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

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and	all attachments for (1) community offici	ial (2) insurance agent/company	and (3) building owner

SECTION A - PRO	OPERTY INFOR	MATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name GRAY JEFFREY CAIN				Policy Num	ber:
 A2. Building Street Address (including Apt., L Box No. 4735 E LYNN CT 	Jnit, Suite, and/o	r Bldg. No.) o	P.O. Route and	Company N	AIC Number:
City		State		ZIP Code	
RIMROCK		Arizona		86335	
A3. Property Description (Lot and Block Num 405-25-644	bers, Tax Parcel	Number, Leç	al Description, etc	2.)	
A4. Building Use (e.g., Residential, Non-Res	idential, Addition	, Accessory, e	etc.) RESIDEN	TIAL	
A5. Latitude/Longitude: Lat. 34°38'53.51N	Long. 1	11°46'03.79W	Horizontal	Datum: 🗌 NAD 1	927 🗙 NAD 1983
A6. Attach at least 2 photographs of the build	ling if the Certific	ate is being u	sed to obtain flood	l insurance.	
A7. Building Diagram Number1B					
A8. For a building with a crawlspace or enclo	sure(s):				
a) Square footage of crawlspace or encl	osure(s)		N/A sq ft		
b) Number of permanent flood openings	in the crawlspace	e or enclosure	(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of flood openings in A8.	b	N/A sq in			
d) Engineered flood openings?	s 🗙 No				
A9. For a building with an attached garage:					
a) Square footage of attached garage		N/A sq ft			
b) Number of permanent flood openings	in the attached g	arage within	1.0 foot above adja	acent grade N/A	
c) Total net area of flood openings in A9.	b	N/A sq	in		
d) Engineered flood openings?	s 🗙 No				
SECTION B - E		NCE RATE	MAP (FIRM) INF		
B1. NFIP Community Name & Community Nu		B2. County		ORMATION	B3. State
YAVAPAI COUNTY #040093	inder		NICORPORATE	AREA	Arizona
B4. Map/Panel B5. Suffix B6. FIRM In Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
04025C1820 G 02-17-2020	09-03-2		ZONE A	3502	
B10. Indicate the source of the Base Flood E	levation (BFE) da	ata or base flo	ood depth entered	in Item B9:	
🗌 FIS Profile 🗌 FIRM 📋 Communi	ty Determined	X Other/Sou	ce: Beaver Creel	k School Wash Stu	dy
B11. Indicate elevation datum used for BFE i	n Item B9: 🔲 N	GVD 1929 [X NAVD 1988	Other/Source:	
B12. Is the building located in a Coastal Barr	ier Resources Sy	/stem (CBRS	area or Otherwis	e Protected Area (C	DPA)? 🗌 Yes 🕱 No
Designation Date:	CBRS				

