O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:		
BUILDING OWNER'S NAME TAMES D. & Diane J. MurPhy			Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or E	Company NAIC Number				
CITY	O . STATE	ZIPO	CODE		
CHMP Verde	Hrizona	86325)		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) RESIDENTIAL 404-35-012 A					
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)					
LATITUDE/LONGITUDE (OPTIONAL) HORIZON (##° - ## - ##.##" or ##.#####°) NAD 1927		URCE: GPS (T USGS	ype): Quad Map		
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INFOR	RMATION			
	2. COUNTY NAME		B3. STATE AZ		
Camp Verde, 040131	Yarapai		nc nc		
B4. MAP AND PANEL B5. SUFFIX	B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)		
NUMBER B6. FIRM INDEX DATE 40425C2215	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood	June 6, 01	Shorted X	3067.4		
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe):					
B11. Indicate the elevation datum used for the BFE in B9: 🔀 NGVD 1929		Other (Describe):			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) a			o Designation Date		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
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.					
C2. Building Diagram Number I (Select the building diagram most similar to the	ne building for which this certificate is being	g completed - see pag	ges 6 and 7. If no diagram		
accurately represents the building, provide a sketch or photograph.)					
C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in					
Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section B or Section B. as appropriate, to document the datum conversion.					
Section D or Section G, as appropriate, to document the datum conversion. Datum Conversion/Comments SEE NOTES IN SECTION D Flouration reference medium Section and appear on the FIDMS TY Yea.					
Elevation reference mark used Does the elevation reference mark	tused appear on the Firther (A) res] No	The state of the s		
o a) Top of bottom floor (including basement or enclosure)	<i>30<u>69</u>.<mark>68</mark>t.</i> (m)	<u>a</u>	ED LAND		
o b) Top of next higher floor	<u> </u>	oossed Seal, Date	AL SEICATE PEN		
o c) Bottom of lowest horizontal structural member (V zones only)	<u> </u>	osse	18/45 10/12		
o d) Attached garage (top of slab)	306821 ft.(m)	Emb	32286		
o e) Lowest elevation of machinery and/or equipment	- 1/0 % ()	er, E	9 40 10		
servicing the building (Describe in a Comments area)	201 7174 (m)	umb			
o f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG)	<i>3<u>067.47</u>t.</i> (m) 30 <u>68,26</u> ft.(m)	Se N Sig	20000		
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent		License Number, Signature,	VAIZONA, U.S.		
o i) Total area of all permanent openings (flood vents) in C3.h		_			
		TIFIC ATION			
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 in Sections A, B, and C 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.					
CERTIFIER'S NAME IVO WAShington B	uddene III	LICENSE NUMBER	32230		
TITLE OWNer/President	COMPANY NAME R	mronk 1	AND SURVEYS		
ADDRESSY AGA	Rimrock A	rizona	E SI 33 PCODE		
SIGNATURE SIGNATURE	DATE O 12/1	- -	PHONE 20 - 51-7-11-14		
- AND TO VICULIANTE H	5/06/0) (708-1201-1414		
	•				

IMCORTANT: In these spaces, copy the co	prespc in g information from Section A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt, Un		.)	Policy Number
CAMP VERDE	STATE AZ.	ZIP CODE	Company NAIC Number
	CTION D - SURVEYOR, ENGINEER, OR ARCHITEC		
Copy both sides of this Elevation Certificate for	r (1) community official, (2) insurance agent/company, ar	d (3) building owner.	
COMMENTS AT THIS RES	DIDENCE THERE WAS	A DETACHED	3H0P*
·	ELEVATION OF THE		
	ENT GRADE TO THE		
THE LOW ADIAC	SELEVATION INFORMATION (SURVEY NOT REQU	SHOP 16: 3065:	78 Check here if attachments
For Zone AO and Zone A (without BFE), comple	ete Items E1 through E4. If the Elevation Certificate is in		
Section C must be completed.			- C 17 K 1
represents the building, provide a sketch or	ding diagram most similar to the building for which this only photograph.)	erulicate is being completed – see page	s 6 and 7. If no diagram accurately
E2. The top of the bottom floor (including basem		above or. Delow (check one)	the highest adjacent grade. (Use
natural grade, if available).	on page 7) the part higher floor or elevated floor (elevat	on h) of the building is ft/m) in (a	
cs. For building Diagrams 6-6 with openings (se grade. Complete items C3.h and C3.i on fro	ee page 7), the next higher floor or elevated floor (elevation) of form.	on b) of the building is it.(m)in.(c	m) above the highest adjacent
	r is available, is the top of the bottom floor elevated in ac	cordance with the community's floodpla	in management ordinance?
	al official must certify this information in Section G.		
	CTION F - PROPERTY OWNER (OR OWNER'S REF		
•	resentative who completes Sections A, B, C (Items C3.h estatements in Sections A, B, C, and E are correct to the	• • • • • • • • • • • • • • • • • • • •	ut a FEMA-Issued or community-
PROPERTY OWNER'S OR OWNER'S AUTHORI			
ADDRESS	CITY	STA	TE ZIP CODE
SIGNATURE	DATE	TELE	PHONE
COMMENTS			
	2525012 2014/1/50214	TOW (OPTIONAL)	Check here if attachments
The least official who is sutherized by law or and	SECTION G - COMMUNITY INFORMATION IN THE COMMUNITY INFORMATION INFORMATION IN THE COMMUNITY INFORMATION INFORMATI		A D C (or E) and C of this Elevation
The local official who is authorized by law of ord Certificate. Complete the applicable item(s) and		ement ordinance can complete Section:	3 A, B, C (or E), and G of this Elevation
	from other documentation that has been signed and er		er, or architect who is authorized by
	ormation. (Indicate the source and date of the elevation • E for a building located in Zone A (without a FEMA-iss		۸0
	i) is provided for community floodplain management pu		AO.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		MPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: New	Construction Substantial Improvement	L	
G8. Elevation of as-built lowest floor (including b		ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at the	e building site is:	ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	· · · · · · · · · · · · · · · · · · ·
SIGNATURE		DATE	
COMMENTS			
			Check here if attachmen