PORATED AREA Arizona			
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Zone(s) Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)			
04025C2189 H 08-24-2021 10-16-2015 AE	3043.2			
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 NAVD 1988 Other/Source:				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or C	therwise Protected Area (OPA)? ☐ Yes ☒ No			
Designation Date:	, , , , , , , , , , , , , , , , , , , ,			

Building Street Address (Copy the	e corresponding information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., L 3751 S PEARCE LANE	Jnit, Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City CAMP VERDE	*	ZIP Code	Company NAIC Number
		86322	
	- BUILDING ELEVATION INFORM	MATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be C2. Elevations – Zones A1–A30, AE, A Complete Items C2.a–h below acco Benchmark Utilized: W2 (NGS BM Indicate elevation datum used for tr NGVD 1929 ☒ NAVD 1 Datum used for building elevations a) Top of bottom floor (including bat b) Top of the next higher floor c) Bottom of the lowest horizontal s d) Attached garage (top of slab) e) Lowest elevation of machinery o (Describe type of equipment and f) Lowest adjacent (finished) grade g) Highest adjacent (finished) grade	Construction Drawings* required when construction of the build. H, A (with BFE), VE, V1–V30, V (with bording to the building diagram specifically) Vertical Date of the elevations in items a) through h) building to the same as that used for the discontinuous be the same as that used for the discontinuous processes of the structural member (V Zones only) or equipment servicing the building I location in Comments) a next to building (LAG) a next to building (HAG)	Building Under Construilding is complete. h BFE), AR, AR/A, AR ed in Item A7. In Puer um: 3094.26 (NAVD88 elow. ne BFE. poor)	uction*
 h) Lowest adjacent grade at lowest structural support 	elevation of deck or stairs, including	3	042.8 feet meters
SECTION D	– SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFIC	
This certification is to be signed and seal I certify that the information on this Certifi statement may be punishable by fine or in	ed by a land surveyor, engineer, or a icate represents my best efforts to in mprisonment under 18 U.S. Code, Si	architect authorized by terpret the data availal ection 1001.	
Were latitude and longitude in Section A	provided by a licensed land surveyor	? ⊠Yes □No	
Certifier's Name CLINT GILLESPIE Title	License Number 50106		ED LANDS
REGISTERED LAND SURVEYOR Company Name HERITAGE LAND SURVEYING Address PO BOX 3270 City	Chaha		SOLLESPIE 1
CAMP VERDE	State Arizona	ZIP Code 86322	Expires <u>9.30.24</u>
Signature Out Greek	Date 2/4/2622	Telephone (928) 567-9170	Ext.
Copy all pages of this Elevation Certificate a	and all attachments for (1) community of	official, (2) insurance ag	gent/company, and (3) building owner
Comments (including type of equipment ar LOWEST MACHINERY SERVICING RESI ELEVATION.	nd location, per C2(e), if applicable)		

IMPORTANT: In these spaces, copy the corresponding informat	ion from Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No. 3751 S PEARCE LANE) or P.O. Route and Box No.	Policy Number:			
City State CAMP VERDE Arizona	ZIP Code 86322	Company NAIC Number			
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)					
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 grad a) Top of bottom floor (including basement,	e (LAG).				
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is					
E2. For Building Diagrams 6–9 with permanent flood openings prov the next higher floor (elevation C2.b in	ided in Section A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the diagrams) of the building is E3. Attached garage (top of slab) is					
E4. Top of platform of machinery and/or equipment servicing the building is					
E5. Zone AO only: If no flood depth number is available, is the top of	of the bottom floor elevated in ac				
SECTION F - PROPERTY OWNER (OR OW	NER'S REPRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative who comp community-issued BFE) or Zone AO must sign here. The statements	letes Sections A, B, and E for Zo s in Sections A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's Name					
Address	City St	ate ZIP Code			
Signature	Date Te	lephone			
Comments		*			
\.					
		☐ Check here if attachments.			

