U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

Wational Flood Insurance Program

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE
A1. Building Owner's Name RICHARD S. & SYLVIA J. CARLETON					Policy Number:
A2. Building Street Address 13621 S BOB WHITE CT	(including Apt., U	nit, Suite, and/or Bldg.	No.) or P.O. Route and E	Box No.	Company NAIC Number:
City MAYER				ode 86333	
A3. Property Description (Lo ASSESSOR'S PARCEL NUM	t and Block Numb IBER 500-03-742	pers, Tax Parcel Numb ; SPRING VALLEY UN	er, Legal Description, etc NIT 2, LOT 735	.)	
 A4. Building Use (e.g., Resid A5. Latitude/Longitude: Lat. A6. Attach at least 2 photogr A7. Building Diagram Number A8. For a building with a crawn a) Square footage of crawn b) Number of permanent or enclosure(s) within c) Total net area of flood d) Engineered flood open 	N34.34664° Lon raphs of the buildi er 5 wlspace or enclos awlspace or enclos in 1.0 foot above a d openings in A8. enings?	rg. W112.16197° rng if the Certificate is because(s): soure(s) 0 in the crawlspace djacent grade 0 b 0 Yes ⊠ No	oeing used to obtain flood A9. F sq ft aj bj sq in c) d	Horizontal Datum insurance. or a building with an atta Square footage of atta Number of permanent within 1.0 foot above a Total net area of flood period in Engineered flood open	ched garage 0 sq ft flood openings in the attached garage idjacent grade 0 openings in A9.b 0 sq in nings? Yes No
	SECTIO	N B – FLOOD INSU	JRANCE RATE MAP	(FIRM) INFORMATIO	N
B1. NFIP Community Name & YAVAPAI COUNTY & 040093			County Name 'APAI, UNINCORPORAT	ED AREA	B3. State AZ
B4. Map/Panel Number 04025C2860	B5. Suffix G	36. FIRM Index Date SEP. 3, 2010	B7. FIRM Panel Effective/Revised Da SEP. 3, 2010	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 3932.8'
B10. Indicate the source of the FIS Profile B11. Indicate elevation datum B12. Is the building located in Designation Date:	☐ FIRM ☐ used for BFE in It	Community Determine tem B9: NGVD 192 Resources System (C	ed	rce: 8	□ Yes ⊠ No
	SECTION (NED)
	0-011011	, - BUILDING ELEV	VATION INFORMATIC	ON (SURVEY REQUIF	(ED)
C1. Building elevations are bas *A new Elevation Certificat C2. Elevations – Zones A1–A3 below according to the buil Benchmark Utilized: <u>ERM:</u> Indicate elevation datum us Datum used for building ele	sed on: te will be required 30, AE, AH, A (with Iding diagram spender 76-2 Ised for the elevat	Construction Drawing when construction of the BFE), VE, V1–V30, Vacified in Item A7. In Puter Items (No. 1) Veitons in items (No. 1) and the second construction of the second construc	s* ☐ Building U the building is complete. If (with BFE), AR, AR/A, A perto Rico only, enter met prical Datum: NAVD88 hh) below. ☐ NGVD 193	ers. 29 ⊠ NAVD 1988 □ O	☑ Finished Construction AH, AR/AO. Complete Items C2.a–h ther/Source:
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ELEVATION CERTIFICATE,	page 2	
	, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including A 13621 S BOB WHITE CT	pt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City MAYER	State AZ ZIP Code 86333	Company NAIC Number:
SECTIO	N D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATI	ION (CONTINUED)
Copy both sides of this Elevation Ce	rtificate for (1) community official, (2) insurance agent/company, and (3) b	ouilding owner.
Comments C2e) WATER HEATER	, OUTSIDE ACCESS DOOR LEFT OF ENTRANCE DOOR	
Signature	Date OCT. 21, 2013	
Leg M	76	
SECTION E – BUŁĽDING EĽ	EVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZO	NE AO AND ZONE A (WITHOUT BFE)
	complete Items E1–E5. If the Certificate is intended to support a LOMA o	
	il grade, if available. Check the measurement used. In Puerto Rico only, e for the following and check the appropriate boxes to show whether the ele	
grade (HAG) and the lowest a	djacent grade (LAG).	
	- , ,	neters ☐ above or ☐ below the HAG. neters ☐ above or ☐ below the LAG.
E2. For Building Diagrams 6-9 with	h permanent flood openings provided in Section A Items 8 and/or 9 (see p	ages 8–9 of Instructions), the next higher floor
(elevation C2.b in the diagrams E3. Attached garage (top of slab) is	s) of the building is	
. ,	s	
E5. Zone AO only: If no flood dept	h number is available, is the top of the bottom floor elevated in accordanc	
ordinance? Yes No	Unknown. The local official must certify this information in Section G.	
SECTIO	N F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION
	rized representative who completes Sections A, B, and E for Zone A (with	nout a FEMA-issued or community-issued BFE
or Zone AO must sign here. The state Property Owner's or Owner's Authori	ements in Sections A, B, and E are correct to the best of my knowledge.	
Address	City	State ZIP Code
Signature	Date	Telephone
Comments		
		П 01 - 1-1
		☐ <u>Check here if attachme</u>
as local official who is sutherized by la	SECTION G – COMMUNITY INFORMATION (OPTIONAL	
this Elevation Certificate. Complete the	w or ordinance to administer the community's floodplain management ordinate applicable item(s) and sign below. Check the measurement used in Items	ance can complete Sections A, B, C (or E), and s G8–G10. In Puerto Rico only, enter meters.
	was taken from other documentation that has been signed and sealed by elevation information. (Indicate the source and date of the elevation date	
2. A community official complet	ed Section E for a building located in Zone A (without a FEMA-issued or c	community-issued BFE) or Zone AO.
3. The following information (Ite	ems G4–G10) is provided for community floodplain management purposes	S.
G4. Permit Number	G5. Date Permit Issued G6. Date Certificate	Of Compliance/Occupancy Issued
7. This permit has been issued for:	☐ New Construction ☐ Substantial Improvement	
8. Elevation of as-built lowest floor (including basement) of the building:	ers Datum
9. BFE or (in Zone AO) depth of floo	oding at the building site:	ers Datum
10. Community's design flood elevation	on: feet	ers Datum
ocal Official's Name	Title	
	Title Telephone	
Local Official's Name Community Name Signature		

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13621 S BOB WHITE CT

City MAYER

State AZ

ZIP Code 86333

FOR INSURANCE COMPANY USE Policy Number:

Company NAIC Number:

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



