U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATEImportant: 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						FOR INSUF	RANCE COMPANY USE		
A1. Building Owner's Name James Sean Ryan Policy Number:									
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4788 E. Broken Saddle Drive Company NAIC Number:									
City Cottonwood	·								
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 2326, VERDE VILLAGE UNIT 5, (TPN 406-47-483)								
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential								
A5. Latitude/Longi	tude: Lat. 3	4°42'15.0N	Long. 1	11°58'37.7W	Horizonta	al Datum: NAD 1	927 × NAD 1983		
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ເ	sed to obtain floo	od insurance.			
A7. Building Diagra	am Number	1A							
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 cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gra	ade N/A		
c) Total net ar	ea of flood o	penings in A8.b		N/A sq in	1				
d) Engineered	l flood openir	ngs? ☐ Yes ⊠ l	No						
A9. For a building v	vith an attach	ned garage:							
a) Square foot	age of attach	ned garage		559.00 sq ft					
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0			
c) Total net are	ea of flood o	penings in A9.b		N/A sq	in				
d) Engineered	flood openin	gs? Yes 🖂 N	No						
			111011111111111111111111111111111111111	NOE DATE	MAD (FIDM) INC	- CDIII TION			
D4 NEID Communi		ECTION B – FLOOD	INSURA		. ,	-ORMATION	DO Otata		
Yavapai County (u	-	Community Number) 0425		B2. County Yavapai Co			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, us	levation(s) e Base Flood Depth)		
0425C1778	Н	02-15-2019	10-16-2		AE	3252.7			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile 🗵 FIRM ☐ Community Determined ☐ Other/Source:									
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:									
B12. Is the building	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, 2018

IMPORTANT: In these spaces, copy the corresponding information	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) o 4788 E. Broken Saddle Drive	r P.O. Route and Box No.	Policy Number:
City State Cottonwood Arizona	ZIP Code 86326	Company NAIC Number
SECTION C – BUILDING ELEVATION IN	L NFORMATION (SURVEY RE	EQUIRED)
C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction o C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30 Complete Items C2.a–h below according to the building diagram	Building Under Construit the building is complete. , V (with BFE), AR, AR/A, AR/A, aspecified in Item A7. In Puertocal Datum: NAVD88 ligh h) below. ed for the BFE. cosure floor)	rction* Finished Construction AE, AR/A1–A30, AR/AH, AR/AO.
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, in structural support 	3 3	249.3 ⋈ feet ☐ meters 248.7 ⋈ feet ☐ meters 251.5 ⋈ feet ☐ meters N/A ☐ feet ☐ meters
SECTION D – SURVEYOR, ENGINEER		CATION
This certification is to be signed and sealed by a land surveyor, engin I certify that the information on this Certificate represents my best effortstatement may be punishable by fine or imprisonment under 18 U.S. Were latitude and longitude in Section A provided by a licensed land	deer, or architect authorized by orts to interpret the data availa Code, Section 1001.	law to certify elevation information.
Certifier's Name Ivo Washington Buddeke III Title Owner/President Company Name Rimrock Land Surveys Address 5280 Bentley Drive City Rimrock State Arizona	ZIP Code 86335	32230 Ivo Washington Buddeke, III
Signature Digitally signed by Ivo W. Buddeke III Date Date: 2019.03.11 11:08:40 -0700' 03-11-201	Telephone 9 (928) 567-1414	Ext.
Copy all pages of this Elevation Certificate and all attachments for (1) co		agent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if approximately Roof Mounted HVAC. ALL other equipment at finished floor elevation no flood vents. Benchmark from historic FIRM RM 865-4 vertcon dature.	C2.a, House is wood framed v	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the correspond	onding information fr	om Section A.	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, 4788 E. Broken Saddle Drive	and/or Bldg. No.) or P	O. Route and Box No.	Policy Number:				
City Cottonwood	State Arizona	ZIP Code 86326	Company NAIC Number				
SECTION E – BUILDING FOR Z	ELEVATION INFOR		REQUIRED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below							
 the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	est adjacent grade (LA	G)					
E2. For Building Diagrams 6–9 with permanent floor the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided in		9 (see pages 1–2 of Instructions),				
E3. Attached garage (top of slab) is		feet _ mete	rs 🗌 above or 🗌 below the HAG.				
E4. Top of platform of machinery and/or equipmen servicing the building is	t	feet mete	rs				
E5. Zone AO only: If no flood depth number is ava floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.				
SECTION F - PROPERTY	OWNER (OR OWNER'	S REPRESENTATIVE) CI	ERTIFICATION				
The property owner or owner's authorized represer community-issued BFE) or Zone AO must sign here	ntative who completes se. The statements in Se	Sections A, B, and E for Zo ections A, B, and E are co	one A (without a FEMA-issued or rect to the best of my knowledge.				
Property Owner or Owner's Authorized Representa	itive's Name						
Address	Cit	ty St	ate ZIP Code				
Signature	Da	ite Te	elephone				
Comments							
			Check here if attachments.				