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY					RANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3751 S PEARCE LANE					ber:
City CAMP VERDE	State Arizona	ZIP Code 86322	-	Company N	IAIC Number
SECTION	ON G - COMMUNIT	TY INFORMATION (OPTI	ONAL)		
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Comple	ter the community's floodpete the applicable item(s)	olain mar and sign	nagement ord below. Chec	dinance can complete ok the measurement
G1. The information in Section C was taken engineer, or architect who is authorized that a in the Comments area below.)	en from other docu zed by law to certify	mentation that has been s elevation information. (Ind	igned ar dicate the	nd sealed by e source and	a licensed surveyor, date of the elevation
G2. A community official completed Sect or Zone AO.	ion E for a building	located in Zone A (without	t a FEMA	A-issued or co	ommunity-issued BFE)
G3. The following information (Items G4-	-G10) is provided fo	or community floodplain ma	anageme	ent purposes	
G4. Permit Number	G5. Date Permit	Issued		ate Certifica compliance/O	te of occupancy Issued
G7. This permit has been issued for:	New Construction	n 🗌 Substantial Improven	nent		
G8. Elevation of as-built lowest floor (includin of the building:	g basement) –		feet	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			
Community Name		Telephone	-		
Signature		Date			
Comments (including type of equipment and lo	cation, per C2(e), if	applicable)			
_					
_				Che	eck here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 3751 S PEARCE LANE	t., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	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 WEST SIDE (FRONT) OF RESIDENCE

Clear Photo One



Photo Two

Photo Two Caption SOUTH SIDE OF RESIDENCE

Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3751 S PEARCE LANE				
State	ZIP Code	Company NAIC Number		
	Unit, Suite, and/or Bldg. No.)	Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code		

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 SIDE (BACK) OF RESIDENCE

Clear Photo Three



Photo Four

Photo Four Caption NORTH SIDE OF RESIDENCE

Clear Photo Four

For Insurance Purposes Only.

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.

SECTIO	ON A - PROPERTY II	NFORM	WATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name HELENE JOHNSTONE					Policy Num	ber:
A2. Building Street Address (included Box No. 3751 S PEARCE LANE	ding Apt., Unit, Suite,	and/or	Bldg. No.) o	r P.O. Route and	Company N	AIC Number:
City			State		ZIP Code	
CAMP VERDE			Arizona		86322	
A3. Property Description (Lot and 404-11-015U	Block Numbers, Tax	Parcel	Number, Le	gal Description, etc	c.)	
A4. Building Use (e.g., Residentia	l, Non-Residential, Ac	ddition,	Accessory,	etc.) ACCESSO	DRY	
A5. Latitude/Longitude: Lat. 34°3	50'51.5" N Lo	ong. <u>11</u>	11°49'24.8" V	V Horizontal	l Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least 2 photographs	of the building if the C	Certifica	ate is being ι	ised to obtain floor	d insurance.	
A7. Building Diagram Number	1A					
A8. For a building with a crawlspa	ce or enclosure(s):					
a) Square footage of crawlspa	ace or enclosure(s)			N/A sq ft		
b) Number of permanent flood	l openings in the craw	vlspace	or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of flood oper	nings in A8.b		N/A sq in	İ		
d) Engineered flood openings	? ☐ Yes ⊠ No	\$	an and an			
A9. For a building with an attached	garage:					
a) Square footage of attached	garage		N/A sq ft			
b) Number of permanent flood	openings in the attac	ched ga	arage within	1.0 foot above adja	acent grade N/A	
c) Total net area of flood open	ings in A9.b		N/A sq	in		
d) Engineered flood openings	? ☐ Yes ⊠ No					
	TION B – FLOOD INS	SURAI			ORMATION	
B1. NFIP Community Name & Con YAVAPAI COUNTY #040093	nmunity Number		B2. County	Name JNINCORPORATE		B3. State Arizona
			IAVAI AI, C	MINOON OWNE	EDANLA	Alizona
B4. Map/Panel B5. Suffix B Number	6. FIRM Index Date	Effe	M Panel ctive/ ised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
04025C2189 H 08	8-24-2021 1	10-16-2		AE	3043.2	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile ⊠ FIRM ☐	Community Determine	ned [Other/Sou	rce:		
B11. Indicate elevation datum use	d for BFE in Item B9:	□ NG	GVD 1929 [× NAVD 1988	Other/Source:	
B12. Is the building located in a Co	oastal Barrier Resourc	ces Sys	stem (CBRS)	area or Otherwise	e Protected Area (C	PPA)? ☐ Yes ※ No
Designation Date:	CF	BRS [□ ОРА			
			,			

