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

- 60

Press.

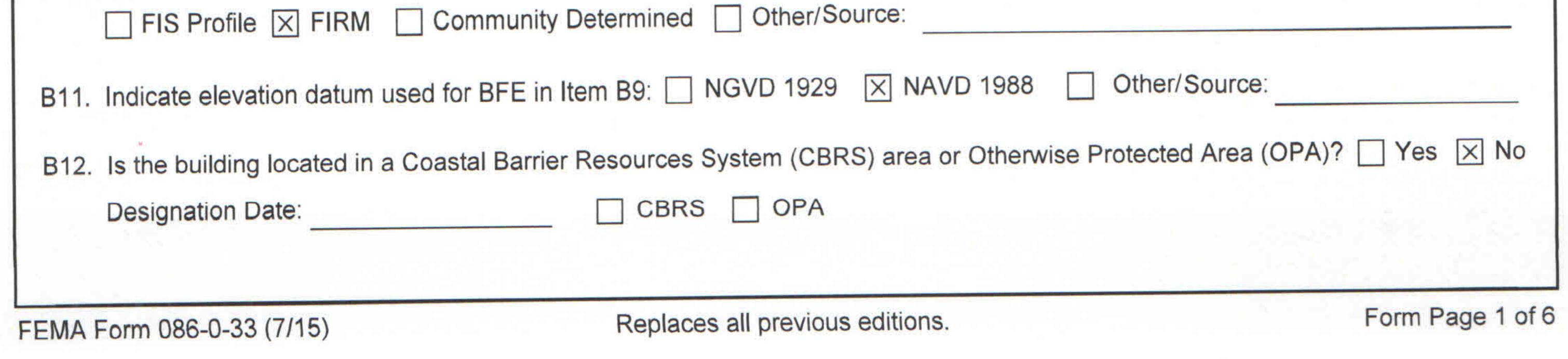
OMB No. 1660-0008 Expiration Date: November 30, 2018

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.

	SECTI	ON A - PROPERTY IN	IFORMATION		COM ROAR & AL CO	NCE COMPANY US
A1. Building Own				P	olicy Numbe	er:
Box No.		uding Apt., Unit, Suite,	and/or Bldg. No.) or P.O.	Route and C	ompany NA	IC Number:
220 E CLIFF HOUSE DRIVE State ZIP Code						
City CAMP VERD	E		State Arizona		6322	
A3. Property Des 404-30-144	cription (Lot and	d Block Numbers, Tax	Parcel Number, Legal Des	scription, etc.)		
A4. Building Use	(e.g., Residenti	al, Non-Residential, Ac	Idition, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Long	gitude: Lat. 34	4°34'06"	ong. 111°51'03"	Horizontal Datum:	NAD 19	27 × NAD 1983
A6. Attach at leas	st 2 photograph	s of the building if the C	Certificate is being used to	obtain flood insuran	ce.	
A7. Building Diag	ram Number	9				
A8. For a building	with a crawlsp	ace or enclosure(s):				
a) Square fo	otage of crawls	pace or enclosure(s)	1,456 sq ft			
b) Number o	f permanent flo	od openings in the crav	vlspace or enclosure(s) with	ithin 1.0 foot above a	adjacent grad	de17
c) Total net a	area of flood op	enings in A8.b 1,83	6 sq in			
d) Engineere	ed flood opening	gs? □Yes ⊠ No				
A9. For a building	with an attach	ed garage:				
a) Square for	otage of attach	ed garage 637	sq ft			
b) Number o	of permanent flo	od openings in the atta	ched garage within 1.0 for	ot above adjacent gr	ade	0
		enings in A9.b) sq in			
c) Lotal net						
	ed nood openning					
 d) Engineere 					TION	
	SE	CTION B - FLOOD IN	SURANCE RATE MAP	(FIRM) INFORMAT	TON	
d) Engineere		CTION B – FLOOD IN ommunity Number	B2. County Name			B3. State
d) Engineere	inity Name & C	ommunity Number				B3. State Arizona
d) Engineere B1. NFIP Commu	inity Name & C	ommunity Number	B2. County Name		B9. Base (Zor	



