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

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9



Copy all pages of this E	Elevation Cer	tificate and all attachme	ents fo	r (1) community offic	cial, (2) insurance a	gent/compar	ıy, and (3) building owner.
SECTION A - PROPERTY INFORMATION						FOR INSURANCE COMPANY USE	
A1. Building Owner's Name MURDOCK FAMILY TRUST					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.						Company N	IAIC Number:
12 W. HEREFORD DRIVE							
City State CAMP VERDE Arizona						ZIP Code 86322	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  LOT 16 RANCH ACRES APN #404-19-035						
A4. Building Use (e	.g., Resident	ial, Non-Residential, A	ddition	, Accessory, etc.)		~ ************************************	
A5. Latitude/Longitu	ude: Lat. 34	34 10.0	ong1	111 51 18.3	Horizontal Datun	n: NAD	1927 X NAD 1983
A6. Attach at least 2	2 photograph	s of the building if the	Certific	ate is being used to	obtain flood insura	ance.	
A7. Building Diagram	m Number _	8					
A8. For a building w	ith a crawlsp	ace or enclosure(s):					
a) Square foots	age of crawls	pace or enclosure(s)		1,292 sq ft			
b) Number of p	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 1
c) Total net are	a of flood op	enings in A8.b 10	1 s	sq in	-		***************************************
d) Engineered t	flood opening	gs? ☐ Yes ☒ No	,				
A9. For a building w	ith an attach	ed garage:					
a) Square foots	age of attache	ed garage 550		sq ft			
b) Number of p	ermanent flo	od openings in the atta	iched g	garage within 1.0 foo	ot above adjacent o	grade	0
c) Total net are	a of flood ope	enings in A9.b (	)	sq in		-	2.
d) Engineered t	flood opening	ys? ☐ Yes ☒ No	)				
a, anglice team specimings.							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community TOWN OF CAMP VI				B2. County Name YAVAPAI			B3. State Arizona
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base
04025C2178	Н	10/16/2015		evised Date /2015	AE	3097.7	od Depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
▼ FIS Profile							
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   No							
Designation Date: CBRS DPA							
			Marijah jahan merupakan			·	

FEMA Form 086-0-33 (7/15)

Replaces all previous editions.

Form Page 1 of 6

OMB No. 1660-0008

ELEVATION CERTIFICATE	Expiration Date: November 30, 2018					
IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 12 W. HEREFORD DRIVE	Policy Number:					
City CAMP VERDE	State Arizona	ZIP Code 86322	Company NAIC Number			
SECTION C - BU	ILDING ELEVATION INFO	RMATION (SURVEY R	EQUIRED)			
<ul> <li>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.</li> <li>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.</li> <li>Benchmark Utilized: RM 121 Vertical Datum: 3097.4 (NAVD 1988)</li> </ul>						
Indicate elevation datum used for the ele ☐ NGVD 1929 ☑ NAVD 1988 Datum used for building elevations must	Other/Source:					
<ul><li>a) Top of bottom floor (including basem</li><li>b) Top of the next higher floor</li></ul>			Check the measurement used.			
c) Bottom of the lowest horizontal struc	tural member (V Zones only)	N/A. 3094_9	x feet meters			
d) Attached garage (top of slab)     e) Lowest elevation of machinery or eq (Describe type of equipment and local	uipment servicing the buildin ation in Comments)	2122	X feet meters			
f) Lowest adjacent (finished) grade nex		3094. 4	X feet  meters			
g) Highest adjacent (finished) grade ne.	xt to building (HAG)	3094. 7	x feet meters			
<ul> <li>h) Lowest adjacent grade at lowest elev structural support</li> </ul>	vation of deck or stairs, inclu	ding 3094. 2	x feet meters			
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 licensed land surveyor? Yes No Check here if attachments.						
Certifier's Name	License Numb	er				
TIMOTHY L. HAMMES  Title PRESIDENT  Company Name HAMMES SURVEYING LLC  Address	L.S. 29263		TIMOTHY L. SPRIMES Here 1			
2100 VIA SILVERADO			7 0 5 /2 4 (17.5)			
City CAMP VERDE	State Arizona	ZIP Code 86322	Capines 6/30/17			
Signature  Signature  L. Howw	Date 05/24/2017	Telephone (928) 567-2833				
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 LOWEST ELEVATION OF MACHINERY SEGARAGE IS SLAB ON GRADE.			₹.			

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding info	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg	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.						
	Photo One					
Photo One Caption						
	Dhoto Turo					
Photo Two Caption	Photo Two					

**ELEVATION CERTIFICATE** 

## **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

		Expiration Bate: November 66; 2616
IMPORTANT: In these spaces, copy the corresponding information	ion from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No		Policy Number:
City State	ZIP Code	Company NAIC Number
If submitting more photographs than will fit on the preceding pagwith: date taken; "Front View" and "Rear View"; and, if requiphotographs must show the foundation with representative examples.	red. "Right Side View" and "L	eft Side View." When applicable.
Ph	oto One	
Photo One Caption		
	oto Two	
Photo Two Caption		