639-0159 FÉDERAL EMERGENCY MANAGEMENT AGENCY O.M.B. No. 3067-0077 NATIONAL FLOOD INSURANCE PROGRAM Expires July 31, 2002 ELEVATION CERTIFICATE # 00020 Job Important: Read the instructions on pages 1 - 5. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: mand H. Curumy & Flores & Curumy Policy Nu Revocales Mus BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. KOUTE AND BOX NO. Company NAIC Number 4341 Garden Lane CITY STATE ZIP CODE Cottonwood 86326 Arizona PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) M&B TP# 406-13-067S BUILDING USE (e.g., Residential) Non-residential, Addition, Accessory, etc. Use comments section if necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type: (##° - ##' - ##.##" or ##.####") NAD 1927 ___ NAD 1983 USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** 040093 apal avoypar B4. MAP AND PANEL **B5. SUFFIX B6. FIRM INDEX** B7. FIRM PANEL B8. FLOOD B9. BASE FLOOD ELEVATION(S NUMBER EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) DATE ZONE(S) 040093-865 mar 9, 1999 Dec 19, 1997 3248. 6 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. I I FIRM Community Determined Ul Other (Describe: B11. Indicate the elevation datum used for the BFE in B9: | NGVD 1929 | NAVD 1988 | Other (Describe: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: LIConstruction Drawings* | |Building Under Construction* Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - se pages 4 and 5. 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 C3a-i 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 NGVD 29 Conversion/Comments Elevation reference mark used_RM #18 Does the elevation reference mark used appear on the FIRM? Yes a) Top of bottom floor (including basement or enclosure) 3246 .52 ft.(pa) □ b) Top of next higher floor N/A c) Bottom of lowest horizontal structural member (V zones only) ft.(m) Embossed and Date 3245,06 ft.(m) d) Attached garage (top of slab) _ft.(m) e) Lowest elevation of machinery and/or equipment 19853 Signature, servicing the building N/A SCOTT J ft.(m) ☐ f) Lowest adjacent grade (LAG) SMITH 3244.4 ft.(m) g) Highest adjacent grade (HAG) 3244.6 □ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade ft.(m) 0 i) Total area of all permanent openings (flood vents) in C3h N/Asq. 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.

CERTIFIER'S NAME

SCOTT J. Smith

LICENSE NUMBER

TITLE

Registered Land Surveyor

ADDRESS

4140 Western Drive #A

SIGNATURE

SCOTT J. Smith

Registered Land Surveyor

ALICENSE NUMBER
AZ RLS # 18953

COMPANY NAME
True North Surveys, Inc.

CITYOTTON NORTH 86326

COMPANY NAME
True North Surveys, Inc.

CITYOTTON NORTH 86326

DATE

TELEPHONE

The second second	ding Apt., Unit, Stiffe, and/or Bldg. No	ite, and/or Bldg. No.) OR P.O. ROUTE AND BOX N			For Insurance Company Use:	
	STATE			CODE	Company NAIC Number	
SECTION	D - SURVEYOR, ENGINEER,	OR ARCHITE	CT CERTIFICATION	ON (CON	TINUED)	
of this Elevation (Certificate for (1) community office	cial, (2) insura	ance agent/compan	y, and (3)	building owner.	
ELEVATION	ON OF C3.c is to t	he botto	om of the s	truct	ural frame of a	
manufact	tured home elevated	d on met	al columns	with	no vent openings	
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ALCTION E - BUILDING E	LEVATION INFORMATION (SL , complete Items E1 through E3.	RVEY NOT	REQUIRED) FOR 2	ONES A	O and A (WITHOUT BFE)	
pages 4 and 5. If no diagrams of the bottom floor (included to the highest adjacer and AO only: If no flood d	(Select the building diagram in am accurately represents the building basement or enclosure) of int grade.	Iding, provide f the building top of the bot	e a sketch or photogis ft.(m) tom floor elevated	graph.) _lin. n accord	(cm) above or below	
	F - PROPERTY OWNER (OR					
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PROPERTY OWNER'S OR OWNER'S	S AUTHORIZED REPRESENTATIV	E'S NAME				
ADDRESS		CITY		STATE	ZIP CODE	
SIGNATURE		DATE	TELEPHONE			
COMMENTS						
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he local official who is authorized ections A, B, C (or E), and G of the	SECTION G - COMMUN	ITY INFORM	ATION (OPTIONA	L)		
1 The Information in Section engineer, or architect who elevation data in the Com	C was taken from other docume is authorized by state or local la ments area below.) steted Section E for a building loc (Items G4-G9) is provided for cor	entation that have to certify el	as been signed and evation information A (without a FEMA	elow. d emboss i. (Indical	sed by a licensed surveyor, the the source and date of the community-issued BFE) or	
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