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: Policy Number:					
City State ZIP Code Company NAIC Number CAMP VERDE Arizona 86322					
SECTION C - BUILDING	ELEVATION INFORMA	TION (SURVEY R	EQUIRED)		
	uction Drawings*	illding Under Construction is complete. BFE), AR, AR/A, AR/A in Item A7. In Puert in: 3094.26 (NAVD88) Ow. BFE. Or)	/AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.		
h) Lowest adjacent grade at lowest elevation of					
structural support SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
This certification is to be signed and sealed by a land I certify that the information on this Certificate represstatement may be punishable by fine or imprisonmer Were latitude and longitude in Section A provided by	d surveyor, engineer, or an ents my best efforts to into tunder 18 U.S. Code, Se	chitect authorized by erpret the data availanction 1001.	law to certify elevation information.		
Certifier's Name CLINT GILLESPIE Title REGISTERED LAND SURVEYOR Company Name HERITAGE LAND SURVEYING Address PO BOX 3270 City CAMP VERDE Signature Copy all pages of this Elevation Certificate and all attact Comments (including type of equipment and location LOWEST MACHINERY SERVICING ACCESSORY EENCLOSURE ATTACHED TO BUILDING AS SHOW	, per C2(e), if applicable) BUILDING IS A WATER H	IEATER SET AT FIN			

IMPORTANT: In these spaces, copy the corresponding information	on from Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 3751 S PEARCE LANE	or P.O. Route and Box No.	Policy Number:			
City State CAMP VERDE Arizona	ZIP Code 86322	Company NAIC Number			
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)					
For Zones AO and A (without BFE), complete Items E1–E5. If the Ce complete Sections A, B,and C. For Items E1–E4, use natural grade, i enter meters. E1. Provide elevation information for the following and check the app	f available. Check the measure ropriate boxes to show whethe	ment used. In Puerto Rico only,			
the highest adjacent grade (HAG) and the lowest adjacent grade a) Top of bottom floor (including basement,	`				
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is					
E2. For Building Diagrams 6–9 with permanent flood openings provio the next higher floor (elevation C2.b in	led in Section A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the diagrams) of the building is E3. Attached garage (top of slab) is					
E4. Top of platform of machinery and/or equipment servicing the building is					
E5. Zone AO only: If no flood depth number is available, is the top of	the bottom floor elevated in ac				
SECTION F - PROPERTY OWNER (OR OWI	NER'S REPRESENTATIVE) C	ERTIFICATION			
The property owner or owner's authorized representative who comple community-issued BFE) or Zone AO must sign here. The statements	tes Sections A, B, and E for Zo in Sections A, B, and E are co	one A (without a FEMA-issued or rect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's Name					
Address	City St	ate ZIP Code			
Signature	Date Te	lephone			
Comments		6			

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY L						
Building Street Address (including Apt., Unit, St 3751 S PEARCE LANE	. Route and Box No.	Policy Number:				
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number			
SECTIO	ON G - COMMUNITY INFOR	MATION (OPTIONAL)				
Sections A, B, C (or E), and G of this Elevation	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.)	en from other documentation ed by law to certify elevation	that has been signed al information. (Indicate th	nd sealed by a licensed surveyor, e source and date of the elevation			
G2. A community official completed Secti or Zone AO.	on 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 (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	9				
Community Name	Tele	ephone				
Signature	Date	Э				
Comments (including type of equipment and loc	ation, per C2(e), if applicable	e)	· · · · · · · · · · · · · · · · · · ·			
_						
-			Check here if attachments.			

