406-50-341

## PEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077

Expires December 31, 2005

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 -7.

	CTION A - PROPERTY OWNER I		For Insurance Company Use:				
BUILDING OWNER'S NAME	Policy Number						
TAMMY CIREST	Long, raditio						
BUILDING STREET ADDRESS (Including Apt., Unit, Su 323 W. MESQUI	Company NAIC Number						
CITY	STATE	ZIP,(	CODE				
COMONWOOD AT		86324					
PROPERTY DESCRIPTION (Lot and Block Numbers, T	ax Parcel Number, Legal Description	etc.)					
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)							
PESIDENTIAL	on, Accessory, etc. Ose a Comment	s alea, ii licoessary.)					
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL DATUM: NAD 1927 🔲 NAD 1983	SOURCE: GPS (T	ype): Quad Map				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME		B3. STATE				
CITY OF COTTON WOOD 0400			DJ. STATE				
B4. MAP AND PANEL							
NUMBER B5. SUFFIX B6. FIRM IN	B7. FIRM PANE DEX DATE EFFECTIVE/REVISED	· · · · · · · · · · · · · · · · · ·	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)				
04025C1781 F 060		, ,	3582.7				
B10. Indicate the source of the Base Flood Elevation (BFE) data		<u> </u>					
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe): ☐ A							
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
SECTION C - B	JILDING ELEVATION INFORMAT	ON (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Building Under Construction							
*A new Elevation Certificate will be required when construction							
C2. Building Diagram Number € (Select the building diagram mos		ficate is being completed - see page	es 6 and 7 If no diagram				
accurately represents the building, provide a sketch or photog	graph.)	roato to portigional coo page	so o and 1. Thrie diagram				
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V		11-A30 AR/AH AR/AO					
Complete Items C3a-i below according to the building diagr			he datum used for the REE in				
Section B, convert the datum to that used for the BFE. Show							
Section D or Section G, as appropriate, to document the datu		ar odiodidaori. Ooc tro space provi	ded of the comments area of				
Datum Conversion/Comments	THE CONVENTION.						
	erence mark used appear on the FIRM?	□ Ves □ No	The state of the s				
☐ a) Top of bottom floor (including basement or enclosure)	35 83. 3ft.(m)		Rolessional Engineer				
☐ b) Top of next higher floor		bossed Seal,	Stock TIFICATE AND TO SEE				
☐ c) Bottom of lowest horizontal structural member (V zones	ft.(m)	بة ق ق	//s//ssi				
☐ d) Attached garage (top of slab)		Dag	HISH TIMOTHY I II II IA				
	35 83.2ft.(m)	Emb	COSTELLO				
e) Lowest elevation of machinery and/or equipment      consisting the building (Paparithe in a Commentary and)	B ()	, e. (	287 71 1				
servicing the building (Describe in a Comments area)	—— <del>—</del>	ar the last	Rate Signed				
☐ f) Lowest adjacent (finished) grade (LAG)	358 <u>2</u> 4ft.(m)	မ (၁) (၁)	ARIZONA, JS.A.				
☐ g) Highest adjacent (finished) grade (HAG)	358 <u>2</u> 1ft(m)	License Number, Signature,	,				
☐ h) No. of permanent openings (flood vents) within 1 ft. abo		ž V					
i) Total area of all permanent openings (flood vents) in C3	hsq. in. (sq. cm)						
SECTION D - S	BURVEYOR, ENGINEER, OR ARCI	HITECT CERTIFICATION					
This certification is to be signed and sealed by a land sur							
I certify that the information in Sections A, B, and C on th	is certificate represents my best effo	ts to interpret the data available					
I understand that any false statement may be punishable	by fine or imprisonment under 18 U.						
CERTIFIER'S NAME		LICENSE NUMBER					
TITLE	COMPANY	NAME					
SEE SECTION			710 000				
) ADDRESS	CITY	STATE	ZIP CODE				
SIGNATURE	DATE	TCI C	PHONE				
	DAIL	1 ELEF	11014				

