U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OWR 160' 1000-0009						
Expiration	Date:	July 31	. 2015			

1 ,						
SECTION A - PROPERTY INFORMATION						
A1. Building Owner's Name ARLENE CHRISTEN STAN						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4150 ELM ST. LAKE MONTE ZO MA A.Z.						
City LAKE MONTEZUMA State AZ ZIP Code 863						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) LES A5. Latitude/Longitude: Lat. Long. Horizontal Datum: NAD 1927 NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number	+ -					
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings? A9. For a building with an attached garage: a) Square footage of attached garage: b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFOR	RMATION					
B1. NFIP Community-Name & Community Number AVAPAI COUNTY 040095 B2. County Name AVAPAI	B3. State AZIZOSA					
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel B8. Effective/Revised Date Zor	Flood B9. Base Flood Elevation(s) (Zone AO, use base flood depth)					
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	330112					
FIS Profile FIRM Community Determined Other/Source:						
B11 Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area Designation Date: OPA						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY	REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Under Construction A new Elevation Certificate will be required when construction of the building is complete.						
OR FlowFord Zong At A30 AE AH A (with BEF) VE V1-V30, V (with BEE), 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: RM 128 Vertical Datum: 3391.51	188) TBM @ 3490 YUNA 12					
Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929	988 Other/Source:					
Datum used for building elevations must be the same as that used for the Brit.	Check the measurement used.					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)						
b) Top of the next higher floor	☐ feet ☐ meters ☐ feet ☐ meters					
c) Bottom of the lowest horizontal structural member (V Zones only)	☐ feet ☐ meters					
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)	feet meters					
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	☐ feet ☐ meters					
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERT	FICATION					
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to cer information. I certify that the information on this Certificate represents my best efforts to interpret the data avail understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section						
The state of the s	vided by a					
☐ Check here if comments are provided on back of form: ☐ Check here if attachments. ☐ Licensed land surveyor? ☐ Yes ☐						
Certifier's Name VANCE L MCDONALD License Number 535	7 (E ModoNALD					
Title CURVETOR Company Name PLAISHILLAS DESKIN 4550						
Address 1355 Rocky Kindscity Co Trossom & State AZ ZIP Code 86326						
Signature C 11 Date 22APZK-14 Telephone 928-567	3141					
028 971-10	95					

EVATION CERTIFICATE, PA		- tion from Capil	on A	200	SUFANICE COMPANY USE
All Citivititis dicoc chacks and an					Number Wilder
4140 ELVATI.	LAKE DODIES	UIU K			W.N.S. Change
W LAKE MOSTE			ode 863	22.4	
	D - SURVEYOR, ENGINEER				JED)
opy both sides of this Elevation Certi	ficate for (1) community official, (2) insurance agent/con	rpany, and (3) bu	ilding owner.	
ionments (PED) B.W. 1 EL = 3385	STOP REBUT	PDV. COR	, N. WO:	ot con	HEC
				w Marane com and a transcription of the	geographical and the second
Ignature Varl			LAPPUL		
SECTION E - BUILDING ELE	VATION INFORMATION (SU	RVEY NOT REQUI	RED) FOR ZOI	IE AO AND	ZONE A (WITHOUT BFE)
grade (HAG) and the lowest adji a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including 32. For Building Diagrams 6–9 with (elevation C2.b in the diagrams) 33. Attached garage (top of stab) is 44. Top of platform of machinery an 45. Zone AO only: If no flood depth ordinance? SECTION	basement, crawispace, or enclos basement, crawispace, or enclos permanent flood openings provide of the building is feet m d/or equipment servicing the build number is available, is the top of Unknown. The local official multiple of the property owner (O	ure) is ure) is ad in Section A Items if if feet meters eters above or ing is the bottom floor eleva st certify this informati R OWNER'S REPR s Sections A, B, and E	☐ feet ☐ m ☐ feet ☐ m ☐ and/or 9 (see pi ☐ above or ☐ ☐ below the HAG ☐ feet ☐ meter ted in accordance on in Section G. ESENTATIVE	eters	e or Delow the HAG. e or Delow the LAG. structions), the next higher floor i. Delow the HAG. nunity's floodplain management
r Zone AO must sign here. The state	ments in Sections A, B, Bild E are	correct to the best of	my knowledge.		
roperty Owner's or Owner's Authoriz	ed Representative's Name	City		State	ZIP Code
Address				Telephone	
ignature	W	Date		- Cicpitotio	Mary Control of the C
omments					☐ Check here if attachment
	SECTION G - COMMU	INITY INFORMATI	ON (OPTIONAL	_)	
is authorized by law to certify a A community official completed	or ordinance to administer the con applicable item(s) and sign below. was taken from other documentation elevation information. (Indicate the disease of the second is section of the second disease of the second is second in the second in the second in the second is second in the second in th	on that has been signed e source and date of the in Zone A (without a F	ed and sealed by he elevation deta EMA-issued or c	a licensed sur in the Comme ommunity-issu	veyor, engineer, or architect who ents area below.)
	G5. Date Permit Issued				a/Occupancy Issued
4. Permit Number	Go, Date remit issued	35.			
This permit has been issued for Elevation of as-built lowest floor (in BFE or (in Zone AO) depth of flood Community's design flood elevation	cluding basement) of the building: ing at the building site:		rent] feet	rs Datun	n n
cal Official's Name		Title			
ommunity Name		Telephon	B		
gnature		Date			
omments					Check here if attachment
		· · · · · · · · · · · · · · · · · · ·			Replaces all previous edifions

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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

4 1 5 0 N. ELM DR

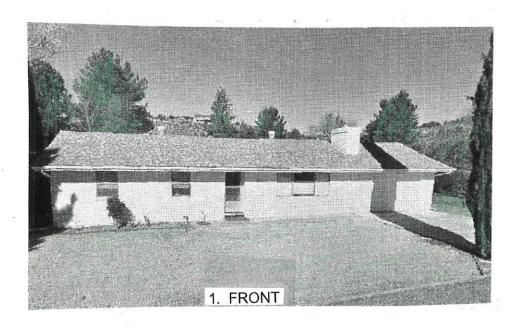
City RIMBOCH

State AZ Zip Code 8 6 3 3 5 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.



2. SECORNER OF HOUSE



ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

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

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

A 150 N. ELM DR.

City RIMROCK, AZ, 86335 State AZ ZIP Code 866335 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.

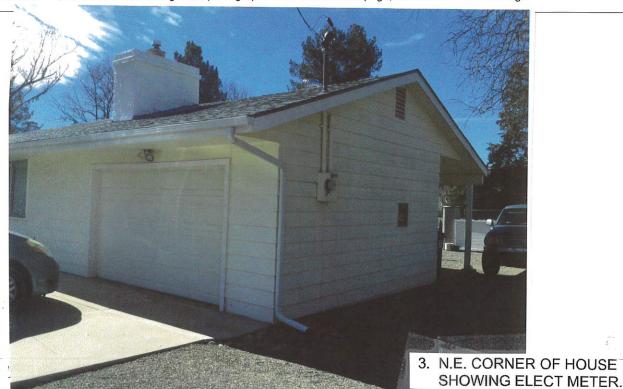
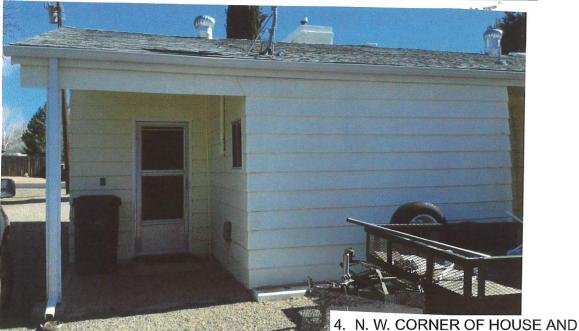


Photo One



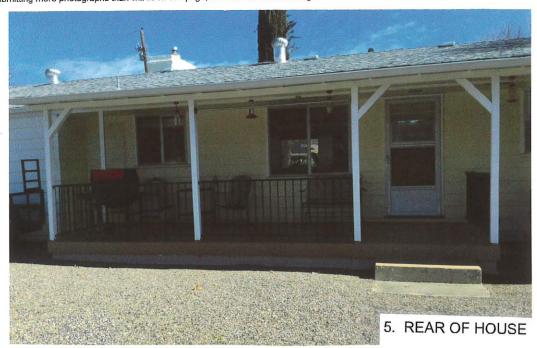
4. N. W. CORNER OF HOUSE AND ELECTRIC OUTLET 4 FT ABOVE FLOOR

Photo Two

See instructions for Item A6

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

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.





6. AIR CONDITIONER ON CONCRETE PORCH FLOOR

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.		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 4150 N. ELM DR		Policy Number:		
CITY PIM DOCK	State AZ Zip Code 8633	Company NAIC		

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.



- 7. GEN LAYOUT ON LOT
- 8. CONSISTENT LOCATION OF ELECTRIC OUTLETS 8 INCHES ABOVE FLOOR OF HOUSE AND 4 FEET ABOVE GARAGE FLOOR.