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3751 S PEARCE LANE			Policy Number:
City	State	ZIP Code	Company NAIC Number
CAMP VERDE	Arizona	86322	

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

WEST AND SOUTH SIDE OF ACCESSORY BUILDING Photo One Caption

Clear Photo One



Photo Two

Photo Two Caption EAST AND NORTH SIDE OF ACCESSORY BUILDING (WATER ENCL. SHOWN HEREON) Clear Photo Two

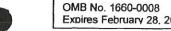
ELEVATION CERTIFICATE

Continuation Page

	IMPORTANT: In these spaces, copy the correspo	FOR INSURANCE COMPANY USE		
Anzona 86322 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 Ad. Photo Three Photo Three Photo Three Caption Clear Photo Three Photo Four	Building Street Address (including Apt., Unit, Suite, 3751 S PEARCE LANE	and/or Bldg. No.) or	P.O. Route and Box No.	Policy 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 Photo Three Caption Clear Photo Three Photo Four	City			Company NAIC Number
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 Photo Three Caption Clear Photo Times Photo Four	CAMP VERDE	Arizona	86322	
Photo Three Caption Clear Photo Three Photo Four	with: date taken: "Front View" and "Rear View	'": and. if required.	. "Right Side View" and "I	Left Side View." When applicable.
Photo Three Caption Clear Photo Three Photo Four				
Photo Three Caption Clear Photo Three Photo Four				
Photo Three Caption Clear Photo Three Photo Four				
Photo Three Caption Clear Photo Three Photo Four				
Photo Three Caption Clear Photo Three Photo Four		gen a		
Photo Three Caption Photo Four Photo Four Photo Four		Photo T	hree	
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Photo Three Caption Photo Four Photo Four Photo Four				
Photo Four	Divide The Co. "	Photo Thr	ree	
Photo Four	Prioto Inree Caption			Clear Photo Three
Photo Four				
Photo Four		Photo F	our	
				*
				·
		Photo Fo	vur	
	Photo Four Caption			Clear Photo Four

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

ELEVATION CERTIFICATE



Important: Read the instructions on pages 1-8.

la .	OMB No. 1660-0008
	Expires February 28, 200

SECTION A - PROPERTY INFORMATION	For Incurrence Company Line
A1. Building Owner's Name 1)	For Insurance Company Use: Policy Number
- Tamela D'Arra	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number
City Camp Verde	IP Code 86322
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. 340 30, 858 Long. 49, 43 Horizontal Da A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5 A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attact	
a) Square footage of crawl space or enclosure(s) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b Square footage of attact b) No. of permanent flood walls within 1.0 foot above adjacent grade Total net area of flood openings in A8.b a) Square footage of attact b) No. of permanent flood walls within 1.0 foot above adjacent grade Total net area of flood openings in A8.b	openings in the attached garage ove adjacent grade
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1. NGIP Community Mame & Community Number B2. County Name B2. County Name B3. County Name B4.	B3. State A2
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Zone(s) O4025C 2215 F June L 2001 Date Bfrective/Revised Date Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. X FIS Profile	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date CBRS OPA	☐ Yes 📈 No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)
*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 below according to the building diagram specified in Item A7.	200 (E.W.
Benchmark Utilized #151 Vertical Datum 3046. 9	
Conversion/Comments Check the measurem	nent used.
b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	ers (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) 3030 23 Teet mete	ers (Puerto Rico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATIO	
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. Check here if comments are provided on back of form.	PED LAND SUPERIFICATE
DUGAN L McDonald Coriffer's Name WEST JEENT Title PD BOX 3270 Company Name License Number License Number License Number License Number License Number A2 81322	26925 DUGAN L. McDONALD 0
Address City (State 7 7 Code	