ELEVATION CERTIFICATE			OMB No. 1660 Expiration Date)-0008 e: November 30, 2022
IMPORTANT: In these spaces, copy the corr	esponding informatio	n from Section A.		NCE COMPANY USE
Building Street Address (including Apt., Unit, S 4735 E LYNN CT			Policy Numbe	
City RIMROCK	State Arizona	ZIP Code 86335	Company NAI	C Number
SECTION C - BUI	LDING ELEVATION I	NFORMATION (SURVEY	REQUIRED)	
 C1. Building elevations are based on: *A new Elevation Certificate will be requi C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according Benchmark Utilized: DH5787 Indicate elevation datum used for the ele NGVD 1929 X NAVD 1988 Datum used for building elevations must 	with BFE), VE, V1–V30 to the building diagram Verti vations in items a) throu Other/Source:	of the building is complete. b, V (with BFE), AR, AR/A, A h specified in Item A7. In Pue ical Datum: <u>3576.10 (NAVD</u> ugh h) below.	R/AE, AR/A1–A30 erto Rico only, ent	nished Construction D, AR/AH, AR/AO. er meters. –
 a) Top of bottom floor (including baseme b) Top of the next higher floor c) Bottom of the lowest horizontal structured d) Attached garage (top of slab) e) Lowest elevation of machinery or equivalence (Describe type of equipment and location) f) Lowest adjacent (finished) grade next g) Highest adjacent (finished) grade next h) Lowest adjacent grade at lowest elevation 	ural member (V Zones of ipment servicing the bu tion in Comments) to building (LAG) t to building (HAG)	ilding	Check the 3503.2 X fee N/A fee N/A fee N/A fee 3503.3 X fee 3500.2 X fee 3500.2 X fee 3500.2 X fee 3500.2 X fee	et in meters
SECTION D - SU	RVEYOR, ENGINEER	R, OR ARCHITECT CERTI	IFICATION	
This certification is to be signed and sealed by I certify that the information on this Certificate statement may be punishable by fine or imprise Were latitude and longitude in Section A prove	y a land surveyor, engir represents my best eff sonment under 18 U.S.	neer, or architect authorized orts to interpret the data ava Code, Section 1001.	by law to certify e milable. I understan	levation information. Ind that any false here if attachments.
Certifier's Name SHANE M. NAUERT, RLS. Title REGISTERED LAND SURVEYOR Company Name HERITAGE LAND SURVEY AND MAPPING Address 738 S. PARKS DRIVE City CAMP VERDE	License N RLS 4886 NC. State Arizona		Contraction of the second seco	HANE M. NACERT
Signature	Date	Telephone	Ext.	
Add	04-05-202	(
Copy all pages of this Elevation Certificate and a Comments (including type of equipment and lo LOWEST MACHINERY IS AN AC UNIT ON V	ocation, per C2(e), if ap	plicable)	e agent/company,	and (3) building owner.

ELEVATION CERTIFICATE			OMB No. 1660- Expiration Date:	0008 November 30, 2022
IMPORTANT: In these spaces, copy the corre	esponding information	from Section A.	FOR INSURAN	ICE COMPANY USE
Building Street Address (including Apt., Unit, St 4735 E LYNN CT	uite, and/or Bldg. No.) c	r P.O. Route and Box No		
City RIMROCK	State Arizona	ZIP Code 86335	Company NAIC	Number
SECTION E – BUILDI FOI	NG ELEVATION INF R ZONE AO AND ZO	ORMATION (SURVEY NE A (WITHOUT BFE)	NOT REQUIRED)	
 For Zones AO and A (without BFE), complete It complete Sections A, B, and C. For Items E1–E4 enter meters. E1. Provide elevation information for the follow the highest adjacent grade (HAG) and the a) Top of bottom floor (including basemen crawlspace, or enclosure) is b) Top of bottom floor (including basemen crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent the next higher floor (elevation C2.b in the diagrams) of the building is E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipr servicing the building is E5. Zone AO only: If no flood depth number is a floodplain management ordinance? Y 	ems E1–E5. If the Cert 4, use natural grade, if ing and check the appr lowest adjacent grade (t, t, t, flood openings provide nent available, is the top of t 'es No Unkr TY OWNER (OR OWN	ificate is intended to suppavailable. Check the mean operate boxes to show whether the second state of the section A ltems 8 and the section A ltems 8 and the section floor elevated own. The local official means and the sections A B and E field and the sections A B and E field to s	asurement used. In Punchether the elevation is meters above or meters above or moters above or meters above or meters above or meters above or meters above or meters bove or meters bove	 above or below below the HAG. below the LAG. constructions), below the HAG.
community-issued BFE) or Zone AO must sign Property Owner or Owner's Authorized Represe	here. The statements in	Sections A, B, and E an	e correct to the best o	f my knowledge.
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
			Check h	ere if attachments.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, S 4735 E LYNN CT	uite, and/or Bldg. No.)	or P.O. Route and Box No	Policy Number:				
City RIMROCK	State Arizona	ZIP Code 86335	Company NAIC Number				
SECTIO	ON G - COMMUNITY I	NFORMATION (OPTION	L)				
 The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters. 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 Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4–G10) is provided for community floodplain management purposes. 							
G4. Permit Number	G5. Date Permit Issu	ued G	 Date Certificate of Compliance/Occupancy Issued 				
 G7. This permit has been issued for: G8. Elevation of as-built lowest floor (including of the building: G9. BFE or (in Zone AO) depth of flooding at the building of the building at the building of the building at the building a	g basement)		feet 🗌 meters Datum feet 🗌 meters Datum				
G10. Community's design flood elevation:			feet 🗌 meters Datum				
Local Official's Name		Title					
Community Name		Telephone					
Signature		Date					
Comments (including type of equipment and loc	cation, per C2(e), if app	licable)	☐ Check here if attachments.				
EEMA Form 096 0.22 (12/10)							

