U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program OMB No. 1660-0008

Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

, Important: Follow the instructions on pages 1–9.

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

SECTION A - PROPERTY INFORMAT	FOR INSURANCE COMPANY USE				
A1. Building Owner's Name STEPHEN M. JERMAINE & LINDA TTEES	Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg Box No. 355 CROSS CREEK CIRCLE	. No.) or P.O. Route and Company NAIC Number:				
1	tate ZIP Code vrizona \$6336				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) CROSS CREEK RANCH, LOT 8, 408-19-046					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 34-48-45.8 Long. 111-5	-37.4 Horizontal Datum: NAD 1927 X 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 8	•				
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s)	2621 sq ft				
b) Number of permanent flood openings in the crawlspace or e	nclosure(s) within 1.0 foot above adjacent grade 0				
c) Total net area of flood openings in A8.b	0 sq in				
d) Engineered flood openings? Yes 🗵 No					
A9. For a building with an attached garage:					
a) Square footage of attached garage 1025 sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0					
c) Total net area of flood openings in A9.b 0 sq in					
d) Engineered flood openings? Yes No					
, system of the					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
· · · · · · · · · · · · · · · · · · ·	County Name B3. State				
YAVAPAI COUNTY 040093	(APAI UNINCORPORATED AREA Arizona				
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM P Effective Revised	Zone(s) (Zone AO, use Base Flood Depth)				
04025C1430 G 2/15/19 9/03/2010	UNSHADED X 3825.9				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes 区 No					
Designation Date: CBRS OPA					

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: CROSS CREEK State ZIP Code Company NAIC Number 86336 SEDONA 42 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Construction Drawings* ☐ Building Under Construction* C1. Building elevations are based on: X 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: RM36A Vertical Datum: 3965.54 NAVD88 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 🖂 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. × feet a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3859.41 meters × feet 3868.79 meters b) Top of the next higher floor NA × feet meters c) Bottom of the lowest horizontal structural member (V Zones only) × feet 3868.19 meters d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building 3865.23 |x| feet meters (Describe type of equipment and location in Comments) 3857.89 × feet meters f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) 3867.98 × feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including × feet meters 3853.25 structural support 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. Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No X Check here if attachments. Certifier's Name License Number STANLEY L. NIENHUSER 29884 Title **SURVEYOR** Company Name ARIZONA LAND SOLUTIONS

2673 N. OAKMONT DRIVE City

FLAGSTAFF

Signature

Address

State Arizona

ZIP Code 86004

Date 2/20/20 Telephone 928-773-9204

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Comments (including type of equipment and location, per C2(e), if applicable)

LOWEST MECHANICAL IS AC UNIT OUTSIDE OF BUILDING.

LATITUDE AND LONGITUDE WERE TAKEN FROM YAVAPAI COUNTY GIS.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:
355 CROSS CREEK	CIRCLE		*
City	State	ZIP Code	Company NAIC Number
SENONA	AZ	€6336	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

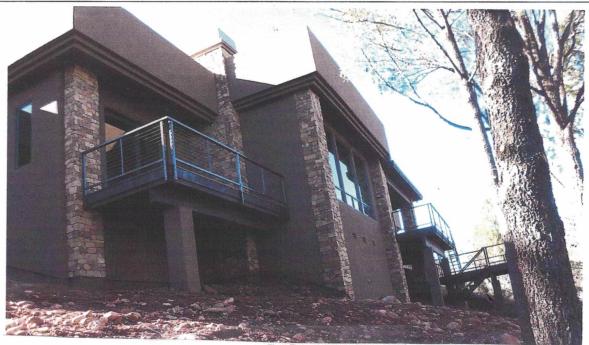


Photo Three

Photo Three Caption RIGHT REAR VIEW

Clear Photo Three

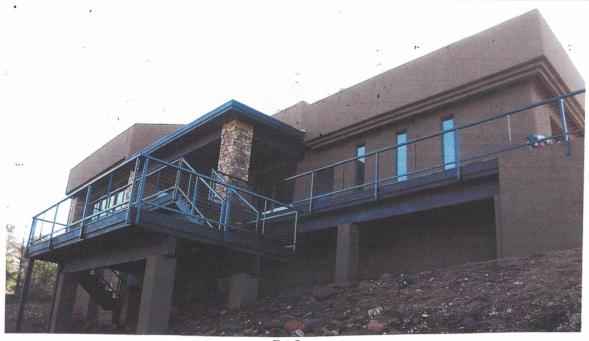


Photo Four

Photo Four Caption LEFT REAR VIEW

Clear Photo Four

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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355 CROSS CREEK	CIRCLE		A
City	State	ZIP Code	Company NAIC Number
SENONA	AZ	≥ 86336	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

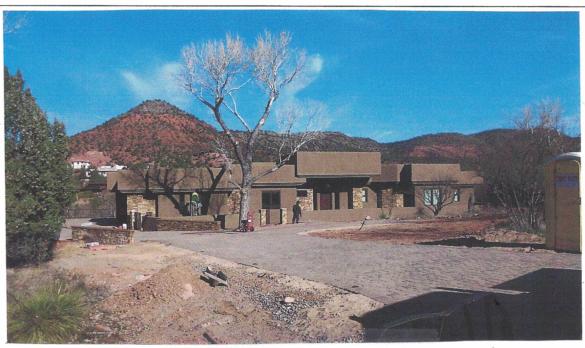


Photo One

Photo One Caption FRONT VIEW

Clear Photo One

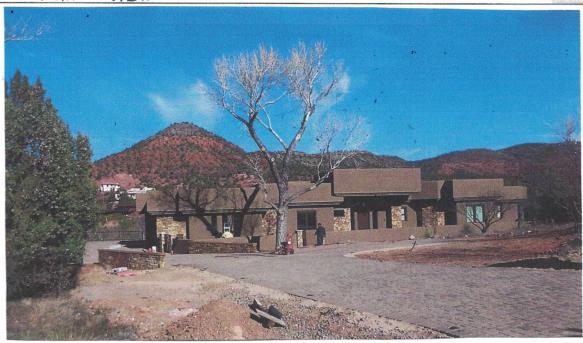


Photo Two

Photo Two Caption FRONT VIEW

Clear Photo Two