

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use
A1. Building Owner's Name <u>Divera G. Hamilton</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>13600 Angel Valley Rd.</u>		Company NAIC Number
City <u>Sedona</u> State <u>AZ</u> ZIP Code <u>86336</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>407-25-007 B Cabin 1 - see attached map</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>overnight guest accommodations</u>		
A5. Latitude/Longitude: Lat. <u>34°48'09.79"</u> Long. <u>-111°52'32.34"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>    </u> sq ft		a) Square footage of attached garage <u>    </u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>    </u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>    </u>
c) Total net area of flood openings in A8.b <u>    </u> sq in		c) Total net area of flood openings in A9.b <u>    </u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>YAVAPAI COUNTY 040093</u>		B2. County Name <u>YAVAPAI</u>		B3. State <u>AZ</u>	
B4. Map/Panel Number <u>04025C1A45</u>	B5. Suffix <u>F</u>	B6. FIRM Index Date <u>JUNE 6 2001</u>	B7. FIRM Panel Effective/Revised Date <u>JUNE 6 2001</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>3706.0</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
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-g below according to the building diagram specified in Item A7.	
Benchmark Utilized <u>RM 33A</u>	Vertical Datum <u>NGVD 29 3690.65</u>
Conversion/Comments <u>    </u>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) <u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
b) Top of the next higher floor <u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
c) Bottom of the lowest horizontal structural member (V Zones only) <u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
d) Attached garage (top of slab) <u>3707.8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) <u>3706.4</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
f) Lowest adjacent (finished) grade (LAG) <u>3703.4</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG) <u>3706.2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name <u>Scott J. Smith</u>	License Number <u>19853</u>
Title <u>President</u>	Company Name <u>True North Surveys, Inc.</u>
Address <u>4140 Western Dr. Ste A Cottonwood</u> City <u>AZ</u> State <u>AZ</u> ZIP Code <u>86326</u>	
Signature <u>Scott J. Smith</u>	Date <u>12-3-08</u> Telephone <u>928-646-5951</u>



EXPIRES: 6-30-2010

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		For Insurance Company Use
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 Angel Valley Rd. Cabin 1</b>		Policy Number
City <b>Sedona</b>	State <b>AZ</b>	ZIP Code <b>86336</b>
		Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments **C2.c is the bottom of a steel beam frame upon which the cabin is built. It is supported by posts and is not enclosed \* UNDERSIDE OF SUPPORT FRAME RAIL = 3707.8 \***

Signature **Scott J. Smith** Date **12-3-08**  Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

**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, and G9.

- 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.  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <b>M07-09</b>	G5. Date Permit Issued <b>A12006005480</b>	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13600 Angel Valley Rd. Cabin 1			For Insurance Company Use: Policy Number
City Sedona	State AZ	ZIP Code 86336	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



EAST SIDE



NORTH SIDE



WEST SIDE



SOUTH SIDE

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name	<u>Pivera G. Hamilton</u>	Policy Number
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	<u>13600 Angel Valley Rd. Cabin 2</u>	Company NAIC Number
City	<u>Sedona</u>	State
		ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	<u>407-25-007B (Cabin 2 - see attached map)</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	<u>overnight guest accommodations</u>	
A5. Latitude/Longitude: Lat.	<u>34°48'09.94"</u>	Long. <u>-111°52'32.54"</u>
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A7. Building Diagram Number	<u>5</u>	
A8. For a building with a crawl space or enclosure(s), provide:	A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s)	<u>    </u> sq ft	a) Square footage of attached garage
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<u>    </u>	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade
c) Total net area of flood openings in A8.b	<u>    </u> sq in	c) Total net area of flood openings in A9.b