IMPORTANT: In the	se spaces copy the	responding information	- Francis - 11		
Building Street Address	(including Apt., Unit, Sui	te, and/or Bldg. No.) or P.O. Roo	te and Box No	1 A.	For Insurance Company Use: Policy Number
City 1 1	SIELRA	LANE			r oncy Number
LAMP Y	erde	State AZ		ZIP Code 8132-0	Company NAIC Number
Consultable of the Consultable o		VEYOR, ENGINEER, OR A			
Comments O		1) community official, (2) insuran		ny, and (3) building ow	mer.
Comments C2-E	15 A HO	+ WATER HEAT	EK.	man t	tous 3 with Applitud
					- 015W
Signature					11-17-2006
			Date		Check here if attachments
SECTION E - BUI	DING ELEVATION I	NFORMATION (SURVEY N	OT REQUIRE) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (wire and C. For Items E1-E4	hout BFE), complete Ite, use natural grade, if av	ms E1-E5. If the Certificate is in ailable. Check the measuremen	ntended to suppo	rt a LOMA or LOMR-F	request, complete Sections A, B,
E1. Provide elevation in	nformation for the followi	ng and check the appropriate bo	exes to show whe	ether the elevation is a	bove or below the highest adjacent
a) Top of bottom flo	oor (including basement,	crawl space, or enclosure) is		feet meters a	
b) Top of bottom flo	oor (including basement,	crawl space, or enclosure) is	. Ll	feet meters a	bove or below the LAG
(elevation C2.0 in t	ne diagrams) of the build	ling is feet	on A Items 8 and meters	l/or 9 (see page 8 of it above or below t	nstructions), the next higher floor
E3. Attached garage (to	op of slab) is	feet meters a	bove or bel	ow the HAG.	
E5. Zone AO only: If no	nachinery and/or equipm offood deoth number is	nent servicing the building is	n floor elevated i	eet meters a	bove or below the HAG. community's floodplain management
ordinance? TYe	s No Unknow	n. The local official must certify	this information i	n Section G.	community's noodplain management
	SECTION E - BROI	PERTY OWNER (OR OWNE	DIC DEDDECT	ENTATIVE CERTI	TOATION
The property owner or ow			the state of the s	The same of the sa	MA-issued or community-issued BFE)
or Zone AO must sign her	re. The statements in Se	ections A, B, and E are correct to	o the best of my	knowledge.	MA-Issued of Community-Issued BFE)
Property Owner's or Own	er's Authorized Represe	ntative's Name		*	
Address		City	,	State	ZIP Code
Signature		Dat	te	Telepho	ne
Comments					
, , , , , , , , , , , , , , , , , , , ,					
	95	OTION C. COMMUNITY IN	FORMATION (OCTIONAL Y	Check here if attachments
The local official who is aut		CTION G - COMMUNITY IN			an complete Sections A, B, C (or E),
and G of this Elevation Cer	tificate. Complete the ap	oplicable item(s) and sign below	. Check the mea	surement used in Iten	ns G8. and G9.
G1. The information is authorized by I	n Section C was taken fr	om other documentation that ha formation. (Indicate the source	is been signed a	nd sealed by a license	d surveyor, engineer, or architect who
		for a building located in Zone A			
		is provided for community flood			, , , , , , , , , , , , , , , , , , , ,
G4. Permit Number	G5. Date	Permit Issued	G6. Dat	te Certificate Of Comp	liance/Occupancy Issued
G7. This permit has been is	sued for: New Co	nstruction	Improvement		
G8. Elevation of as-built lov	est floor (including base	ement) of the building:	[feet meters (P	R) Datum
G9. BFE or (in Zone AO) de	epth of flooding at the bu	ilding site:	[feet meters (P	R) Datum
Local Official's Name			Title		
Community Name			Telephone		
Signature			Date		
Comments					
					Check here if attachments