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, St 4788 E. Broken Saddle Drive	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:				
City Cottonwood	State Arizona	ZIP Code 86326		Company NAIC Number				
SECTIO	N G – COMMUNI	TY INFORMATION (OPT	ONAL)					
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp							
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 or Zone AO.	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 f	or community floodplain m	anageme	ent purposes.				
G4. Permit Number	G5. Date Permit	silssued		Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Constructio	n Substantial Improve	ment					
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	the building site:		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), i	f applicable)						
				Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Expiration Date: November 30, 2018

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 4788 E. Broken Saddle Drive	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Cottonwood	Arizona	86326	

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

Photo One Caption Front view (West) dated 3-1-2019

Clear Photo One



Photo Two

Photo Two Caption Side left view (North) dated 3-1-2019

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

			<u> </u>
IMPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 4788 E. Broken Saddle Drive	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Cottonwood	Arizona	86326	

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

Photo Three Caption rear view (East) dated 3-1-2019

Clear Photo Three



Photo Four

Photo Four Caption side right view (South) dated 3-1-2019

Clear Photo Four

FEDERAL EMERGENCY MANAGEMENT AGENCY "ATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

O.M.B. No. 3067-0077 Expires December 31, 2005

		SECTION A - PRO	PERTY C	WNER INFORMATION	ON	For Insurance Company Use:
BUILDING OWNER'S NAME Debsa CANFIELD Policy Number						Policy Number
BUILDING STREET ADDRES	SS (Including Apt., 4788	Unit, Suite, and/or Bldg おとみんだべ	No.) OR F	O. ROUTE AND BOX NO		Company NAIC Number
CITY		COTTONWOO	Δ		STATE AZ	ZIP CODE 86326
		N (Lot and Block No	ımbers, T	ax Parcel Number, Le		
	JSE (e.g., Resid	dential, Non-resider		tion, Accessory, etc.		area if necessary.)
LATITUDE/LONGITUDE		SINFATIAL	NTAL DA	TUM: SO	URCE: _ GP	C (Tupo):
(##°-##'-##.##" or		NAD 19				S (Type) Map Other:
	SECT	ION B - FLOOD IN	SURANC	E RATE MAP (FIRM)	INFORMATIO	N
B1. NFIP COMMUNITY NA		TY NUMBER		B2. COUNTY NAME		B3. STATE
YAVAPAI COUR	vry 040	1093		YAVAPA		AZ.
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. F EFFECT	IRM PANEL IVE/REVISED DATE	B8. FLOOD ZONES	B9. BASE FLOOD ELEVATION(S)
04025C1805	F	JUNE 62004	10	ME 62004	AE	3245.8
B10. Indicate the source		ood Elevation (BFE) data or	base flood depth ente	ered in B9.	
/ •		Community Determ		Other (Describ		
B11. Indicate the elevation						
	ted in a Coastal	Barrier Resources	System	CBRS) area or Other	wise Protected	Area (OPA)? Yes No
Designation Date:	25.27.0		. => /4 =16		LIBVEY BEOL	11050)
C1. Building elevations a				N INFORMATION (S		
the datum used for t calculation. Use the Datum	he BFE in Secti space provided mark used/S loor (including b her floor horizontal structure to for slab) or of machinery uilding (Describ at (finished) gradent (finished) gradent to openings (flood v	tion B, convert the dor the Comments at Conversion/Conv	atum to ti rea of Sec comments _ Does th ure) conly) rea.) e adjacent	nat used for the BFE. etion D or Section G, a see elevation reference 3246 . 7/ ft.(r 3246 . 7/ ft.(r 3246 . 7/ ft.(r 3246 . 2 ft.(r 3246 . 5 ft.(r	Show field me is appropriate,	used. If the datum is different from a surements and datum conversion of document the datum conversion of the FIRM? X Yes N
		,				ION
This certification is to	and the second s			ER, OR ARCHITEC		by law to certify elevation
	_		-	_		best efforts to interpret the da
					-	r 18 U.S. Code, Section 1001.
CERTIFIER'S NAME			•		NUMBER	
	PATRICK W	V. NAVILLE			k	25 13015
TITLE VICE-PR	2551715117		COMP	PANY NAME	TO INC	
ADDRESS	ENDENI		CITY		EC, INC,	E ZIP CODE
825 COV	E PARKWAY	CC	TTONING			AZ 86326
SIGNATURE Patrick	W Havill	lo .	DATE	9/20/04	TELE	PHONE 928-634-5889
FEMA Form 81-31, Janu	ary 2003	SEE REVERSE S	IDE FOR	CONTINUATION	REPLA	ACES ALL PREVIOUS EDITIONS

