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.

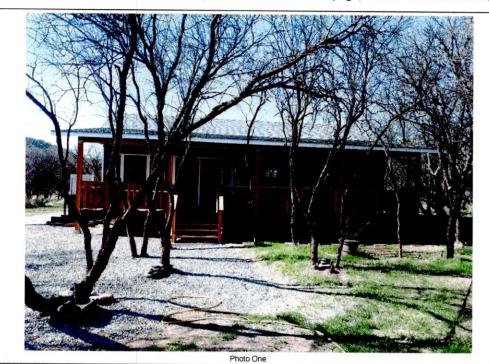


Photo One Caption NORTH FACE

Clear Photo One

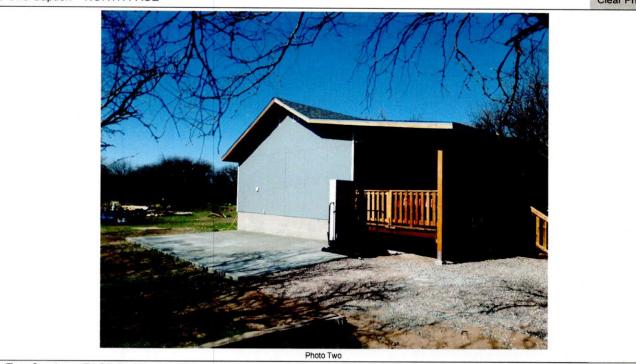


Photo Two Caption EAST FACE

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 | | | | |
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| | | | | Check he | re if attachments. |

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| - | 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) | | | | | | | |
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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