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number	<u>YAVAPAI COUNTY 040093</u>		B2. County Name	<u>YAVAPAI</u>	
			B3. State	<u>AZ</u>	
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)
<u>0A025C1445</u>	<u>F</u>	<u>JUNE 6 2001</u>	<u>JUNE 6 2001</u>	<u>AE</u>	<u>3705.8</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.					
<input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on:	<input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.	
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-g below according to the building diagram specified in Item A7.	
Benchmark Utilized	<u>RM 33A</u> Vertical Datum <u>3690.65</u>
Conversion/Comments _____	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>3707.8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>SEE SECT D</u>	<u>    </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>3705.6</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>3703.7</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>3705.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name	<u>Scott J. Smith</u> License Number <u>19853</u>
Title	<u>President</u> Company Name <u>True North Surveys, Inc.</u>
Address	<u>4140 Western Dr. Ste A Cottonwood</u> State <u>AZ</u> ZIP Code <u>86326</u>
Signature	<u>Scott J. Smith</u> Date <u>12-3-08</u> Telephone <u>928-646-5951</u>



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. 13600 Angel Valley Rd. Cabin 2		Policy Number	
City Sedona	State AZ	ZIP Code 86336	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2.c is the bottom of a steel beam frame upon which the cabin is built. It is supported by posts and is not enclosed \*UNDOORSIDE OF SUPPORT FRAME RAIL = 3707.8\*

Signature Scott J. Smith

Date 12-3-08

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

**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 and G9

- 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.  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number M07-10	G5. Date Permit Issued A12006005404	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 Angel Valley Rd. Cabin 2</b>			For Insurance Company Use: Policy Number
City <b>Sedona</b>	State <b>AZ</b>	ZIP Code <b>86336</b>	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



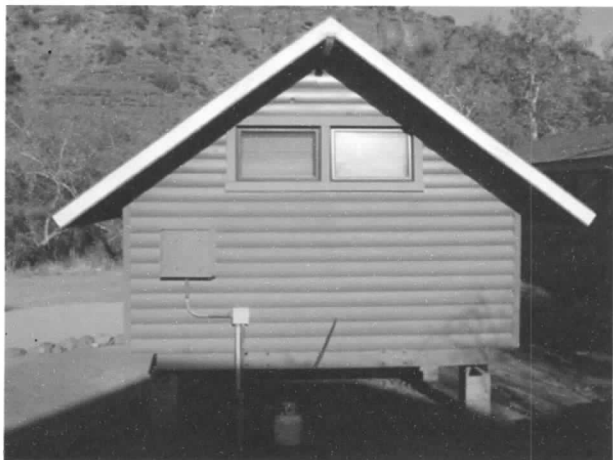
**EAST SIDE**



**NORTH SIDE**



**WEST SIDE**



**SOUTH SIDE**

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use
A1. Building Owner's Name <b>DIVERA G. HAMILTON</b>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>		Company NAIC Number
City <b>SEDONA</b>	State <b>AZ</b>	ZIP Code <b>86336</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 3A - SEE ATTACHED MAP) (CABIN 3)</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>		
A5. Latitude/Longitude: Lat. <b>34° 48' 10.09"</b> Long. <b>-111° 52' 32.98"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>5</b>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <b>N/A</b>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <b>N/A</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq in		c) Total net area of flood openings in A9.b <b>N/A</b> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>YAVAPAI COUNTY 040093</b>		B2. County Name <b>YAVAPAI</b>		B3. State <b>AZ</b>	
B4. Map/Panel Number <b>04025C1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>	B8. Flood Zone(s) <b>UNSHADED X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3705.5</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction <small>*A new Elevation Certificate will be required when construction of the building is complete.</small>	
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-g below according to the building diagram specified in Item A7. Benchmark Utilized <b>RM 33A</b> Vertical Datum <b>NGVD 29</b> <b>3690.65</b> Conversion/Comments <b>N/A</b>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) <b>3709.7</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
b) Top of the next higher floor <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
c) Bottom of the lowest horizontal structural member (V Zones only) <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
d) Attached garage (top of slab) <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) <b>3707.7</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
f) Lowest adjacent (finished) grade (LAG) <b>3706.2</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG) <b>3707.5</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input type="checkbox"/> Check here if comments are provided on back of form.	
<b>SCOTT J. SMITH</b>	<b>#19853</b>
Certifier's Name	License Number
<b>PRESIDENT</b>	<b>TRUE NORTH SURVEYS, INC.</b>
Title	Company Name
<b>4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326</b>	
Address	City State ZIP Code
<b>AUGUST 6, 2007</b>	<b>(928) 646-5951</b>
Signature	Date Telephone



