## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

# **ELEVATION CERTIFICATE**

# **IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**

opy all pages of this Elevation C	ertificate and all attachments for (	<ol><li>community official,</li></ol>	(2) insurance ag	gent/company, and	(3) building owner.

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 INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: Black Canyon Water Impr Dist	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 19350 E Todd Evans Rd	Company NAIC Number:
City: Black Canyon City State: AZ	ZIP Code: 85324
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Nu APN 502-08-008Q	mber:
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Non-Resident	ial Well house
A5. Latitude/Longitude: Lat. 34.070602 Long112.145087 Horizontal Datum:	NAD 1927 🕱 NAD 1983 🗌 WGS 84
A6. Attach at least two and when possible four clear photographs (one for each side) of the building	g (see Form pages 7 and 8).
A7. Building Diagram Number:1B	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>N/A</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area	? 🗌 Yes 🗌 No  XN/A
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foo Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u>	t above adjacent grade:
d) Total net open area of non-engineered flood openings in A8.c:N/A sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation - see Instruct	ions):N/Asq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage:N/A sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage	? 🗌 Yes 🗌 No  XN/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above ad Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u>	jacent grade: _
d) Total net open area of non-engineered flood openings in A9.c:N/Asq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation - see Instruct	ions):N/Asq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1.a. NFIP Community Name: Yavapai County B1.b. NFIP Community Ide	entification Number: 040093
B2. County Name: Yavapai, Unincorporated B3. State: AZ B4. Map/Panel No.:	04025C3609 B5. Suffix: H
B6. FIRM Index Date: 02/08/2024 B7. FIRM Panel Effective/Revised Date: 10/16/20	014
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use	Base Flood Depth): 1983.5
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:	
B11. Indicate elevation datum used for BFE in Item B9: 🗌 NGVD 1929 🗵 NAVD 1988 🗌 Othe	r/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pro Designation Date: CBRS OPA	tected Area (OPA)? 🗌 Yes 🕱 No
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?	] No

		HE INSTRUCTIONS			INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 19350 E Todd Evans Rd							
City: Black Canyon City State: AZ ZIP Code: 85324				Policy Number:			
				Company NAIC Number:			
SECTION C - BUI	LDING ELEVATIO	N INFORMATION (	SURVEY	REQU	IRED)		
C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.							
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: NGS ET0175 Vertical Datum: NAVD 88							
Indicate elevation datum used for the elevatio	ns in items a) through ther:	h) below.					
Datum used for building elevations must be the for building elevations must be the source of the conversion to the conve			on factor us	ed?	X Yes 🗌 No		
a) Top of bottom floor (including baseme			1,98	81.10	Check the measurement used:		
b) Top of the next higher floor (see Instru	uctions):		N/.	A	feet meters		
c) Bottom of the lowest horizontal structu	ıral member (see Inst	ructions):	N/	Α	🗌 feet 🔲 meters		
d) Attached garage (top of slab):			N//	4	🗌 feet 🔲 meters		
<ul> <li>e) Lowest elevation of Machinery and Ec (describe type of M&amp;E and location in</li> </ul>			1,98	84.60	🗴 feet 🗌 meters		
f) Lowest Adjacent Grade (LAG) next to	building: 🗌 Natura	I 🗙 Finished	1,98	80.50	🗙 feet 🗌 meters		
g) Highest Adjacent Grade (HAG) next to	o building: 🗌 Natura	I 🗙 Finished	1,98	0.80	🗙 feet 🗌 meters		
<ul> <li>h) Finished LAG at lowest elevation of at support:</li> </ul>	tached deck or stairs,	including structural	1,98	80.50	🗙 feet 🗌 meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION							
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. <i>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.</i>							
Were latitude and longitude in Section A provided by a licensed land surveyor? 🛛 Yes 🗌 No							
X Check here if attachments and describe in	the Comments area.						
Certifier's Name: Brandon Van Horn	Licen	se Number: PLS 538	90	- ^	A AND IN A		
Title: Professional Land Surveyor Brack Town							
Company Name: VH Land Survey LLC							
Address: 7585 E Pharlap Lane					6/12/24		
City: Prescott Valley	State:	AZ ZIP Code: 80	6315		ARIZONA U.S.M. ON		
Signature: Bzwich Van Maz Date: 06/12/2024							
Telephone: (928) 710-9700     Ext.:     Email: vhlandsurvey@gmail.com     Place Seal Here							
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments): This is a domestic water supply well house C2e. Electric meter on West side of building							

**ELEVATION CERTIFICATE** 

ELEV IMPORTANT: MUST FO	-	RTIFICATE	AGES 9-19				
Building Street Address (including Apt., Unit, Suite, and/or E 19350 E Todd Evans Rd	FOR INSURANCE COMPANY US						
City: Black Canyon City State:	Policy Number:						
	AZ ZIF	P Code: 85324	Company NAIC Number:				
SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)							
For Zones AO, AR/AO, and A (without BFE), complete Ite intended to support a Letter of Map Change request, com enter meters.							
Building measurements are based on: Construction *A new Elevation Certificate will be required when constru		-	ruction*				
E1. Provide measurements (C.2.a in applicable Building measurement is above or below the natural HAG and		e following and check	the appropriate boxes to show whether the				
<ul> <li>a) Top of bottom floor (including basement, crawlspace, or enclosure) is:</li> </ul>		feet me	ters 🗌 above or 🗌 below the HAG				
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is:</li> </ul>		feet 🔲 me	ters 🔲 above or 🗌 below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood openext higher floor (C2.b in applicable	nings provided	in Section A Items 8 a	nd/or 9 (see pages 1–2 of Instructions), th				
Building Diagram) of the building is:		feet 🛄 me	ters 🗌 above or 🗌 below the HAG				
E3. Attached garage (top of slab) is:		feet me	ters 🗌 above or 🗌 below the HAG				
E4. Top of platform of machinery and/or equipment servicing the building is:		feet me	ters 🗌 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION							
The property owner or owner's authorized representative sign here. <i>The statements in Sections A, B, and E are co</i>	rrect to the bes		for Zone A (without BFE) or Zone AO mus				
Check here if attachments and describe in the Comm							
Property Owner or Owner's Authorized Representative N							
Address:		Stata	ZID Codo				
City							
Signature:		Date:					
Telephone: Ext.: Ema	uil:						
Comments:							

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.	FOR INSURANCE COMPANY USE						
19350 E Todd Evans Rd	Policy Number:						
City: Black Canyon City State: AZ ZI	IP Code: 85324	Company NAIC Number:					
SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)							
The local official who is authorized by law or ordinance to administer the Section A, B, C, E, G, or H of this Elevation Certificate. Complete the a							
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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)							
G2.a. A local official completed Section E for a building located in E5 is completed for a building located in Zone AO.	Zone A (without a BFE), Zor	ne AO, or Zone AR/AO, or when item					
G2.b. G2.b. G2.b.							
G3. In the Comments area of Section G, the local official describ	oes specific corrections to the	e information in Sections A, B, E and H.					
G4. The following information (Items G5–G11) is provided for co	ommunity floodplain manage	ment purposes.					
G5. Permit Number: G6. Date Permi	it Issued:						
G7. Date Certificate of Compliance/Occupancy Issued:							
G8. This permit has been issued for: $\Box$ New Construction $\Box$ Su	ibstantial Improvement						
G9.a. Elevation of as-built lowest floor (including basement) of the building:	feet	meters Datum:					
G9.b. Elevation of bottom of as-built lowest horizontal structural member:	feet	meters Datum:					
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	feet	meters Datum:					
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:	feet	meters Datum:					
G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area. The local official who provides information in Section G must sign here. <i>I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.</i>							
Local Official's Name:	Title:						
NFIP Community Name:							
Telephone: Ext.: Email:							
Address:							
City:	State:	ZIP Code:					
Signature:	Date:	· · · · · · · · · · · · · · · · · · ·					
Comments (including type of equipment and location, per C2.e; descrip Sections A, B, D, E, or H):	tion of any attachments; and	corrections to specific information in					

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19							
Building Street Address (including Apt., 19350 E Todd Evans Rd	Unit, Suite, and/or Bldg. N	o.) or P.O. Route and	Box No.:	FOR INS	SURANCE COMPANY USE		
City: Black Canyon City	State: A	Z ZIP Code: 853	324	Policy Nu Company	MAIC Number:		
SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)							
The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). <i>Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.</i>							
H1. Provide the height of the top of the	ne floor (as indicated in Fo	oundation Type Diagra	ams) above th	ne Lowest Ad	ijacent Grade (LAG):		
a) <b>For Building Diagrams 1A,</b> <sup>2</sup> floor (include above-grade floors subgrade crawlspaces or enclosu	only for buildings with		feet	meters	above the LAG		
b) <b>For Building Diagrams 2A, 2</b> higher floor (i.e., the floor above l enclosure floor) is:			feet	meters	above the LAG		
H2. Is <b>all</b> Machinery and Equipment H2 arrow (shown in the Foundati Yes No							
SECTION I – PROPERT	Y OWNER (OR OWNE	<b>R'S AUTHORIZED</b>	REPRESE	NTATIVE) C	CERTIFICATION		
The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. <i>The statements in Sections A, B, and H are correct to the best of my knowledge</i> . <b>Note:</b> If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.  Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.  Property Owner or Owner's Authorized Representative Name:							
Address:							
City:			State:	ZIP (	Code:		
Signature:		Date:					
Telephone:	Ext.: Email:						
Comments:							

**ELEVATION CERTIFICATE** 

#### ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 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.:				FOR INSURANCE COMPANY USE
19350 E Todd Evans Rd			Delieu Number	
City: Black Canyon City	Ctata	AZ	ZIP Code: 85324	Policy Number:
	_ State: _		_ ZIP Code: 00024	Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: 20240610 South and East side

Clear Photo One



## ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite	, and/or Bld		or P.O. Route and Box No.:	FOR INSURANC	E COMPANY USE	
19350 E Todd Evans Rd		<u> </u>		Policy Number:		
City: Black Canyon City	State:	AZ	ZIP Code: 85324	Company NAIC Number:		
Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.						
		Dha	4. Thus -			
		Pho	to Three			
Photo Three Caption:					Clear Photo Three	
		Phr	oto Four			
Dhata Faur Contian						
Photo Four Caption:					Clear Photo Four	