ELEVATION CERTIFICAT	OMB No. 1660-0008 Expiration Date: November 30, 2018			
IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE			
Building Street Address (including 220 E CLIFF HOUSE DRIVE	Policy Number:			
City	State	ZIP Code	Company NAIC Number	
CAMP VERDE	Arizona	86322		
SECTI	ON C – BUILDING ELEVATION	INFORMATION (SURVE)	(REQUIRED)	
C1. Building elevations are base *A new Elevation Certificate	ed on: Construction Drawing will be required when construction		struction* X Finished Construction	
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: RM13	32 Ve	rtical Datum: 1929 CONVE	RTED TO 1988	

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 X NAVD 1988 ☐ Other/Source:

Datum used for building elevations must be the same as that used for the BFE.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ 3084.
- 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 and location in Comments)
- f) Lowest adjacent (finished) grade next to building (LAG)
- g) Highest adjacent (finished) grade next to building (HAG)
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support

Check the measurement used.

3084.73	× feet	meters
3087 25	× feet	meters
N/A	× feet	meters
3086.18	 × feet	meters
3087 25	 × feet	meters
3085.8	× feet	meters
3085.68	 × feet	meters
3085 55	× feet	meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

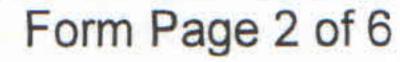
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information on this Certificate repre- statement may be punishable by fine or imprisonm	esents my best efforts to internet under 18 U.S. Code, Se	erpret the data availab oction 1001.	le. I understand that any false
Were latitude and longitude in Section A provided	by a licensed land surveyor	? Xes No	Check here if attachments.
Certifier's Name	License Number		
CLINT GILLESPIE	50106		ARD LAND SO
Title			12 TANY SALENY
REGISTERED LAND SURVEYOR			50100 ? SOINT D
Company Name			TE CHIESPIE
HERITAGE LAND SURVEYING			dere 1
Address			gned
PO BOX 3270			ARIZONA, U.S.P.
City	State	ZIP Code	0.7.00
CAMP VERDE	Arizona	86322	Expires 9.30.22
Signature	Date	Telephone	
/ lut oilf	8 Nov.18	(928) 567-9071	
Copy all pages of this Elevation Certificate and all att	achments for (1) community	official, (2) insurance ag	gent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable) HOME HAS A CRAWL SPACE WITH AN ELEVATION OF 3084.73. AND A FINISHED FLOOR OF 3087.25. THE HOMES LOWEST MACHINERY IS A HOT WATER HEATER AT THE FINISHED FLOOR LEVEL.

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

Replaces all previous editions.

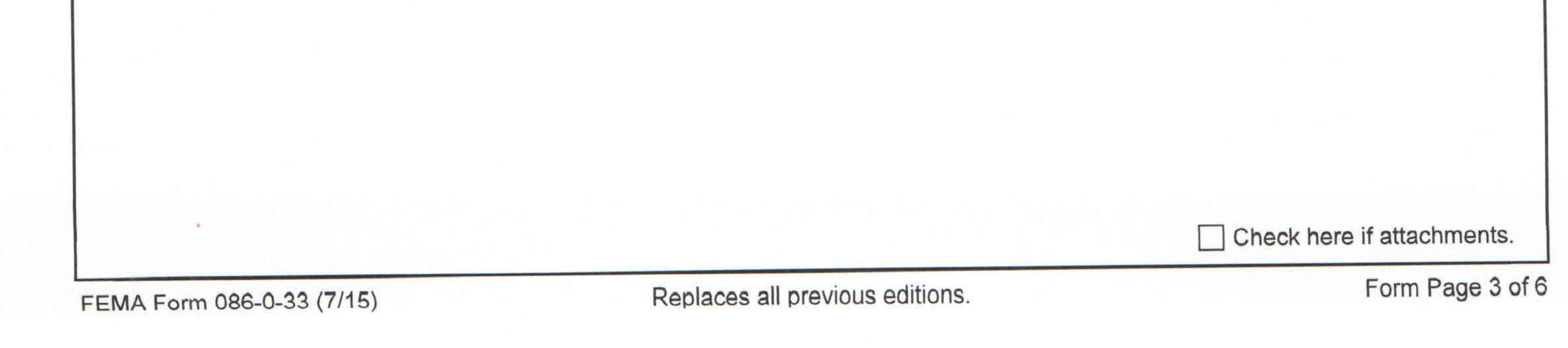


ELEVATION CERTIFICAT	OMB No. 1660-0008 Expiration Date: November 30, 2018		
MPORTANT: In these spaces, co	py the corresponding informatio	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including 220 E CLIFF HOUSE DRIVE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
CAMP VERDE	Arizona	86322	
SECTION	E – BUILDING ELEVATION INF FOR ZONE AO AND ZO	ORMATION (SURVEY NONE A (WITHOUT BFE)	IOT REQUIRED)
complete Sections A, B,and C. For enter meters.		available. Check the meas	surement used. In Puerto Rico only,
E1. Provide elevation information the highest adjacent grade (H a) Top of bottom floor (includ	AG) and the lowest adjacent grade	(LAG).	ether the elevation is above or below