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. 13600 ANGEL VALLEY ROAD			Policy Number
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Scott J. Smith Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the HAG
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the LAG
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

Check here if attachments

**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 and G9.

- 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  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>M06-096</u>	G5. Date Permit Issued <u>A12006005788</u>	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------------------------	---	---

- G7 This permit has been issued for:  New Construction  Substantial Improvement
- G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet \_\_\_\_\_ meters (PR) Datum \_\_\_\_\_
- G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet \_\_\_\_\_ meters (PR) Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments



# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name	<u>Divera G. Hamilton</u>	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	<u>13600 Angel Valley Rd. (Bathhouse)</u>	Company NAIC Number
City	<u>Sedona</u>	State
		ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>407-26-007B (bathhouse - see attached map)</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>bathhouse</u>		
A5. Latitude/Longitude: Lat. <u>34°48'09.25"</u> Long. <u>-111°52'33.13"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawl space or enclosure(s), provide:		
a) Square footage of crawl space or enclosure(s)	<u>    </u> sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<u>    </u>	a) Square footage of attached garage
c) Total net area of flood openings in A8.b	<u>    </u> sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade
		c) Total net area of flood openings in A9.b

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
<u>YAVAPAI COUNTY 040093</u>		<u>YAVAPAI</u>		<u>AZ</u>	
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)
<u>04025C1445</u>	<u>F</u>	<u>JUNE 6 2001</u>	<u>JUNE 6 2001</u>	<u>UNSHADEN</u>	<u>309</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.					<u>3706.2</u>
<input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Designation Date					<input type="checkbox"/> CBRS <input type="checkbox"/> OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction	
*A new Elevation Certificate will be required when construction of the building is complete.	
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-g below according to the building diagram specified in Item A7.	
Benchmark Utilized	<u>RM 33A</u> Vertical Datum <u>NGVD 29 3690.65</u>
Conversion/Comments	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>    </u> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>    </u> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>3715.4</u> feet <input checked="" type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>    </u> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>3715.1</u> feet <input checked="" type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>3714.8</u> feet <input checked="" type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>3712.9</u> feet <input checked="" type="checkbox"/> meters (Puerto Rico only)

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name	<u>Scott J. Smith</u> License Number <u>19853</u>
Title	<u>President</u> Company Name <u>Tru North Surveys, Inc</u>
Address	<u>4140 Western Dr. Ste A Cottonwood AZ 86326</u> City <u>Cottonwood</u> State <u>AZ</u> ZIP Code <u>86326</u>
Signature	<u>Scott J. Smith</u> Date <u>12-3-08</u> Telephone <u>928-646-5951</u>



EXPIRES: 6-30-2010

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. 13600 Angel Valley Rd.		Policy Number Bathhouse	
City Sedona	State AZ	ZIP Code 86336	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2.c is the bottom of a steel beam frame upon which the structure is built. It is supported by posts and is not enclosed.

Signature Scott J. Smith

Date 12-3-08

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments

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, and G9.

- 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.  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number M06-080	G5. Date Permit Issued 12005062204	G6. Date Certificate Of Compliance/Occupancy Issued
------------------------------	---------------------------------------	---

G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments

Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 Angel Valley Rd Bathhouse</b>			For Insurance Company Use: Policy Number
City <b>Sedona</b>	State <b>AZ</b>	ZIP Code <b>86336</b>	Company NAIC Number

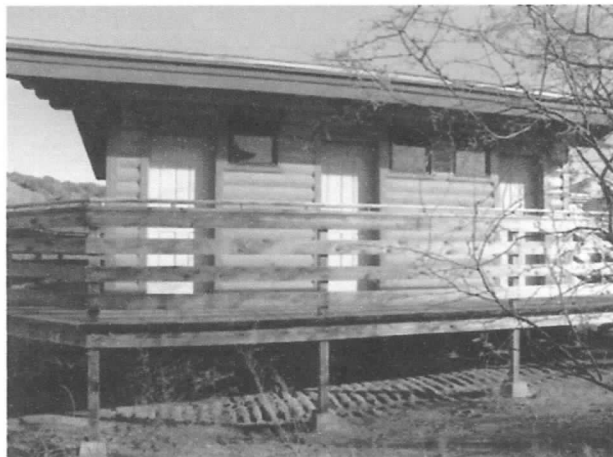
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.