IMPORTANT: In these spaces, copy the			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Ur:	Suite, and/or Bldg. No.) OR P.O. ROUTE	AND BOX NO.	Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number
SECTION D - SUR	RVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CO	ONTINUED)
opy both sides of this Elevation Certific			
COMMENTS			
			Check here if attachment
SECTION E - BUILDING ELEVATION IN			
For Zone AO and Zone A (without BFE), co		e Elevation Certificate is in	tended for use as supporting
information for a LOMA or LOMR-F, Section E1. Building Diagram Number(Sele	n C must be completed. ect the building diagram most simila	er to the building for which t	his certificate is being complete
see pages 6 and 7. If no diagram accu			
E2. The top of the bottom floor (including b (check one) the highest adjacent grade		ing is _ ft.(m) _ ir	n.(cm) above or below
E3. For Building Diagrams 6-8 with openin		oor or elevated floor (elevat	ion b) of the building is
E4. The top of the platform of machinery a		ling is	lin (cm) labove or l l
below (check one) the highest adjacen			III. (GIII)
E5. For Zone AO only: If no flood depth nu floodplain management ordinance?	mber is available, is the top of the	bottom floor elevated in acc	cordance with the community's information in Section G.
	ERTY OWNER (OR OWNER'S RE		
he property owner or owner's authorized r			
without a FEMA-issued or community-issu	ed BFE) or Zone AO must sign her	e. The statements in Secti	ons A, B, C, and E are correct to
ne best of my knowledge.			
ROPERTY OWNER'S OR OWNER'S AU	THORIZED REPRESENTATIVE'S	NAME	
ADDRESS 4788 Broken	CITY	wood AZ	ZIP CODI
SIGNATURE Delia S. C	ander DATE 9-2	0-04 928	PHONE 634 3985
COMMENTS			
			Check here if attachments
	SECTION G - COMMUNITY INFO		
The local official who is authorized by law of		, ,	
Sections A, B, C (or E), and G of this Eleva			
31. The information in Section C was t		9	
engineer, or architect who is authored elevation data in the Comments at	orized by state or local law to certify	elevation information. (Ind	icate the source and date of the
62. A community official completed Se or Zone AO.	•	ne A (without a FEMA-issue	ed or community-issued BFE)
G3. The following information (Items G	4-G9) is provided for community flo	odplain management purp	oses.
	. DATE PERMIT ISSUED		OF COMPLIANCE/OCCUPANC
7. This permit has been issued for: _ No			
68. Elevation of as-built lowest floor (include		•	ft.(m)Datum:
9. BFE or (in Zone AO) depth of flooding	at the building site is:		ft.(m)Datum:
OCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	
IGNATURE		DATE	
COMMENTS			
			Check here if attachments
FEMA Form 81-31 January 2003		REDI A	CES ALL PREVIOUS EDITION: