FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Re	ad the instructions on pages to the	Tarabas Company Use:
SECTION A - P	ROPERTY OWNER INFORMATION	For Insurance Company Use:
BUILDING OWNER'S NAME	I AIFRED Phipps	Palicy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and of the street	or Bidg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number
CITY 1/2 HOW 1200	STATE AZ	ZIP CODE 86326
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parce		
BUILDING USE (e.g., Residential, Non-residential, Addition, Acce	essory, etc. Use a Comments area, if necessary.)	
RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTA (##° - ##' - ## .##" or ## .#####")	AL DATUM: SOURCE: L GPS (Type): L NAD 1983	
	NSURANCE RATE MAP (FIRM) INFORMAT	TION
		B3. STATE
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME	ARIZONA
YAUADAI (OUMY 040093)	YAUAPAI	
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX NUMBER , DATE	EFFECTIVE/REVISED DATE ZONE(S)	(Zone AO, use depth of flooding)
0400501805 F JUNE 4200	1 Sune 6, 2001 AE	3248.4
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flo6d depth entered in B9. y Determined Other (Describe):	
Bata Indicate the elevation datum used for the BEE in B9:	NGVD 1929 NAVD 1988 Othe	r (Describe):
B11. Indicate the elevation data describing the B12 in B11. Is the building located in a Coastal Barrier Resources	System (CBRS) area or Otherwise Protecter	d Area (OPA)? LYes X No
Designation Date:	System (SD: 15) area are	
	TO A TION INCORMATION (SUBVEY DEC	NUPED)
	ELEVATION INFORMATION (SURVEY REC	
C1. Building elevations are based on: Construction Dr.	awings*Building Under Construction	n X Finished Construction
*A new Elevation Certificate will be required when con	struction of the building is complete.	this codificate is being completed - see
C2. Building Diagram Number 8 (Select the building of	liagram most similar to the building for which	this certificate is being completed - see
pages 6 and 7. If no diagram accurately represents the	ie building, provide a sketch or photograph.)	DIA1 A30 ADIAH ADIAO
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE	, V1-V30, V (WITH BFE), AR, ARVA, ARVAE, A	m used. If the datum is different from
Complete Items C3.a-i below according to the building	diagram specified in item 62. State the date	easurements and datum conversion
the datum used for the BFE in Section B, convert the	datum to that used for the BFE. Show held in	ate to document the datum conversion.
calculation. Use the space provided or the Comments	s area of Section D of Section G, as appropri	ate, to document the datam converse
Datum Conversion/Comments Elevation reference mark used $RM = 210$	Dece the elevation reference mark used (appear on the FIRM? X Yes No
Elevation reference mark used RM = 200	Does the elevation reference mark used a	
 a) Top of bottom floor (including basement or enclo b) Top of next higher floor c) Bottom of lowest horizontal structural member (225/ 89 ft/m) 6	about the state of
d) Attached garage (top of slab) CARPORT	3239 . 60 ft.(m)	26925
e) Lowest elevation of machinery and/or equipmen		
servicing the building (Describe in a Comments	area.)	McDONALD d
f) Lowest adjacent (finished) grade (LAG)	32.38 .90 ft.(m)	Z E I
g) Highest adjacent (finished) grade (HAG)	3239 35 ft.(m)	McDONALD d
h) No. of permanent openings (flood vents) within	1 ft. above adjacent grade 14	ONA II. S.
i) Total area of all permanent openings (flood vents)		. Jr. 0.
	OR, ENGINEER, OR ARCHITECT CERTIFIC	CATION
This certification is to be signed and sealed by a land sur		
I certify that the information in Sections A, B, and C on the	nis certificate represents my best efforts to int	terpret the data available.
I understand that any false statement may be punishable	e by fine or imprisonment under 18 U.S. Code	e, Section 1001.
CERTIFIER'S NAME	LICENSE NUMBER	R
DUGAN L MCDONALI		6720
TITLE Presi dent	COMPANY NAME HERLITAGE LAI	NO SUNCY & MAPPI
ADDRESS BOX 3210	campuerde sta	TEZ ZIP CODE 3 22
SIGNATURE	DATE 12-04 TEL	EPHONE 28-567-9170
FEMA Form 81-31, January 2003	See reverse side for continuation.	Replaces all previous editions

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number		
CITY LO HONWOOD	STATE A2	ZIP COD 86326	E Company NAIC Number		
SECTION	O - SURVEYOR, ENGINEER, OR AF	RCHITECT CERTIFICATION (C	ONTINUED)		
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.					
COMMENTS Residential home located in Flood zone AE with A BFE of					
3248.4. Finish Floor of home is 3249.53. Highest Adjacent					
grade is 3239.35 Lowest Adjacent grade 3238.90. Home has					
14 permanent openings with a total of 16,128 sq. in. Check here if attachments					
SECTION E - BUILDING ELÉVATION INFORMATION (SURVEY NOT REQUIRED) FÓR ZONE AÓ AND ZONE A (WITHOUT BFE)					
	For Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.				
E1. Building Diagram Number		imilar to the building for which th	is certificate is being completed -		
see pages 6 and 7. If no diagram	m accurately represents the building,	provide a sketch or photograph	.)		
E2. The top of the bottom floor (inclu			in. (cm) [] above or [] below		
(check one) the highest adjacen E3. For Building Diagrams 6-8 with o	t grade. (Use natural grade, if availa		on b) of the building is		
	ove the highest adjacent grade. Com				
E4. The top of the platform of machi	nery and/or equipment servicing the	building is ft. (m)	in. (cm) above or below		
	t grade. (Use natural grade, if availa				
floodplain management ordinan	epth number is available, is the top of	f the bottom floor elevated in acc	cordance with the community's		
	ce? Yes No Unknow F - PROPERTY OWNER (OR OWNI				
The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.					
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S NA	ME			
ADDRESS	Ci	TY STAT	TE ZIP CODE		
SIGNATURE					
COMMENTS		ATE TELE	EPHONE .		
COMMENTS					
	SECTION C. COMMUNITY IN	JEODMATION (ORTIONAL)	Check here if attachments		
The local official who is authorized b	SECTION G - COMMUNITY IN	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	ment eminence con complete		
	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.				
G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor,					
engineer, or architect who is authorized by state or local 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-G9) is provided for community floodplain management purposes.					
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE	OF COMPLIANCE/OCCUPANCY		
G7. This possit has been investigated	I IN- Control I in	ISSUED			
G7. This permit has been issued for: G8. Elevation of as-built lowest floor	(including basement) of the building	ostantial Improvement	÷ (m) D-+		
G9. BFE or (in Zone AO) depth of flo	poding at the building site is:		ft. (m) Datum: ft. (m) Datum:		
LOCAL OFFICIAL'S NAME		TITLE			
COMMUNITY NAME TELEPHONE					
SIGNATURE DATE					
COMMENTS					
			Check here if attachments		