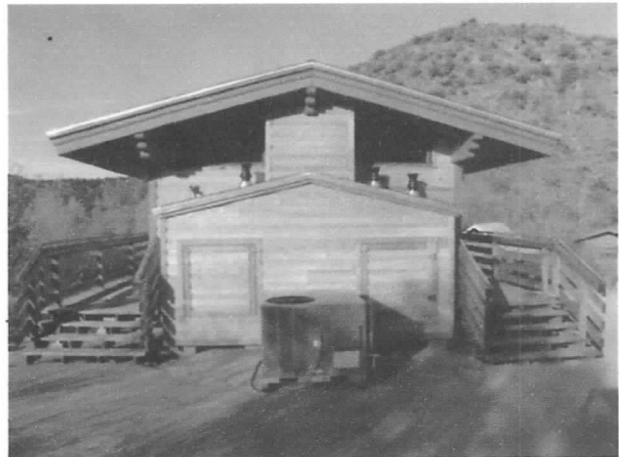
**EAST SIDE**



**NORTH SIDE**



**WEST SIDE**



**SOUTH SIDE**

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION			For Insurance Company Use
A1 Building Owner's Name <b>DIVERA G. HAMILTON</b>			Policy Number
A2 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>			Company NAIC Number
City <b>SEDONA</b>	State <b>AZ</b>	ZIP Code <b>86336</b>	
A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 4B- SEE ATTACHED MAP) (CABIN 4)</b>			
A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>			
A5 Latitude/Longitude: Lat. <b>34° 48' 10.25"</b> Long. <b>-111° 52' 33.36"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983			
A6 Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7 Building Diagram Number <b>5</b>			
A8 For a building with a crawl space or enclosure(s), provide:		A9 For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s)	<b>N/A</b> sq ft	a) Square footage of attached garage	<b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<b>N/A</b>	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	<b>N/A</b>
c) Total net area of flood openings in A8.b	<b>N/A</b> sq in	c) Total net area of flood openings in A9.b	<b>N/A</b> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1 NFIP Community Name & Community Number <b>YAVAPAI COUNTY 040093</b>		B2. County Name <b>YAVAPAI</b>		B3. State <b>AZ</b>	
B4. Map/Panel Number <b>04025C1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>	B8. Flood Zone(s) <b>UNSHAD04X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3705.3</b>
B10 Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11 Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12 Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
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-g below according to the building diagram specified in Item A7. Benchmark Utilized <b>RM 33A</b> Vertical Datum <b>NGVD 29 3690.65</b> Conversion/Comments <b>N/A</b>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<b>3710.0</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<b>3707.7</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<b>3706.2</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<b>3707.5</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input type="checkbox"/> Check here if comments are provided on back of form.	
SCOTT J. SMITH	#19853
Certifier's Name	License Number
PRESIDENT	TRUE NORTH SURVEYS, INC.
Title	Company Name
4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326	
Address	City State ZIP Code
AUGUST 6, 2007	(928) 646-5951
Signature	Date Telephone



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13600 ANGEL VALLEY ROAD			Policy Number
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Scott J. Smith Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG
- E2 For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E3 Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4 Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E5 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments

**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 and G9.

- 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  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>M06-095</u>	G5. Date Permit Issued <u>A12006005791</u>	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------------------------	---	---

G7 This permit has been issued for:  New Construction  Substantial Improvement

G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments

Check here if attachments

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use
A1. Building Owner's Name <b>DIVERA G. HAMILTON</b>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>		Company NAIC Number
City <b>SEDONA</b>	State <b>AZ</b>	ZIP Code <b>86336</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 5B- SEE ATTACHED MAP) (CABIN 5)</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>		
A5. Latitude/Longitude: Lat. <b>34° 48' 10.41"</b> Long. <b>-111° 52' 33.72"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>5</b>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <b>N/A</b>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <b>N/A</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq in		c) Total net area of flood openings in A9.b <b>N/A</b> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>YAVAPAI COUNTY 040093</b>		B2. County Name <b>YAVAPAI</b>		B3. State <b>AZ</b>	
B4. Map/Panel Number <b>04025C1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>	B8. Flood Zone(s) <b>UNSHADED X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3705.2</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
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-g below according to the building diagram specified in Item A7. Benchmark Utilized <b>RM 33A</b> Vertical Datum <b>NGVD 29 3690.65</b> Conversion/Comments <b>N/A</b>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) <b>3710.0</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
b) Top of the next higher floor <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
c) Bottom of the lowest horizontal structural member (V Zones only) <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
d) Attached garage (top of slab) <b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) <b>3707.5</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
f) Lowest adjacent (finished) grade (LAG) <b>3706.5</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG) <b>3707.5</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	

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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
<input type="checkbox"/> Check here if comments are provided on back of form.	
SCOTT J. SMITH	#19853
Certifier's Name	License Number
PRESIDENT	TRUE NORTH SURVEYS, INC.
Title	Company Name
4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326	
Address	City State ZIP Code
AUGUST 6, 2007	(928) 646-5951
Signature	Date Telephone



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13600 ANGEL VALLEY ROAD			Policy Number	
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Scott J. Smith Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG
- E2 For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG
- E3 Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4 Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG
- E5 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

**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 and G9.

- 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  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4 Permit Number <u>M06-094</u>	G5 Date Permit Issued <u>A12006005792</u>	G6 Date Certificate Of Compliance/Occupancy Issued
------------------------------------	--	--

- G7 This permit has been issued for:  New Construction  Substantial Improvement
- G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_
- G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>DIVERA G. HAMILTON</b>		For Insurance Company Use	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>		Policy Number	
City <b>SEDONA</b>		State <b>AZ</b>	ZIP Code <b>86336</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 6A - SEE ATTACHED MAP)</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>			
A5. Latitude/Longitude: Lat. <b>34° 48' 10.63"</b> Long. <b>-111° 52' 33.99"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <b>5</b>			
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s)	<b>N/A</b> sq ft	a) Square footage of attached garage	<b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<b>N/A</b>	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	<b>N/A</b>
c) Total net area of flood openings in A8.b	<b>N/A</b> sq in	c) Total net area of flood openings in A9.b	<b>N/A</b> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>YAVAPAI COUNTY 040093</b>		B2. County Name <b>YAVAPAI</b>		B3. State <b>AZ</b>	
B4. Map/Panel Number <b>04025C1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>	B8. Flood Zone(s) <b>UNSHARED X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3705.0</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

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-g below according to the building diagram specified in Item A7.  
Benchmark Utilized **RM 33A** Vertical Datum **NGVD 29 3690.65**  
Conversion/Comments **N/A**

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<b>3709.5</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<b>3707.2</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<b>3705.7</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<b>3706.9</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## 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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

**SCOTT J. SMITH** #19853  
Certifier's Name License Number  
**PRESIDENT** **TRUE NORTH SURVEYS, INC.**  
Title Company Name  
**4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326**  
Address City State ZIP Code  
**AUGUST 6, 2007** (928) 646-5951  
Signature Date Telephone





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. 13600 ANGEL VALLEY ROAD			Policy Number	
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Scott J. Smith Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG
- E2 For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2 b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E3 Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4 Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E5 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

Check here if attachments

**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 and G9.

- 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  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>M06-093</u>	G5. Date Permit Issued <u>A12006005794</u>	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------------------------	---	---

G7 This permit has been issued for:  New Construction  Substantial Improvement

G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments

Check here if attachments

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>DIVERA G. HAMILTON</b>		For Insurance Company Use
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>		Policy Number
City <b>SEDONA</b>	State <b>AZ</b>	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 7A - SEE ATTACHED MAP)</b>		ZIP Code <b>86336</b>
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>		
A5. Latitude/Longitude: Lat. <b>34° 48' 10.75"</b> Long. <b>-111° 52' 34.40"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>5</b>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <b>N/A</b>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <b>N/A</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq in		c) Total net area of flood openings in A9.b <b>N/A</b> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>YAVAPAI COUNTY 010093</b>		B2. County Name <b>YAVAPAI</b>	B3. State <b>AZ</b>
B4. Map/Panel Number <b>04025C 1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>
		B8. Flood Zone(s) <b>UNSHADED X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3704.3</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)			
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

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-g below according to the building diagram specified in Item A7.  
Benchmark Utilized **RM 33A** Vertical Datum **NGVD 29** **3690.65**  
Conversion/Comments **N/A**

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) <b>3709.2</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <b>N/A</b> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) <b>3706.9</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) <b>3705.3</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) <b>3706.5</b> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## 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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

**SCOTT J. SMITH** #19853  
 Certifier's Name License Number  
**PRESIDENT** TRUE NORTH SURVEYS, INC.  
 Title Company Name  
**4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326**  
 Address City State ZIP Code  
**AUGUST 6, 2007** (928) 646-5951  
 Signature Date Telephone



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13600 ANGEL VALLEY ROAD			Policy Number	
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature Scott J. Smith      Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG
- E2 For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2 b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E3 Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4 Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E5 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

Check here if attachments

**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, E, and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- 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  The following information (Items G4.-G9.) is provided for community floodplain management purposes

G4. Permit Number <u>M06-092</u>	G5. Date Permit Issued <u>A12006005795</u>	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7 This permit has been issued for:  New Construction  Substantial Improvement
- G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_
- G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>DIVERA G. HAMILTON</b>		For Insurance Company Use
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>13600 ANGEL VALLEY ROAD</b>		Policy Number
City <b>SEDONA</b>		Company NAIC Number
State <b>AZ</b>		ZIP Code <b>86336</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>407-25-007B (CABIN 8B - SEE ATTACHED MAP)</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>OVERNIGHT GUEST ACCOMMODATIONS</b>		
A5. Latitude/Longitude: Lat. <b>34° 48' 10.88"</b> Long. <b>-111° 52' 34.79"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>5</b>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <b>N/A</b>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <b>N/A</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq in		c) Total net area of flood openings in A9.b <b>N/A</b> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>YAVAPAI COUNTY 040093</b>		B2. County Name <b>YAVAPAI</b>		B3. State <b>AZ</b>	
B4. Map/Panel Number <b>04025X1445</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>JUNE 6 2001</b>	B7. FIRM Panel Effective/Revised Date <b>JUNE 6 2001</b>	B8. Flood Zone(s) <b>UNSHAD37X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3704.0</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

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-g below according to the building diagram specified in Item A7.  
Benchmark Utilized **RM 33A** Vertical Datum **NGVD 29** **3690.65**  
Conversion/Comments **N/A**

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<b>3708.6</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<b>N/A</b>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N/A</b>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<b>N/A</b>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<b>3706.6</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<b>3705.5</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<b>3706.6</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## 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 on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

**SCOTT J. SMITH** #19853  
Certifier's Name License Number

**PRESIDENT** **TRUE NORTH SURVEYS, INC.**  
Title Company Name

**4140 WESTERN DRIVE, SUITE A, COTTONWOOD, AZ 86326**  
Address City State ZIP Code

**AUGUST 6, 2007** (928) 646-5951  
Signature Date Telephone



<b>IMPORTANT:</b> 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. 13600 ANGEL VALLEY ROAD			Policy Number	
City SEDONA,	State AZ	ZIP Code 86336	Company NAIC Number	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments \_\_\_\_\_

Signature Scott J. Smith Date AUGUST 6, 2007

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG
- E2 For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E3 Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.
- E4 Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  above or  below the HAG
- E5 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

**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 and G9.

- 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  The following information (Items G4-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>M06-091</u>	G5. Date Permit Issued <u>A12006005797</u>	G6. Date Certificate Of Compliance/Occupancy issued
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G7 This permit has been issued for:  New Construction  Substantial Improvement

