#### 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 Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

				FOR INSURANCE COMPANY USE				
A1. Building Owner's Name JAMES & JOANNE HULETT					Policy Number:			
A2. Building Street Box No. 297 E PARADE GR		luding Apt., Unit, Suite	e, and/o	or Bldg. No.) or P.O.	Route and	Company N	NAIC Number:	
City CAMP VERDE	City State ZIP Code CAMP VERDE AZ × 86322							
A3. Property Description 404-30-163	ription (Lot ar	nd Block Numbers, Ta	x Parce	l Number, Legal De	escription, etc.)			
A4. Building Use (6	e.g., Resident	tial, Non-Residential, A	Addition	, Accessory, etc.)	RESIDENTIAL			
A5. Latitude/Longit	ude: Lat. 34	°34'00"	Long. 1	11°50'59"	Horizontal Datur	n: NAD	1927 × NAD 198	33
A6. Attach at least	2 photograph	ns of the building if the	Certific	cate is being used to	o obtain flood insur	ance.		
A7. Building Diagra	m Number	#8						
A8. For a building v	- vith a crawlsp	pace or enclosure(s):						
a) Square foot	age of crawls	space or enclosure(s)		1,840 sq ft				
b) Number of p	permanent flo	od openings in the cra	awlspac	e or enclosure(s) w	rithin 1.0 foot above	adjacent gr	ade 6	
c) Total net are	ea of flood op	enings in A8.b 3,4	56 s	sq in				
d) Engineered flood openings?   Yes  No								
A9. For a building with an attached garage:								
a) Square footage of attached garage 816 sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade  3								
c) Total net area of flood openings in A9.b 432 sq in						_		
d) Engineered flood openings? × Yes No								
d) Engineered flood openings:								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Communi CAMP VERDE #40	•	ommunity Number		B2. County Name YAVAPAI COUNT			B3. State AZ	~
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E:	IRM Panel ffective/	B8. Flood Zone(s	(Zo	se Flood Elevation(s ne AO, use Base	s)
04025C2178	Н	10/16/2015		evised Date //2015	AE	3090.3	od Depth)	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:     State								
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 Otherwise Protected Area (OPA)?   Yes   No								
Designation Date: CBRS OPA								

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Duilding Street Address ("Let "")	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or F 297 E PARADE GROUND CIR	P.O. Route and Box No.  ZIP Code	Policy Number:	
City State CAMP VERDE AZ	Company NAIC Number		
CAMP VERDE AZ			
SECTION C – BUILDING ELEVATION INF	ORMATION (SURVEY RI	EQUIRED)	
*A new Elevation Certificate will be required when construction of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V Complete Items C2.a–h below according to the building diagram sp Benchmark Utilized: 119A Vertical Indicate elevation datum used for the elevations in items a) through    NGVD 1929 × NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used fa a) Top of bottom floor (including basement, crawlspace, or enclosus) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only	(with BFE), AR, AR/A, AR/A, ecified in Item A7. In Puert Datum: 1929 CONVERTED h) below.  For the BFE.  Tre floor) 3087. 0 0. 0.	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.	
d) Attached garage (top of slab)	<u>3083</u> . <u>6</u>	X feet  meters	
<ul> <li>e) Lowest elevation of machinery or equipment servicing the buildir (Describe type of equipment and location in Comments)</li> </ul>	ng <u>3085</u> . 7	X feet meters	
f) Lowest adjacent (finished) grade next to building (LAG)	3082. 8	X feet  meters	
g) Highest adjacent (finished) grade next to building (HAG)	3083. 2	X feet  meters	
<ul> <li>h) Lowest adjacent grade at lowest elevation of deck or stairs, inclustructural support</li> </ul>		x feet meters	
SECTION D - SURVEYOR, ENGINEER, C	R ARCHITECT CERTIFIC	CATION	
This certification is to be signed and sealed by a land surveyor, engineer I certify that the information on this Certificate represents my best efforts statement may be punishable by fine or imprisonment under 18 U.S. Coo	, or architect authorized by to interpret the data availal de, Section 1001.	law to cartify alayation information	
Certifier's Name License Numb	per	TAN	
CLINT GILLESPIE 50106  Title R.L.S.  Company Name HERITAGE LAND SURVEYING  Address		50106 CLINT D. GILLESPIE Seal	
PO BOX 3270		ARIZONA, U.S.A.	
City State CAMP VERDE AZ	ZIP Code	Expires 9.30.18	
Signature Date  Date  12 Aug. 201	Telephone (928) 567-9170		
Copy all pages of this Elevation Certificate and all attachments for (1) commo	unity official, (2) insurance a	gent/company, and (3) building owner.	
Comments (including type of equipment and location, per C2(e), if application and location of C2(e), if application and continuous c	able) LEVATED OUTSIDE OF G	SARAGE WALL ON EAST SIDE OF	

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ng information from Section		FOR INSURANCE COMPANY US			
or Bldg. No.) or P.O. Route ar	nd Box No.	Policy Number:			
Z × 86322		Company NAIC Number			
VATION INFORMATION (S AO AND ZONE A (WITHOL	URVEY NOT JT BFE)	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.					
ljacent grade (LAG).					
f	eet meters	above or below the HAG.			
_	_				
is the top of the bottom floor on the local state of the local state o	elevated in acc l official must c	cordance with the community's ertify this information in Section G.			
R (OR OWNER'S REPRESE	NTATIVE) CE	RTIFICATION			
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.					
Name					
City	Sta	te ZIP Code			
Date	Tele	ephone			
	ate ZIP Code   Z	VATION INFORMATION (SURVEY NOT AO AND ZONE A (WITHOUT BFE)  E5. If the Certificate is intended to support a tural grade, if available. Check the measurer heck the appropriate boxes to show whether jacent grade (LAG).    feet			

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IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 297 E PARADE GROUND CIR	Policy Number:				
City CAMP VERDE	State AZ	ZIP Code × 86322	Company NAIC Number		
SECTION	ON G - COMMUNITY INF	ORMATION (OPTIONAL)			
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	1 Certificate. Complete the	community's floodplain ma a applicable item(s) and sign	nagement ordinance can complete n below. Check the measurement		
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)					
G2. A community official completed Sect or Zone AO.	tion E for a building located	d in Zone A (without a FEM	A-issued or community-issued BFE)		
G3. The following information (Items G4-	-G10) is provided for com	munity 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 S	ubstantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at	the building site:		meters Datum		
G10. Community's design flood elevation:			meters Datum		
Local Official's Name	Т	itle			
Community Name	Т	elephone			
Signature Sign Here	С	Date			
Comments (including type of equipment and loc	cation, per C2(e), if applica	able)			
			Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

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See Instructions for Item A6.

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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 STREET SIDE OF RESIDENCE



Photo Two

Photo Two Caption BACK OF RESIDENCE