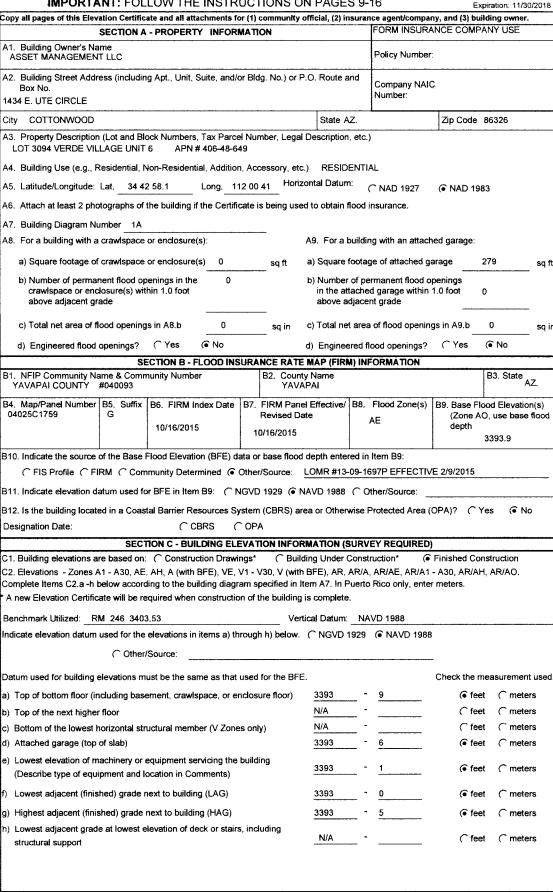
DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency **ELEVATION CERTIFICATE**

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008





ELEVATION CERTIFICATE

OMB Control Number: 1660-0008 Expiration: 11/30/2018

1434 E. UTE CIRCLE

COTTONWOOD

AZ.

86326

50	CHUN D - SURVETUR, ENGIN	EER, OR ARCHITECT CE	KIIFICATION
-	te represents my best efforts to in	terpret the data available.	d by law to certify elevation information. I certify I understand that any false statement may be
Were latitude		nd longitude in Section A censed land surveyor? No	
Certifier's Name TIMOTHY L. HAMMES		icense Number .S. #29263	TIMOTHY L.
Title PRESIDENT	Company Name HAMMES SURVEYING LLC		6 (3/10)
Address 2100 VIA SILVERADO	City CAMP VERDE	State Zip Code AZ 86322	TONA U.S.
Signature	Date 06/13/2016	Telephone +1 (928) 567-2833	Express Idealin
Copy both sides of this Elevation Co	ertificate for (1) community officia	(2) insurance agent/comp	pany, and (3) building owner.
Comments (including type of equip			carry, and (c) saliding owner.
Signature	Lame		Date 06/13/2016
	ATION INFORMATION (SURVE		ZONE AO AND ZONE A (WITHOUT BFE)
			port a LOMA or LOMR-F request, complete used. In Puerto Rico only, enter meters.
	nd the lowest adjacent grade (LA		ether the elevation is above or below the meters above or below the HAG.
b) Top of bottom floor (including or enclosure) is	basement, crawlspace,		meters above or below the LAG.
E2. For Building Diagrams 6 -9 with higher floor (elevation C2.b in the di			d/or 9 (see pages 8 -9 of Instructions), the next meters above or below the HAG.
E3. Attached garage (top of slab) is	W-11-1-0-1		meters above or below the HAG.
E4. Top of platform of machinery ar servicing the building is	d /or equipment	(feet (meters above or below the HAG.
	number is available, is the top of		n accordance with the community's floodplain formation in Section G.
SECTION	F - PROPERTY OWNER (OR C	WNER'S REPRESENTAT	IVE) CERTIFICATION
			or Zone A (without a FEMA-issued or e correct to the best of my knowledge.
Property Owner or Owner's Authori	zed Representative's Name:		
Address	City	State	ZIP Code
Signature	Date	Telephor	ne
Comments			
1			Check here if attachments

BUILDING PHOTOGRAPHS

See instructions for Item A6

Expiration: 11/30/2018 OR INSURANCE COMPANY USE IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 1434 E. UTE CIRCLE State AZ. Company NAIC Zip Code **COTTONWOOD** 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.



406-48-649 **FRONT**



Number:

OMB Control Number: 1660-0008

LEFT SIDE



BACK



RIGHT