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 4735 E LYNN CT	Policy Number:		
City RIMROCK	State Arizona	ZIP Code 86335	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.

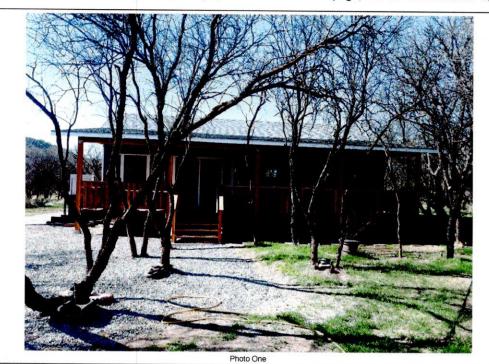


Photo One Caption NORTH FACE

Clear Photo One

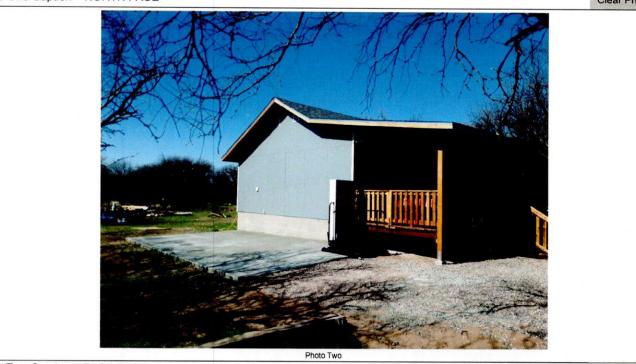


Photo Two Caption EAST FACE

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 4735 E LYNN CT	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box N	o. Policy Number:
City RIMROCK	State Arizona	ZIP Code 86335	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix 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 vents, as indicated in Section A8.



Photo Four Caption WEST FACE

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.

					,, , ,		
SECTION A – PROPERTY INFORMATION							ANCE COMPANY USE
A1. Building Owne GRAY JEFFREY C						Policy Numb	
A2. Building Street Box No. 4735 E LYNN CT	Address (ind	cluding Apt., Unit, Suite	ə, and/or	Bldg. No.) or	P.O. Route and	Company N	AIC Number:
City				State		ZIP Code	
RIMROCK				Arizona		86335	
A3. Property Desc 405-25-644	ription (Lot a	nd Block Numbers, Ta	x Parcel	Number, Leg	al Description, etc).) 	
A4. Building Use (e.g., Resider	tial, Non-Residential, .	Addition,	Accessory, e	etc.) RESIDEN	TIAL	
A5. Latitude/Longi	ude: Lat. 34	4° 38' 53.51" N	Long. 11	11° 46' 3.79" \	W Horizontal	Datum: 🗌 NAD 1	927 🛛 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain flood	d insurance.	
A7. Building Diagra	am Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)			N/A sq ft		
b) Number of p	permanent flo	ood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de <u>N/A</u>
c) Total net ar	ea of flood o	penings in A8.b		N/A sq in			
d) Engineered	flood openir	ngs? 🗌 Yes 🖾 N	lo				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		<u>N/A</u> sq ft			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above adj	acent grade N/A	
c) Total net an	ea of flood o	penings in A9.b		N/A sq	in		
d) Engineered	flood openin	gs? 🗌 Yes 📈 N	10				
	SI	ECTION B - FLOOD	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Commun YAVAPAI COUNT		Community Number		B2. County YAVAPAI, L	Name JNINCORPORATI	ED AREA	B3. State Arizona
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) Base Flood Depth)
04025C1820	G	02-15-2019	09-03-2		ZONE A	3502	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
B11. Indicate elev	ation datum (used for BFE in Item B	9: 🗌 N	GVD 1929	🗙 NAVD 1988	Other/Source:	
B12. Is the buildin	g located in a	a Coastal Barrier Resc	ources Sy	ystem (CBRS) area or Otherwis	e Protected Area (0	DPA)? 🗌 Yes 🔀 No
Designation	Date:		CBRS	ΟΡΑ	2		•
	1	Contra			x ¹		
							and the second

ELEVATION CERTIFICATE			OMB No. 1660- Expiration Date	0008 : November 30, 2022
IMPORTANT: In these spaces, copy the corresponding i	FOR INSURAN	ICE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or E 4735 E LYNN CT	Bldg. No.) or P.O. Rou	te and Box No.	Policy Number	
City State RIMROCK Arizo		Code 35	Company NAIC	C Number
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY R	EQUIRED)	
 C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when cor C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the building Benchmark Utilized: DH5787 	nstruction of the buildir ′E, V1–V30, V (with Bf ng diagram specified i	E), AR, AR/A, AR	/AE, AR/A1–A30 to Rico only, ente	ished Construction , AR/AH, AR/AO. er meters.
Indicate elevation datum used for the elevations in ite	ms a) through h) belov	v .		
☐ NGVD 1929 ⊠ NAVD 1988 ☐ Other/So Datum used for building elevations must be the same		FE.	Check the n	neasurement used.
a) Top of bottom floor (including basement, crawlspa	ice, or enclosure floor)		3503.2 × feet	t 🔲 meters
b) Top of the next higher floor			N/A [] feet	t 🔲 meters
c) Bottom of the lowest horizontal structural member	(V Zones only)			
d) Attached garage (top of slab)			N/A feet	t 📋 meters
 e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comn 	cing the building nents)		N/A [] fee	
f) Lowest adjacent (finished) grade next to building ((LAG)		N/A fee	t 📋 meters
g) Highest adjacent (finished) grade next to building	(HAG)		N/A fee	t 🔲 meters
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including		N/A 🗌 fee	t 🔲 meters
SECTION D – SURVEYOR, I	ENGINEER, OR ARC	HITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land surv I certify that the information on this Certificate represents r statement may be punishable by fine or imprisonment und	my best efforts to inter	pret the data availa	y law to certify ele able. I understand	evation information. d that any false
Were latitude and longitude in Section A provided by a lice	······································	XYes No	⊠ Check h	ere if attachments.
Certifier's Name CLINTON D. GILLESPIE	License Number RLS 50106			LAND SU
Title REGISTERED LAND SURVEYOR				50106
Company Name HERITAGE LAND SURVEY AND MAPPING INC.				Sea
Address 738 S. PARKS DR.				ZONA, U.S.P.
City CAMP VERDE	State Arizona	ZIP Code 86322	Expire	s <u>9.30.2</u>
Signature	Date 08-26-2020	Telephone (928) 567-9170	Ext.	
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community of	ficial, (2) insurance	agent/company,	and (3) building owner.
Comments (including type of equipment and location, per	C2(e), if applicable)			

