

NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

Expires December 31, 2008

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNERS NAME <u>Haven Homes</u>		Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Company NAIC Number	
CITY <u>Sedona</u>	STATE <u>AZ</u>	ZIP CODE	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>405-56-096 Lot B 95</u>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>Residential</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##-##-## or ##.###)		HORIZONTAL DATUM: SOURCE: <input checked="" type="checkbox"/> GPS (Type): <u>Trimble</u> <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Yavapai County 040093</u>		B2. COUNTY NAME <u>Yavapai</u>	B3. STATE <u>AZ</u>
B4. MAP AND PANEL NUMBER <u>04025C147D</u>	B5. SUFFIX <u>F</u>	B6. FIRM INDEX DATE <u>June 6, 2001</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>June 6, 2001</u>
B8. FLOOD ZONE(S) <u>U X</u>		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>4084.18</u>	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe): <u>Engineering study for Firecliff</u>			
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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.

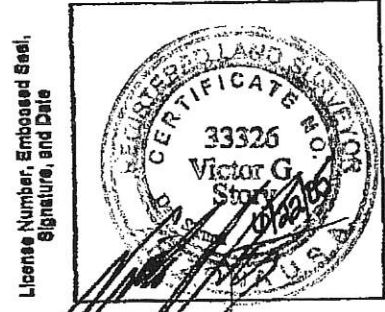
C2. Building Diagram Number 2 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 C3.-a) 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 D or Section G, as appropriate, to document the datum conversion.

Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) 4085.75 ft(m)
- b) Top of next higher floor 4095.80 ft(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft(m)
- d) Attached garage (top of slab) N/A ft(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N/A ft(m)
- f) Lowest adjacent (finished) grade (LAG) 4094.10 ft(m)
- g) Highest adjacent (finished) grade (HAG) 4094.70 ft(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____
- i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)



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 Victor G. Story LICENSE NUMBER 33326

TITLE Land Surveyor COMPANY NAME Pacific Greens, Inc.

ADDRESS 10348 E. Becker Lane CITY Scottsdale STATE AZ ZIP CODE 85260

SIGNATURE _____ DATE _____ TELEPHONE 480-905-8743