MPORTANT: In these space	MPORTANT: In these spaces, copy the corresponding information from Section A.			
BUILDING STREET ADDRESS (Indu	Policy Number			
Corown		010-2 STATE 86326	ZIP CODE	Company NAIC Number
300,000	SECTION D - SURVEYOR, ENGIN		TIFICATION (CONTINUE	
opy both sides of this Elevation C	ertificate for (1) community official, (2) insur			
COMMENTS	The state of the s	and agonicompany, and (o) but	iding officer.	
				<u> </u>
SECTION E DI	DINC ELEVATION INCORMATION	(CLIDVEY NOT DECUIDED)	FOR ZONE AO AND ZO	Check here if attachment
	LDING ELEVATION INFORMATION FE), complete Items E1 through E4. If the I			
ction C must be completed.	-c), whiplete items of through e4. If the t	cievation certificate is interided to	ruse as supporting information	ITIOI A LOIVIA OI LOIVIR-F,
•	ect the building diagram most similar to the	building for which this certificate is	s being completed see page	s 6 and 7. If no diagram accurately
represents the building, provide	,			-
	ding basement or enclosure) of the building	ı is ft.(m)in.(cm) [ abc	ve or Delow (check one)	the highest adjacent grade. (Use
natural grade, if available). For Building Diagrams 6-8 with o	penings (see page 7), the next higher floor	or elevated floor (elevation b) of th	ne building is ft/m\ in (d	m) above the highest adjacent
grade. Complete items C3.h an		or cicvated floor (cicvation b) of th	to building toitt(m)itt(c	any above the highest adjacent
	nery and/or equipment servicing the building	g isft.(m)in.(cm) abo	ve or 🔲 below (check one)	the highest adjacent grade. (Use
natural grade, if available).				
	pth number is available, is the top of the bo n. The local official must certify this informa		with the community's floodpla	in management ordinance?
L les L 140 L Olikilow	SECTION F - PROPERTY OWNER		NTATIVE) CERTIFICATIO	N
he property owner or owner's auti	norized representative who completes Sect	<del>'</del>		<del></del>
	here. The statements in Sections A, B, C,	•		at at Life thousand of continuing
ROPERTY OWNER'S OR OWN	IER'S AUTHORIZED REPRESENTATIVE	E'S NAME		
ADDRESS		CITY	ČTA.	TE ZID CODE
NUDRESS		CITY	STA	TE ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS ====	1-0			12-1 2022
PAY	TO SENIN BU	our In	NSMATION	634-3873
	OFOTION O. CO.	MANUAL CONTRACTION OF THE PROPERTY OF THE PROP	PTIONAL)	Check here if attachment
ما المحمل ملاحدة على المحاد ال		MMUNITY INFORMATION (C		A D 0/ E) 10 - (41-1- E1
e local official who is authorized by rtificate.  Complete the applicable	/ law or ordinance to administer the commu item(s) and sign below	unity's 1100apiain management ord	inance can complete Sections	SA, B, C (or E), and G of this Elevation
	was taken from other documentation that I	has been signed and embossed b	y a licensed surveyor, engine	er, or architect who is authorized by sta
	on information. (Indicate the source and da			
	ted Section E for a building located in Zone		nmunity-issued BFE) or Zone	AO.
· .	ems G4-G9) is provided for community floor	· · · · · · · · · · · · · · · · · · ·	w,	
64. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6	. DATE CERTIFICATE OF COM	IPLIANCE/OCCUPANCY ISSUED
7. This permit has been issued for:	☐ New Construction ☐ Substantial I	mprovement		
•	(including basement) of the building is:	•	ft.(m)	Datum:
. BFE or (in Zone AO) depth of flo	oding at the building site is:		ft.(m)	Datum:
OCAL OFFICIAL'S NAME	Em Caraca	PS TITLE	( 6	
COMMUNITY NAME	XI COSTEURO	TELEP	HONE -	~~ NEEVL
1 Cer	y de Comonn	1000	978	634 8033
SIGNATURE	7)	DATE	062	404
COMMENTS THE FL	OUD PLAN MAP	(FIRM) MAS	A DATUM	BUST HENE.
THE AL	2004 10 05 5	ME STAVETO	THE 15 IN	THE AF TA
7000 700	me er		- REE	7.70 7/2 00.
<u> </u>	ME FFE IS	ABOUE THE	OFE	Check here if attachment