DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGE	OMB Control Number: 1660-0008 Expiration: 11/30/2018				
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) in					
SECTION A - PROPERTY INFORMATION	FORM PICTURANCE COMPANY USE				
A1. Building Owner's Name	Policy Number:				
CHAD DEWITT	•				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route a Box No.	Company NAIC Number:				
CITY C	1 7 0 1				
City Corronwood State	Az Zip Code 86326				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description,	, etc.) 406-49-412				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	24				
A5. Latitude/Longitude: Lat. 34°42 15.57 Long. 112° 20' 52.21 Horizontal Datum:	1 10/10 1021				
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain fl	lood insurance.				
A7. Building Diagram Number 18					
A8. For a building with a crawlspace or enclosure(s): A9. For a l	building with an attached garage:				
a) Square footage of crawlspace or enclosure(s) sq ft a) Square	footage of attached garage sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot in the at	r of permanent flood openings ttached garage within 1.0 foot adjacent grade				
N/A	N/A				
c) Total net area of flood openings in A8.b	et area of flood openings in A9.b				
d) Engineered flood openings? Yes No d) Engineer	ered flood openings? Yes No				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM	M) INFORMATION				
B1. NFIP Community Name & Community Number B2. County Name	B3. State				
YAVAPAI COUNTY # 040093 YAVAPAI	AZ				
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use base flood depth				
04025C1759 G 10/16/2015 09/03/2010	UNSHADED X 3454.20'				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered					
FIS Profile FIRM Community Determined Cother/Source:					
B11. Indicate elevation datum used for BFE in Item B9:	Cother/Source:				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherw	vise Protected Area (OPA)? Yes 6 No				
Designation Date: CBRS COPA	(0.14)				
SECTION C - BUILDING ELEVATION INFORMATION (S	URVEY REQUIRED)				
C1. Building elevations are based on: Construction Drawings* Building Under C					
C2. 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 C2.a -h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: YC Gis 542 Vertical Datum:	3481,47				
Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1					
Other/Source:					
	Charletha maranessaturad				
Datum used for building elevations must be the same as that used for the BFE.	Check the measurement used.				
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3476 NA	(Tiout (Timeters				
of top of the flext higher hoof					
c) Bottom of the lowest horizontal structural member (V Zones only)					
d) Attached garage (top of slab) 3416	e (a) feet (c) meters				
Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 3478	6 feet				
Lowest adjacent (finished) grade next to building (LAG)	e				
g) Highest adjacent (finished) grade next to building (HAG)					
n) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support					

ELEVATION CERTIFICATE

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

OFOTION	I D. OLIDVEYOR ENGINE					
This certification is to be signed and sealed		er, or architect authorized	by law to certify elevation information. I certify			
punishable by fine or imprisonment under 1			understand that any false statement may be			
Were latitude and longitude in Section A						
Check here if attachments. provided by a licensed land surveyor?						
Certifier's Name CLINT GILLESPIE		ense Number 0106	50106			
Title R.L.S.	Company Name HERITAGE LAND S	BURVEYING	GILLESPIE (O)			
Address PO BOX 3270	City CAMP VERDE	State Zip Code 86322	Expires 9.30.18			
Signature	Date 24-May 2016	Telephone (928) 567-9170				
Copy both sides of this Elevation Certificate	,	insurance agent/compa	any and (3) building owner			
Comments (including type of equipment an			arry, and (3) building owner.			
LOWEST MACHINERY SE	PUICING RESIDEN	CE IS A HOT	WATER HEATER			
INSIDE GARAGE.						
Signature COA COA			Date 24 AA . 2			
Charles Carlos	INFORMATION (SURVEY	NOT REQUIRED) FOR 2	Date 24-May 2016 ZONE AO AND ZONE A (WITHOUT BFE)			
For Zones AO and A (without BFE), comple Sections A, B,and C. For Items E1 -E4, use	ete Items E1 -E5. If the Certi	ficate is intended to supp	ort a LOMA or LOMR-F request, complete			
E1. Provide elevation information for the fol highest adjacent grade (HAG) and the longer than the longer t	lowing and check the appro owest adjacent grade (LAG)	priate boxes to show whe	ther the elevation is above or below the			
 a) Top of bottom floor (including basem or enclosure) is 	ent, crawlspace,		meters above or below the HAG.			
 b) Top of bottom floor (including basem or enclosure) is 	ent, crawlspace,		meters above or below the LAG.			
E2. For Building Diagrams 6 -9 with permar higher floor (elevation C2.b in the diagrams)		I in Section A Items 8 and	d/or 9 (see pages 8 -9 of Instructions), the next meters above or below the HAG.			
E3. Attached garage (top of slab) is			meters above or below the HAG.			
E4. Top of platform of machinery and /or eq	uipment	C feet C r	motors			
servicing the building is			E above of E bolow the fixe.			
E5. Zone AO only: If no flood depth number management ordinance? Yes No	is available, is the top of the		accordance with the community's floodplain ormation in Section G.			
	OPERTY OWNER (OR OW					
The property owner or owner's authorized re community-issued BFE) or Zone AO must s Property Owner or Owner's Authorized Rep	ign here. The statements in					
Address	City	State	ZIP Code			
Signature	Date	Telephon	е			
Comments						
			Check here if attachments.			

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

	SECTION G - COMMUNITY INFORMATION (OPTIONAL)					
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. Check the measurement used in Items G8 - G10. In Puerto Rico only, enter meters.						
G1.	G1. 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.					
G3.	63. The following information (Items G4 -G10) is provided for community floodplain management purposes.					
G4.	Permit Number G5. Date F	Permit Issued	G6. Da	te Certificate	of Compliance/C	occupancy Issued
G7.	This permit has been issued for: New Construction	C Substantial Impro	ovement			_
G8.	Elevation of as-built lowest floor (including basement) of the building:		Cfeet	meters	Datum	
	BFE or (in Zone AO) depth of flooding at the building site:		\bigcirc_{feet}	meters	Datum	
G10	. Community's design flood elevation:		○ feet	\cap_{meters}	Datum	
	al Official's Name	Title				
Con	nmunity Name	Telephone	e			
Sign	nature	Date				
Con	nments					
						i i
					Che	ck here if attachments.

BUILDING PHOTOGRAPHS

See instructions for Item A6

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE Policy Number:	
Building Street Address (including Apt., Unit, Suite, and/o				
COTTONWOOD	State	Zip Code	Company NAIC Number:	

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.



BUILDING PHOTOGRAPHS

Continuation Page

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

IMPORTANT: In these spaces, copy the correspondi	FORM INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit,Suite, and/o	Policy Number:		
1155 E DESERT JEWEL D			
City	State	Zip Code	Company NAIC Number:
COTTONWOOD	Az	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.

