DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency ELEVATION CERTIFICATE NT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16



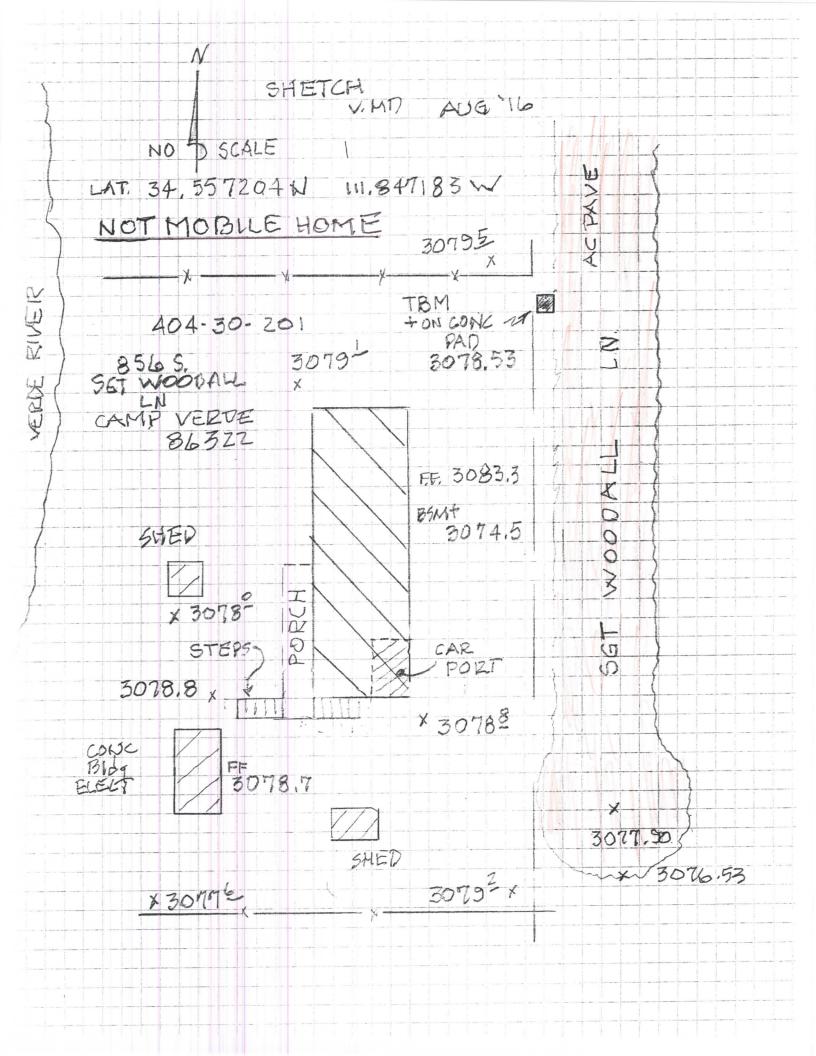
OMB Control Number: 1660-0008 Expiration: 11/30/2018

	community official (2) in		, and (3) building owner.	
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 FORM INSURANCE COMPANY USE				
A1. Building Owner's Name	Policy Number:			
John & Remona Lucero A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC				
Box No.	-9	Company NAIC Number:		
856 S. Sgt. Woodall Ln	State		Zip Code 86322	
City Camp Verde A3. Property Description (Lot and Block Numbers, Tax Parcel Nu	1 1	Arizona n, etc.)	86322	
404-30-201				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residental				
A5. Latitude/Longitude: Lat.34.557744 Long.111.	8.4 Horizontal Datur		C NAD 1983	
AS. Lautude/Longitude. Lat.3 4 . 33 / 744 Estignit	is being used to obtain	flood insurance.		
A6. Attach at least 2 photographs of the building if the Certificate	is being used to obtain			
A7. Building Diagram Number 2.0	40 5	building with an attache	ed narane:	
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)	sq ft a) Square	footage of attached ga	rage sq ft	
b) Number of permanent flood openings in the	b) Numbe	r of permanent flood op	enings 0 fact	
crawlspace or enclosure(s) within 1.0 foot		ttached garage within 1 adjacent grade	.0 1001	
above adjacent grade			-	
c) Total net area of flood openings in A8.b	sq in c) Total ne	et area of flood opening	s in A9.b sq ir	
	d) Engine	ered flood openings?	Yes R No	
d) Engineered flood openings? (Yes VNo a) Engineered flood openings? SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number	B2. County Name		B3. State	
DAMP VEPDE 040/B/	Yavapa	i	AZ	
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7	FIRM Panel Effective	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood	
	Licason para		depth	
2186 H 10/16/2015	10/16/2015	AE	3080.3	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:				
B10. Indicate the source of the base Proof Erevation (5) E./				
C SIS Profile (% FIRM C Community Determined C Oth	er/Source:			
← FIS Profile FIRM ← Community Determined ← Oth	er/Source:			
FIS Profile FIRM Community Determined Oth	er/Source:	Other/Source:	OPA)? (Yes % No	
← FIS Profile FIRM ← Community Determined ← Oth B11. Indicate elevation datum used for BFE in Item B9: ← NGV B12. Is the building located in a Coastal Barrier Resources Syste	er/Source: √D 1929	Other/Source:	DPA)? (Yes & No	
FIS Profile FIRM Community Determined Oth B11. Indicate elevation datum used for BFE in Item B9: NGV B12. Is the building located in a Coastal Barrier Resources Syste Designation Date: CBRS O	er/Source: TD 1929 K NAVD 1988 m (CBRS) area or Othe PA	Other/Source:	DPA)? (Yes % No	
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ELEVATION CERTIFICATE

OMB Control Number: 1660-0008 Expiration: 11/30/2018

SECT	ION D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTI	FICATION
NAME AND ADDRESS OF THE OWNER, WHEN PERSON AND PARTY OF THE OWNER,	The second secon	or architect authorized by	law to certify elevation information. I certify
hat the information on this Certificate n	epresents my best enous to interpr	et the data available. I un	derstand that any false statement may be
■ Check here if attachments.	Were latitude and longite provided by a licensed lateral provided by a licensed lateral latera	ude in Section A and surveyor?	CALO LAND
X Check here if allaciments.	X Yes (No		College Vital
Certifier's Name		se Number S. 5357	5357
Vance L. McDona	Company Name	D. 3337	VANCE L.
Title	P.& D. AS	cociates	17 ADU!
Surveyor	City	State Zip Code	7 2000 16 / A
485 Geary Height		AZ 86324	7 PONA 11.5
Signature	Date	Telephone	1 0 0 0
		928-567-91	41 (/x 5.30-14
Copy both sides of this Elevation Certi	ficate for (1) community official, (2)	insurance agent/compan	y, and (3) building owner.
Comments (including type of equipme	nt and location, per C2(e), if applic	able)"	
Hot Water Heat			
PHOTO"S & fiel	d sketch attac	hed	
Vand	121	2	17 AUG 16
Signature			Date Date ONE A CAND ZONE A (WITHOUT BEE)
SECTION E - BUILDING ELEVA	TION INFORMATION (SURVEY N	OT REQUIRED) FUR ZI	ONE AO AND ZONE A (WITHOUT BFE) It a LOMA or LOMR-F request, complete sed. In Puerto Rico only, enter meters.
Provide elevation information for thighest adjacent grade (HAG) and a) Top of bottom floor (including bor enclosure) is	The lowest adjacent group (E. 197	riate boxes to show wheth	ner the elevation is above or below the neters above or below the HAG.
b) Top of bottom floor (including b		(feet (m	
or enclosure) is E2. For Building Diagrams 6 -9 with p higher floor (elevation C2.b in the diag	ermanent flood openings provided grams) of the building is	in Section A Items 8 and	for 9 (see pages 8 -9 of Instructions), the next meters above or below the HAG.
E3. Attached garage (top of slab) is		C feet C m	eters above or below the HAG.
E4. Top of platform of machinery and servicing the building is		(feet (m	Land Issued
E5. Zone AO only: If no flood depth n management ordinance? Yes		bottom floor elevated in ficial must certify this info	accordance with the community's floodplain mation in Section G.
SECTION F	- PROPERTY OWNER (OR OWN	VER'S REPRESENTATIV	(E) CERTIFICATION
The second secon	Agreements of any other than the state of th	Castions A R and F for	Zone A (without a FENIA-ISSUED OF
community-issued BFE) or Zone AO	must sign here. The statements in	Sections A, B, and E are	contest to the best of my knowledge.
Property Owner or Owner's Authorize		State	ZIP Code
Address	City	State	211 0000
Signature	Date	Telephone	
Comments			
	The same of the sa		Check here if attachments



BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Urit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

856 S. Sgt. Wood 11 Ln

City
Capp Verde

AZ 86322

FOR INSURANCE COMPANY USE

FOR INSURANCE COMPANY USE

Company Namber:

City State Zip Code AZ 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.



FRONT AIR COND. ON ROOF



856 S. WOODALL LN CAMP VERDE , AZ 86322



N.W. CORNER HOUSE, AIR CONDITIONER



S.W. CORNER HOUSE

856 S. WOODALL LANE CAMP VERDE, 86322



LOOKING E.E.S. BLDG. WITH ELECT. POWER



BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (Indian St

856 S. SGT WOODALL LN

City CAMP VERDE , ARIZONA 86322 Zip Code Company NAIC Number:

