ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE								
A1. Building Owner's Name	Policy Number:								
STILES & BRUCE ENTERPRISES									
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5500 N. BARBARA LANE									
City State ZIP Code									
RIMROCK Arizona 86335									
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 621 LAKE MONTEZUMA ESTATES UNIT 2 APN 405-25-638									
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL									
A5. Latitude/Longitude: Lat. 34 38 59.1 Long. 111 46 2.2 Horizontal Dat	um: 🔲 NAD 1927 🛛 🗙 NAD 1983								
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood ins	urance.								
A7. Building Diagram Number 1B									
A8. For a building with a crawlspace or enclosure(s):									
a) Square footage of crawlspace or enclosure(s) N/A sq ft									
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abo	ve adjacent grade N/A								
c) Total net area of flood openings in A8.b N/A sq in									
d) Engineered flood openings? 🗌 Yes 🗵 No									
A9. For a building with an attached garage:									
a) Square footage of attached garage 492.00 sq ft									
) b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacen	t grade 0								
c) Total net area of flood openings in A9.b 0.00 sq in									
d) Engineered flood openings?									
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORM	IATION								
B1. NFIP Community Name & Community NumberB2. County NameUnincorporated Yavapai County #040093YAVAPAI, Unincorporated Area	B3. State Arizona								
Number Date Effective/ Zone(s)	. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)								
04025C1820 G 12-17-2020 09-03-2010 A 3513.2									
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:									
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									

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022			
IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., 5500 N. BARBARA LANE	Policy Number:			
City RIMROCK	State Arizon a	ZIP Code 86335	Company NAIC Number	
SECTION C	- BUILDING ELEVATION IN	FORMATION (SURVEY	REQUIRED)	
 C1. Building elevations are based on: *A new Elevation Certificate will b C2. Elevations – Zones A1–A30, AE, Complete Items C2.a–h below ac 	e required when construction of AH, A (with BFE), VE, V1–V30,	the building is complete. V (with BFE), AR, AR/A, A	R/AE, AR/A1–A30, AR/AH, AR/AO.	
Benchmark Utilized: ERM 134	Vertica	88)		
Indicate elevation datum used for	· -	ih h) below.		
Datum used for building elevation	s must be the same as that used	I for the BFE.	Check the measurement used.	
a) Top of bottom floor (including	basement, crawispace, or enclos	sure floor)	3514.0 🕅 feet 🗌 meters	
b) Top of the next higher floor			N/A feet meters	
· · · -	l structural member (V Zones or		N/A ∏ feet ∏ meters	
d) Attached garage (top of slab)			3514.0 🔀 feet 🗌 meters	
e) Lowest elevation of machinery (Describe type of equipment a	or equipment servicing the built nd location in Comments)	ding	3516.6 🔀 feet 🗌 meters	
f) Lowest adjacent (finished) gra	de next to building (LAG)		3513.3 🗙 feet 🛄 meters	
g) Highest adjacent (finished) gra	ade next to building (HAG)		3513.5 🗙 feet 🗌 meters	
 h) Lowest adjacent grade at lowe structural support 		duding	N/Afeetmeters	
SECTION	D - SURVEYOR, ENGINEER,	OR ARCHITECT CERT	IFICATION	
This certification is to be signed and so I certify that the information on this Ce statement may be punishable by fine of	ealed by a land surveyor, engine rtificate represents my best effor	er, or architect authorized	by law to certify elevation information.	
Were latitude and longitude in Section	A provided by a licensed land s	urveyor? 🗌 Yes 🗵 No		
Certifier's Name TIMOTHY L. HAMMES	License Nu L.S. 29263	mber	Carbon Carbon	
Title PRESIDENT				
Company Name HA MME S SURVEYING LLC			Hammes	
Address 2100 VIA SILVERADO			TRIZONA US	
City CAMP VERDE	State Arizona	ZIP Code 86322	01/04/2021	
Signature	Date 01-04-2021	Telephone (928) 567-2833	Ext.	
Copy all pages of this Elevation Certification	ite and all attachments for (1) con	nmunity official, (2) insuranc	e agent/company, and (3) building owner.	
Comments (including type of equipment	nt and location, per C2(e), if app	licable)		
LOWEST ELEVATION OF MACHINE	RY SERVICING THE BUILDING	IS 3516.6 FOR A HOT W	ATER HEATER IN THE GARAGE.	

ELEVATION CERTIFICATE	See Instruction		OMB No. 1660-0008 Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the c	orresponding informatio	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit			Policy Number:
City	State	ZIP Code	Company NAIC Number
If using the Elevation Certificate to obta instructions for Item A6. Identify all photog "Left Side View." When applicable, photo vents, as indicated in Section A8. If submit	raphs with date taken; "Fr graphs must show the fo	ont View" and "Rear View"; a oundation with representative	nd, if required, "Right Side View" and e examples of the flood openings or
	Photo	One	
Photo One Caption			
	Photo	Тжо	

BUILDING PHOTOGRAPHS

Photo Two Caption

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suile, and/or Bidg, No.) or P.O. Route and Box No. Policy Number: City State ZIP Code Company NAIC Number: City State ZIP Code Company NAIC Number: If submitting more photographs than will fit on the preceding page, affic 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 verts, as indicated in Section A8. Photo Three Caption	ELEVATION CERTIFICATE	BUILDING PH Continua		OMB No. 1660-0008 Expiration Date: November 30, 2022
Building Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No. Policy Number: City State ZIP Code Company IMIC Number: If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: data basis, "Front View", and "Real View", and, "If acquide," Tight Side View" and "Left Side View" and	IMPORTANT: In these spaces, copy the co	orresponding information	on from Section A.	FOR INSURANCE COMPANY USE
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs whit 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.	Building Street Address (including Apt., Unit,	Suite, and/or Bldg. No.)	or P.O. Route and Box No.	
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.	City	State	ZIP Code	Company NAIC Number
Photo Three Caption Photo Four	with: date taken; "Front View" and "Rea	ar View"; and, if require	ed, "Right Side View" and '	"Left Side View." When applicable,
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		Photo	Four	

BUILDING PHOTOGRAPHS

FEMA Form 086-0-33 (12/19)

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency P

ELEVATION CERTIFICA

OMB No. 1660-0008 Expires February 28, 2009

		Read the instructions			For Insurance Company Use: Policy Number
1. Buil	ding Owner's Name	Floronises			
	ding Street Address (including Apt., Unit, Suite, and/or E	Bidg. No.) or P.O. Route and	Box No.		Company NAIC Number
	4755 E. Kose CT.	State		ZIP	Code 86335
City	Rimcock		A2.		00000
	perty Description (Lot and Block Numbers, Tax Parcel N 405-25-63%				
4. Bui	Iding Use (e.g., Residential, Non-Residential, Addition, J	Accessory, etc.) Resid	tential Hor	rizontal Dati	Im: NAD 1927 X NAD 19
	ilding Use (e.g., Residential, Non-Residential, Addition, f itude/Longitude: Lat. <u>$34^{\prime}38.59$</u> Lo ach at least 2 photographs of the building if the Certifica				
16. Att	ach at least 2 photographs of the building if the certification of the building is the building if the certification of the building is the building if the certification of the building is the building if the building is the building if the building is the building if the building is the building is the building is the building is the building if the building is the building is the building is the building if the building is the building	te is boing about the			d anrana provide.
AR En	r a building with a crawl space or enclosure(s), provide:	A9.	For a building wit a) Square foota	h an attacht	ed garage, provide: ed garage 400 sq ft
2)	Square footage of crawl space or enclosure(s)	NA sq ft	b) No of perma	nent flood o	penings in the attached galage
b)	No of permanent flood openings in the crawl space or	. 1	walls within 1	.0 foot abov	e adjacent grade
	enclosure(s) walls within 1.0 foot above adjacent grade Total net area of flood openings in A8.b	sq in	c) Total net are	a of flood op	penings in A9.b sq
C)		INSURANCE RATE MA	AP (FIRM) INFOR	RMATION	
		B2. County Name		B	3. State Az,
B1. NF	IP Community Name & Community Number	AV9A	/		
	tap/Panel Number B5. Suffix B6. FIRM Inde	x B7. FIRM Pan		Flood	B9. Base Flood Elevation(s) (A AO, use base flood depth)
84. W	Date	Effective/Revised	/	one(s)	3510,87
04	025°61845 F June 620	of JUNE 6 ZO		irrear	
10. In	dicate the source of the Base Flood Elevation (BFE) dat	ta or base flood depth enter	ed in item B9.	10000	XILLIO S
Г	FIS Profile FIRM Community Deter	minea Alouiei (oc	001007	10.0ml	,
311 lr	dicate elevation datum used for BFE in Item B9:	GVD 1929 NAVD 19	88 Dother (L		Yes No
312 1	the building located in a Coastal Barrier Resources System		vise protected Alea		
A 1 444 1 10					
D	Designation Date				
C	Designation Date				ED)
	SECTION C - BUILDIN	G ELEVATION INFORM	ATION (SURVE)	REQUIR	ED)
	SECTION C - BUILDING	G ELEVATION INFORM	ATION (SURVE)	REQUIR	Finished Construction
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See reverse side for continuation.

Replaces all previous ed

IMPORTANT: In these spaces,	copy the corresponding information fi	rom Section A.	For Insur	ance Company Use:
Building Street Address (including Apt	t., Unit, Suite, and/or Bldg. No.) or P.O. Route		Policy Nu	
City Rim Rock	Rose C7. State Anizo	ZIP Co 8633	de Company	V NAIC Number
	N D - SURVEYOR, ENGINEER, OR ARC			
Copy both sides of this Elevation Certi	ificate for (1) community official, (2) insurance	agent/company, and (3) buil	lding owner.	
Comments	s on Roof			
mech.	s on root.			
Signature		ate		
				Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZON	E AO AND ZONE	A (WITHOUT BFE)
 and C. For Items E1-E4, use natural E1. Provide elevation information for grade (HAG) and the lowest adjia) Top of bottom floor (including b) Top of bottom floor (including celevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery an E5. Zone AO only: If no flood depth 	basement, crawl space, or enclosure) is basement, crawl space, or enclosure) is permanent flood openings provided in Section) of the building is feet	used. In Puerto Rico only, er es to show whether the eleva	nter meters. ation is above or below rs above or above or ge 8 of Instructions) below the HAG. rs above or [ow the highest adjacent below the HAG. below the LAG. the next higher floor below the HAG.
	N F - PROPERTY OWNER (OR OWNER ized representative who completes Sections A			
	ements in Sections A, B, and E are correct to t		ul a FEMA-Issueu (or community-issued DFC)
Property Owner's or Owner's Authoriz	ed Representative's Name			
Address	City		State ZIP	Code
Signature	Date		Telephone	
Comments				
			г	7
			L	Check here if attachment
The local official who is authorized by la	SECTION G - COMMUNITY INFO aw or ordinance to administer the community's	and the second se		e Sections A. B. C. (or F)
and G of this Elevation Certificate. Con G1. The information in Section C is authorized by law to certify G2. A community official complete G3. The following information (Ite	mplete the applicable item(s) and sign below. was taken from other documentation that has elevation information. (Indicate the source ar ed Section E for a building located in Zone A (ems G4G9.) is provided for community floodp	Check the measurement use been signed and sealed by and date of the elevation data without a FEMA-issued or co lain management purposes.	ed in Items G8. and a licensed surveyor in the Comments a community-issued BF	G9. , engineer, or architect who rea below.) E) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate	Of Compliance/Occ	upancy issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood		[] feet [] m	neters (PR) Datur neters (PR) Datur	
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments				
			г	
				Check here if attachment

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