## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number DARLENE CALVERT BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 754 N MAIN STREET ZIP CODE 86326 COTTONWOOD STATE AZ PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 406-38-01/- HOPKINS RANCH SUB # / LO BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) HORIZONTAL DATUM: SOURCE: GPS (Type): ( ##° - ##' - ##.##" or ##.####") □ NAD 1927
□ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** COTTONWOOD ARIZONA YAVA PAI B4, MAP AND PANEL **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) NUMBER EFFECTIVE/REVISED DATE **B5. SUFFIX** B6. FIRM INDEX DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 6/6/2001 6/2001 <u>04025C 178</u>2 61 AO B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile FIRM ☐ Compunity Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: WGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ②No Designation Date 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. Building Diagram Number\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum Conversion/Comments Elevation reference mark used \_Does the elevation reference mark used appear on the FIRM? 🔲 Yes 📋 No 🚧 a) Top of bottom floor (including basement or enclosure) License Number, Embossed Seal, Signature, and Date D b) Top of next higher floor C) Bottom of lowest horizontal structural member (V zones only) *NLA*.\_ft.(m) d) Attached garage (top of slab) **///**//.\_\_ft.(m) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) *Kd/1*.\_\_ft.(m) f) Lowest adjacent (finished) grade (LAG) 1.9 ft.(m) ☐ g) Highest adjacent (finished) grade (HAG) .9 ft.(m) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 📈 i) Total area of all permanent openings (flood vents) in C3.h EXPINES 0630 \_sq. in. (sq. cm) /// 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 in Sections A, B, and C 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. CERTIFIER'S NAME LICENSE NUMBER TITLE COMPANY NAME ADDRESS CITY STATE ZIP CODE SIGNATURE DATE TELEPHONE

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.									For Insurance Company Use:	
JOILDIN	134 N MAIN STREET							Policy Number		
OTY		on woo.	-	S	TATE 4 Z		ZIP CODE 8632	6	Company NAIC Number	
	<del></del>	SEC	TION D - SUR\	VEYOR, ENGINEER, OF	RARCHITECT	CERTIFICA	ATION (CONTI	NUED)		
opy bo	oth sides of this Ele	evation Certificate	e for (1) communi	ity official, (2) insurance ager	it/company, and (	(3) building ov	vner.			
OMME	ENTS									
		<del>-</del>								
						•			Check here if attachments	
	SECTION F	- Building i	ELEVATION IN	NFORMATION (SURVE	NOT REQUI	RED) FOR 2	ONE AO AND	ZONE A (	WITHOUT BFE)	
			plete Items E1 th	nrough E4. If the Elevation C	ertificate is intend	ded for use as	supporting infor	nation for a L	OMA or LOMR-F,	
	must be completed		4 11 11							
ronron	aanta tha buildina .	حاجفتناه محامات بمسم	and the state of the A	most similar to the building fo						
The top	p of the bottom flor	provide a sketori or (including base	or priolograph.) ement or enclosus	are) of the building is $$	. <sub>(m)</sub> 10"	above or [		one) the high	est adiacent grade. (Use	
natura	al grade, if available	e).								
or Bu	ilding Diagrams 6-	8 with openings (	(see page 7), the	e next higher floor or elevated	floor (elevation b	o) of the buildi	ng isft.(m)_	_in.(cm) abo	ve the highest adjacent	
				CAS OPERANO vicing the building is _ft		] abovo a= [	holow/obsel-	ana) tha hist	ont adiacont grade. (Llas	
	p or the plationn of al grade, if available		or edmbureur seu	violity the building isT	.(m)in.(cm) (	J above or [	below (cneck	one) ine nigr	est adjacent grade. (USe	
or Zor	ne AO only: If no f	flood depth numb	er is available, is	s the top of the bottom floor e	levated in accord	lance with the	community's floo	odplain mana	gement ordinance?	
Ye	es No l	Jnknown. The lo	ocal official must o	certify this information in Sec	tion G.				<u>,</u>	
				PERTY OWNER (OR OW			<del> </del>			
				o completes Sections A, B, C				without a FEI	MA-issued or community-	
				Sections A, B, C, and E are PRESENTATIVE'S NAME	correct to the bes	t of my know	eage			
		NOWNERS AU	I NORIZED KEF	PRESENTATIVE S NAIVIE						
DRES	SS				CITY			STATE	ZIP CODE	
NATU	JRE	·			DATE		•	TELEPHONI		
MMEN	NTS						<del> </del>			
			<u>,</u>						Check here if attachments	
				CTION G - COMMUNITY						
	ficial who is author Complete the appl			nister the community's floodp	lain managemen	nt ordinance c	an complete Sec	tions A, B, C	(or E), and G of this Elevation	
				umentation that has been sid	ned and emboss	sed by a licen	sed survevor en	nineer or ard	hitect who is authorized by state	
orl	local law to certify	elevation informa	ation. (Indicate the	ne source and date of the ele	vation data in the	Comments a	area below.)	-		
				located in Zone A (without a			ssued BFE) or Z	one AO.		
		tion (Items G4-G	9) is provided for	community floodplain mana	gement purposes	S.				
PERMI	IT NUMBER		G5. DATE PER	RMIT ISSUED		G6. DATE C	ERTIFICATE OF (	COMPLIANCE	JOCCUPANCY ISSUED	
nis pen	mit has been issu	ed for: New	Construction [	Substantial Improvemen	<u>_</u>	· · · · · · · · · · · · · · · · · · ·				
	n of as-built lowest				•		ft.(m)		Datum:	
	(in Zone AO) depth		•	-		_	ft.(m)		Datum:	
AL OF	FFICIAL'S NAME		/		TITL	.بــر E	٠			
MLIN	ITY NAME	Zimo	147)	COSTELLO	TEI	EPHONE	By Ex	16,114	EEVL	
		injox	c Colte	or wood			228	639	8033	
	_\	)			DAT	<b> </b>	0315	04		
VATUF	TC			15 BELOW	V THE	- na	GULMI	ors	LEVEL OF	
MEN	10 THE	571610	1 0 1 C			<i>,</i> - G		/	<u> </u>	
	THE	STAVO	TUNE					GOILES	- PMS DATE	
	THE		FOR	DER MEN	TE WI			touse	Check here if attachments	