crawlspace, or enclosure) is	feet meters above or below the HAG.				
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	feet meters above or below the LAG.				
E2. For Building Diagrams 6-9 with permanent flood of	penings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions),				
the next higher floor (elevation C2.b in the diagrams) of the building is	feet meters above or below the HAG.				
E3. Attached garage (top of slab) is	feet meters above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is	feet in meters in above or in below the HAG.				
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance?	le, is the top of the bottom floor elevated in accordance with the community's] No Duknown. The local official must certify this information in Section G.				
SECTION F – PROPERTY OW	NER (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.					
Developed Authorized Depresentative's Name					

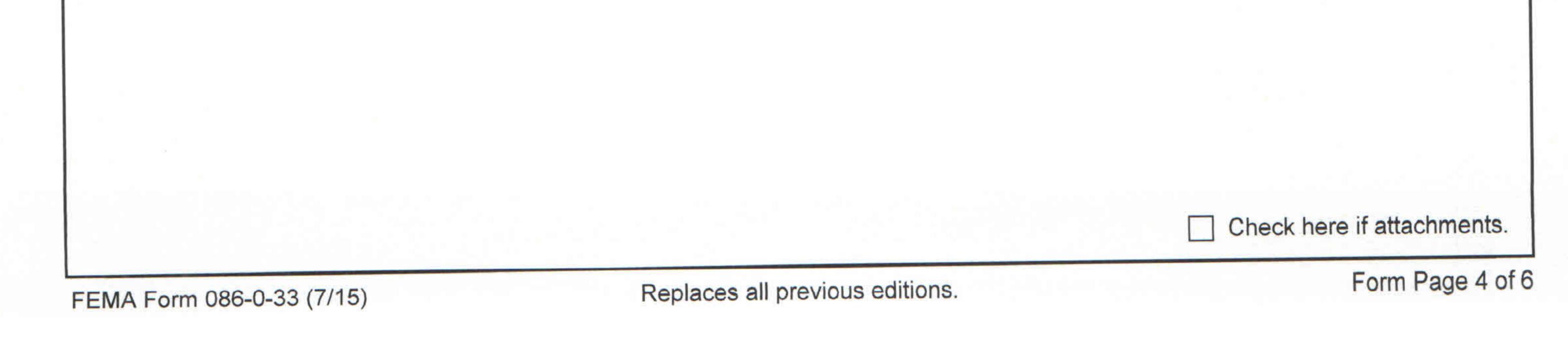
Property Owner or Owner's Authorized Representative's Name

Address	City	State	ZIP Coo	le
Signature	Date	Telephone		
Comments				



ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy	the corresponding informatio	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Ap 220 E CLIFF HOUSE DRIVE	ot., 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
	SECTION G - COMMUNITY I	NFORMATION (OPTIONAL	.)
The local official who is authorized by Sections A, B, C (or E), and G of this used in Items G8–G10. In Puerto Riv	Elevation Certificate. Complete	the community's floodplain n the applicable item(s) and si	nanagement ordinance can complete ign below. Check the measurement
G1. The information in Section engineer, or architect who	C was taken from other docume is authorized by law to certify ele	ntation that has been signed evation information. (Indicate	and sealed by a licensed surveyor, the source and date of the elevation

data in the Comments area below.)		
G2. A community official completed Section or Zone AO.	ion E for a building located in Zone A (with	out a FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for community floodplain	management purposes.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Substantial Impro	vement
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	ocation, per C2(e), if applicable)	



BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 220 E CLIFF HOUSE 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 Two	
Photo Two Caption : North & East side of house	
FEMA Form 086-0-33 (7/15) Replaces all previous editions.	Form Page 5 of 6

BUILDING PHOTOGRAPHS

Continuation Page

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 220 E CLIFF HOUSE 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 Two	
Photo Two Caption : South & West side of house	
FEMA Form 086-0-33 (7/15) Replaces all previous editions.	Form Page 6 of 6