G8 Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

G9 BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters (PR) Datum \_\_\_\_\_

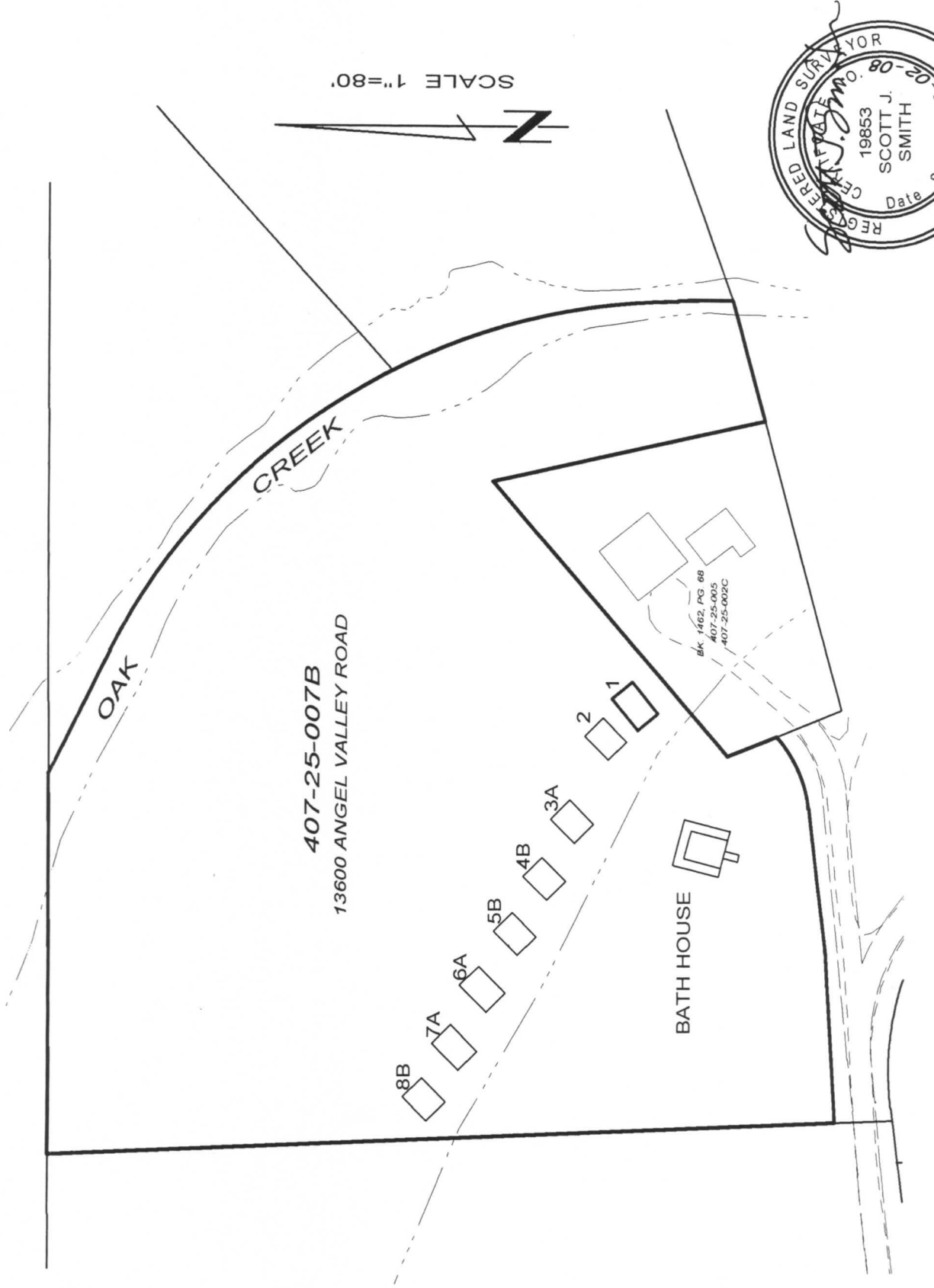
Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments



EXPIRES: 06/30/2010