U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

	SECTION A - PROPERTY INFORMATION	For Insurance Company Use:				
A1.	Building Owner's Name	Policy Number				
Ā2.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number				
. —	City MAVER State AZ	ZIP Code 86333				
A3	Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)					
A4	Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RES 1 DEN TWAL					
A5.	5. Latitude/Longitude: Lat. 34.24 Ug Long. [12-44-27 Horizontal Datum: NAD 1927 NAD 1935					
A7.	Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. Building Diagram Number					
A8	A8 For a building with a crawl space or enclosure(s), provide: A9. For a building with an attached garage, provide:					
	b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage					
	Choodic(o) want within the contract of the con	ove adjacent grade sq in				
		.I				
0.1	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATIO					
B1 【入	NFIP Community Name & Community Number NFIP Community Name & Community Number B2. County Name YAVAPA1	B3. State				
В4	. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood	B9. Base Flood Elevation(s) (Zone AO, use base flood denth)				
04	1075C2519 1- CE/06/01 AE	4394.7				
10	Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile Other (Describe)					
11	Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe)					
12.	Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?	Yes No				
	Designation Date CBRS OPA					
***********	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIF	(ED)				
	Building elevations are based on: Construction Drawings* Building Under Construction* A new Elevation Certificate will be required when construction of the building is complete.	Finished Construction				
2 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						
	pelow according to the building diagram specified in Item A7. Benchmark Utilized	7				
	Conversion/Comments					
	Check the measure	ment used.				
a b		ers (Puerto Rico only) ers (Puerto Rico only)				
С		ers (Puerto Rico only)				
d e	Attached garage (top of slab)	ers (Puerto Rico only)				
·	(Describe type of equipment in Comments)	ers (Puerto Rico only)				
f) g		ers (Puerto Rico only) ers (Puerto Rico only)				
9						
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.	OF DAND STATE				
Certi		National Contraction of the Cont				
T:41-	iner's Name YAVAPAT SURVEYING LC	13011				
Title	PO BOX Z6969 Company Name COTT VIX, AZ 86312	13011 S. TIMOTH HORRS				
Title Addr Signa	PO BOX Z6969 Company Name COTT VLY, AZ B6312 City 12/12/07 938-777-684-7	13011 S. TIMOTH HORRS 120NA USA				

IMPORTANT: In these spaces, copy the corresp	ponding information fr	om Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/o	r Bldg. No.) or P.O. Route	and Box No.	Policy Number
City MAYER	A State	8633	3
SECTION D - SURVEYOR	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.		
Copy both sides of this Elevation Certificate for (1) comm			ding owner.
comments CZ-E A.C. UK	or an si	AB NEXT	TO.
BUILDING			
\bigcirc \mathcal{M} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc		, ,	7
Signature MULLING XPM	Da	. 10117101	Check here if attachments
SECTION E - BUILDING ELEVATION INFORT	MATION (SURVEY NO	REQUIRED/FOR ZON	E AO AND ZONE A (WITHOUT BEE)
For Zones AO and A (without BFE), complete Items E1-E and C. For Items E1-E4, use natural grade, if available.	Check the measurement u	ised. In Puerto Rico only, er	nter meters.
E1. Provide elevation information for the following and grade (HAG) and the lowest adjacent grade (LAG).	check the appropriate boxe	es to snow whether the eleva	mon is above of below the highest adjacent
a) Top of bottom floor (including basement, crawl s b) Top of bottom floor (including basement, crawl s	pace, or enclosure) is	feet mete	rs above or below the HAG. rs above or below the LAG.
E2. For Building Diagrams 6-8 with permanent flood op (elevation C2.b in the diagrams) of the building is	penings provided in Section	A Items 8 and/or 9 (see page	ge 8 of Instructions), the next higher floor
E3 Attached garage (top of slab) is	feet meters abo	ve or below the HAG.	
E4 Top of platform of machinery and/or equipment ser	vicing the building is	feet mete	rs above or below the HAG.
E.5. Zone AO only: If no flood depth number is available ordinance? Yes No Unknown. The			with the community's hoodplain management
SECTION F - PROPERTY	OWNER (OR OWNER	'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized representative or Zone AO must sign here. The statements in Sections	who completes Sections A A, B, and E are correct to t	, B, and E for Zone A (withon the best of my knowledge.	ut a FEMA-issued or community-issued BFE)
Property Owner's or Owner's Authorized Representative	s Name		
Address	City	o	State ZIP Code
Signature	Date		Telephone
Comments			
		9	Check here if attachment
		ORMATION (OPTIONAL	
The local official who is authorized by law or ordinance to a and G of this Elevation Certificate. Complete the applicable	le item(s) and sign below.	Check the measurement use	ed in Items G8. and G9.
G1. The information in Section C was taken from oth is authorized by law to certify elevation information.	on. (Indicate the source ar	nd date of the elevation data	in the Comments area below.)
G2 A community official completed Section E for a b			ommunity-issued BFE) or Zone AO.
G3 The following information (Items G4G9.) is prov	vided for community floodpl	ain management purposes.	
G4 Permit Number, G5. Date Permi	it Issued	G6. Date Certificate	Of Compliance/Occupancy Issued
G7. This permit has been issued for: New Constructi	ion Substantial Im	provement	
G8. Elevation of as-built lowest floor (including basement)			neters (PR) Datum
G9 BFE or (in Zone AO) depth of flooding at the building s	site:	lfeet ln	neters (PR) Datum
Local Official's Name SeFF (OW)		Title Handro (inist
Community Name		Telephone	513
Signature		Date	
Comments EC in Cavand.	/	- (
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