ELI	EVATION CERTIFICATE			OMB No. 1660-00 Expiration Date: N	08 Iovember 30, 2022
IMP	ORTANT: In these spaces, copy the correspond	FOR INSURANC	E COMPANY USE		
Bui	ding Street Address (including Apt., Unit, Suite, and 5 E LYNN CT			Policy Number:	
City RIN		State Arizona	ZIP Code 86335	Company NAIC N	lumber
	SECTION E – BUILDING EL	EVATION INFOR	MATION (SURVEY N	OT REQUIRED)	
			A (WITHÒUT BFE)		
com	Zones AO and A (without BFE), complete Items E1 plete Sections A, B,and C. For Items E1–E4, use n er meters.				
E1.	Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a a) Top of bottom floor (including basement,	check the appropr adjacent grade (LA	iate boxes to show whe G).	ther the elevation is al	bove or below
	crawlspace, or enclosure) is		feet 🗌 me	eters	below the HAG.
	 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet me	eters 🗌 above or [below the LAG.
F2	For Building Diagrams 6–9 with permanent flood o	penings provided i			
	the next higher floor (elevation C2.b in the diagrams) of the building is	peringe previded i			below the HAG.
E3	Attached garage (top of slab) is				below the HAG.
	Top of platform of machinery and/or equipment				
E5	servicing the building is Zone AO only: If no flood depth number is available	e is the top of the	feet me		below the HAG.
LU.			n. The local official mu		
	SECTION F - PROPERTY OWN	NER (OR OWNER	S REPRESENTATIVE)	CERTIFICATION	
The com	property owner or owner's authorized representativ munity-issued BFE) or Zone AO must sign here. Th	ve who completes s ne statements in Se	Sections A, B, and E for ections A, B, and E are	^r Zone A (without a FE correct to the best of r	MA-issued or my knowledge.
Pro	perty Owner or Owner's Authorized Representative	s Name			
Add	ress	Ci	ty	State	ZIP Code
Sig	nature	Da	ate	Telephone	
Cor	nments				
				Check he	re if attachments.

F	I F	v	Δ	ΓΙΟ	N	CE	RT	IFI	C.A	TE
-	land here	V.							UA	

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMP.									
Building Street Address (including Apt., Unit, St 4735 E LYNN CT	o. Policy Number:								
City	State	ZIP Code	Company NAIC Number						
RIMROCK	Arizona	86335							
SECTIO	N G – COMMUNITY INFO	ORMATION (OPTION	IAL)						
Sections A, B, C (or E), and G of this Elevation	The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.								
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation								
G2. A community official completed Section or Zone AO.	on E for a building located	in Zone A (without a	FEMA-issued or community-issued BFE	:)					
G3. The following information (Items G4–	G10) is provided for comm	nunity floodplain man	agement purposes.						
G4. Permit Number	G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued						
G7. This permit has been issued for:] New Construction 🗌 Su	ıbstantial Improveme	nt						
G8. Elevation of as-built lowest floor (including of the building:	basement)	□] feet 🦳 meters Datum	_					
G9. BFE or (in Zone AO) depth of flooding at t	he building site:] feet 🔲 meters Datum	_					
G10. Community's design flood elevation:] feet [] meters Datum	_					
Local Official's Name	Т	itle							
Community Name	Т	elephone							
Signature	D	ate							
Comments (including type of equipment and loc	ation, per C2(e), if applica	ble)							
			Check here if attachment	to					
				ι ο .					

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt 4735 E LYNN CT	Policy Number:		
City RIMROCK	State Arizona	ZIP Code 86335	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 Caption NORTH AND EAST SIDE

Clear Photo One



Photo Two Caption SOUTH AND EAST SIDE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 4735 E LYNN CT	Policy Number:		
City RIMROCK	State Arizona	ZIP Code 86335	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix 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 vents, as indicated in Section A8.



Photo Three Caption SOUTH AND WEST SIDE

Photo Four

Photo Four Caption

Photo Four

Clear Photo Four

Clear Photo Three