FEMA Form 81-31, February 2006

Replaces all previous editions

. U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency



Expires February 28, 2009

ELEVATION CERTIFICATE OMB No. 1660-0008 National Flood Insurance Program Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name Panela D'ARCA	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number
	IP Code 86322
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	20322
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. 34°30′51.6° Long. 111°49′23.4° Horizontal Da A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the crawl space or	
c) Total net area of flood openings in A8.b sq in c) Total net area of flood o	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
	33. State
Camp VER DE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	
☐ Community Determined ☐ Other (Describe) ☐ Other	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date	Yes X No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE	ED)
C1. Building elevations are based on: Construction Drawings* Building Under 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	Finished Construction
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IMPORTANT: In these spaces, o	For Insurance Company Like:			
Building Street Address Incheding Apt.	Policy Number			
City CAMP VERD	Stat		THOUSE ZIP Cod 8632	
	D - SURVEYOR, ENGINEE	R, OR ARCHITEC	T CERTIFICATION	(CONTINUED)
Copy both sides of this Elevation Certif	ficate for (1) community official,	(2) insurance agent/o	ompany, and (3) build	ing owner.
Comments C2-E is	A HOT WATER	L HEATER		
The state of the s				
Signature		Date		Check here if attachmen
SECTION E - BUILDING ELEV	VATION INFORMATION (SI	JRVEY NOT REQU	JIRED) FOR ZONE	AO AND ZONE A (WITHOUT BFE)
and G. For thome E1-E4, use natural g E1. Provide elevation information for grade (#146) and the toward acts a) Top of hottom their (including to) Yop of buttom their (including to) Yop of buttom their (including E2. For Butting Clapsum 6-8 with p (elevation G2.a is the diagrams) E3. Attached gauge (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no fined dopting ordinance? The No E	grade, if available. Check the me the following and check the apparent grade (LAG). basement, crawl space, or enclopasement, crawl space, or enclopasement flood openings provided the building is	easurement used. In propriate boxes to she propriate boxes to she propriate boxes to she propriate boxes is feet in Section A Items above or liding is fithe bottom floor elements certify this inform	Puerto Rico only, ent w whether the elevati feet meters feet meters 8 and/or 9 (see page above or to below the HAG. feet meters vated in accordance w ation in Section G.	on is above or below the highest adjacent above or below the HAG. above or below the LAG. above or below the LAG. below the HAG. above or below the HAG.
The property sweet of sweet's authorize or Zone AO must sign here. The states	red representative who complete	es Sections A, B, and	E for Zone A (withou of my knowledge.	t a FEMA-issued or community-issued BFE
Property Owner's or Owner's Authorize		10 00//000 10 11/0 0000	or my minemonger	
Address		City	S	tate ZIP Code
Signature		Date	Т	elephone
Commerts				
				Check here if attachme
	SECTION G - COMM	IUNITY INFORMA	ION (OPTIONAL)	
The local citials who is sufficient of by ter and G of this Elevation Continues. Com	or ordinance to administer the	community's floodpl	ain management ordir	nance can complete Sections A, B, C (or E), d in Items G8. and G9.
31. The information in Bucilian C v	was taken from other documenta elevation information. (Indicate	ation that has been si	gned and sealed by a	licensed surveyor, engineer, or architect win the Comments area below.)
				mmunity-issued BFE) or Zone AO.
	ms G4G9.) is provided for com			
G4. Permit Number	G5. Date Permit Issued	(66. Date Certificate C	of Compliance/Occupancy Issued
Pit I line bourse and and an arrange F		Substantial Improven		
38. Elevation of as-built lowest floor (inc		g:·	- = =	eters (PR) Datumeters (PR) Datum
69. BFE or (in Zone AO) depth of flooding	ng at the building site:		_ L feet L m	cicie (FN) Datum
Local Official's Name		Title		
Community Name		Telepi	one	
Signature		Date		
Comments				
				Check here if attachm