

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

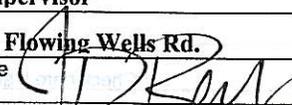
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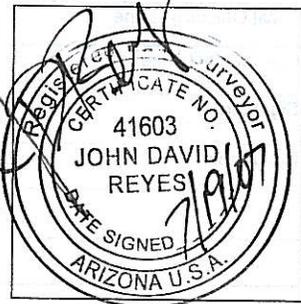
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SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name Donald Lopaze	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6170 W. Nebraska St.	Company NAIC Number	
City Tucson	State AZ	ZIP Code 85730
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 210-04-0250 Township 15S Range 12E Section 2 E259.49' W284.49' S555' SW4 NW4, 3.31AC		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential: Single Family Residence		
A5. Latitude/Longitude: Lat. 32.155970 Long. -111.096924		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number 1		
A8. For a building with a crawl space or enclosure(s), provide:		
a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft	A9. For a building with an attached garage, provide:	
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u>	a) Square footage of attached garage <u>791</u> sq ft	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>1</u>
c) Total net area of flood openings in A8.b <u>N/A</u> sq in	c) Total net area of flood openings in A9.b <u>196</u> sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Pima County / 040073		B2. County Name Pima County		B3. State AZ	
B4. Map/Panel Number 04019C 2225	B5. Suffix K	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) AO1	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1.0
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other (Describe) Highest Adjacent Natural Grade					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. 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 below according to the building diagram specified in Item A7. Benchmark Utilized Building FFE = 100.00 Vertical Datum Local Conversion/Comments <u>N/A</u>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) <u>100.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	b) Top of the next higher floor <u>N/A</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	d) Attached garage (top of slab) <u>100.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) <u>99.7</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	f) Lowest adjacent (finished) grade (LAG) <u>96.9</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) <u>97.7</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.			
Certifier's Name John David Reyes		License Number AZ RLS 41603	
Title Field Supervisor	Company Name Polaris Land Surveying		
Address 3528 N. Flowing Wells Rd.	City Tucson	State AZ	ZIP Code 85705
Signature 	Date 7/19/07	Telephone (520) 322-6400	



FPUP#

P0 CP

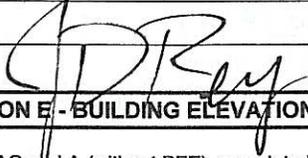
IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6170 W. Nebraska St.		Policy Number
City Tucson	State AZ	ZIP Code 85730
		Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments **The lowest service equipment (C3.e) is the A/C unit and all other equipment is/are above this elevation. (C3.b, C3.c, C3.h & C3.i are N/A)**

C3.e) There is a second A/C unit with an elevation of 99.9

Signature  Date 7/19/07 Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 - a) Top of bottom floor (including basement, crawl space, enclosure) is _____ feet _____ meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawl space, enclosure) is _____ feet _____ meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 5 and 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet _____ meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet _____ meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet _____ meters 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 REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name **N/A**

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

- 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 law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number FPUP#	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet _____ meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet _____ meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments

FPUP # 06-006E

P06 CP 00080

Client's Initials

JMS 2/16/06

FEDERAL 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.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Donald Lopaze		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 6170 W Nebraska St		Company NAIC Number	
CITY Tucson	STATE AZ	ZIP CODE 85730	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code: 210-04-0250 T 15S R 12E Sec 02			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential: Single-family Residence			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or #####") N/A		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Pima County 040073		B2. COUNTY NAME Pima County		B3. STATE AZ	
B4. MAP AND PANEL NUMBER 04019C 2225	B5. SUFFIX K	B6. FIRM INDEX DATE 2/8/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 2/8/99	B8. FLOOD ZONE(S) AO1	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 1.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): Highest Adjacent Grade

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date N/A

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 1 (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 LOCAL Conversion/Comments N/A

Elevation reference mark used FFE Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) 100.0 ft.(m)
- b) Top of next higher floor N/A ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- d) Attached garage (top of slab) 100.0 ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 99.7 ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 96.9 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 97.7 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
- i) Total area of all permanent openings (flood vents) in C3.h N/A 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: JOHN DAVID REYES LICENSE NUMBER: AZ # 41603

TITLE: FIELD SUPERVISOR COMPANY NAME: POLARIS LAND SURVEYING, LLC

ADDRESS: 3528 N. FLOWING WELLS CITY: TUCSON STATE: AZ ZIP CODE: 85705

SIGNATURE: [Signature] DATE: 7/18/07 TELEPHONE: (520) 322-6400

FPUP # 06-006E			For Insurance Company Use:
IMPORTANT: In these spaces, copy the corresponding information from Section A.			Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 6170 W Nebraska St			Company NAIC Number
CITY Tucson	STATE AZ	ZIP CODE 85 730	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
 The lowest service equipment (C3e) is the A/C UNIT and the ALL OTHER MACHINERY is/are above this elevation.
C3.b, C3.c, C3.h + C3.i are N/A
C3.e } THERE IS A SECOND A/C UNIT WITH AN ELEVATION OF 99.9.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. 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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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 REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER 06-006E	G5. DATE PERMIT ISSUED 02-16-06 D.W.	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments

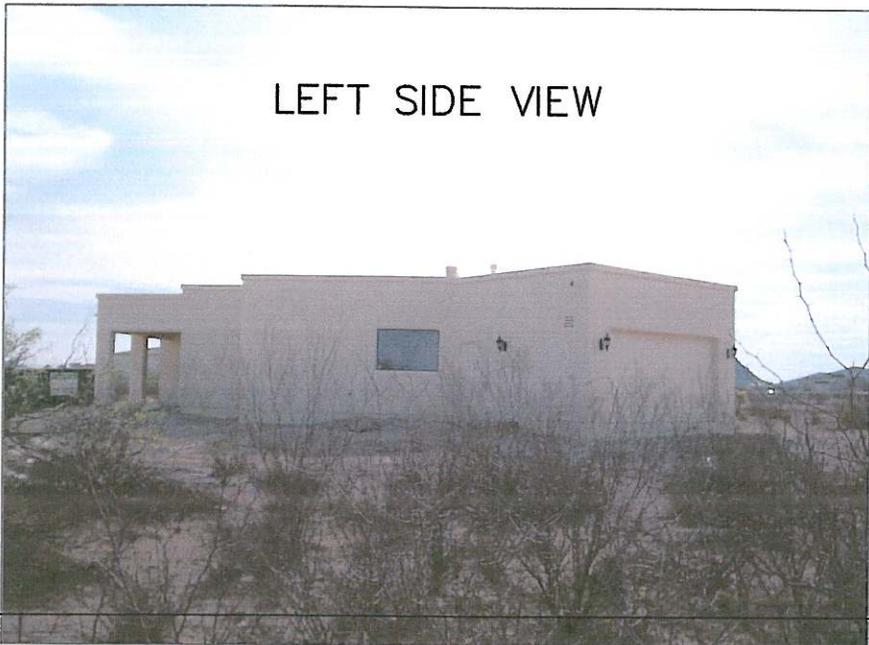
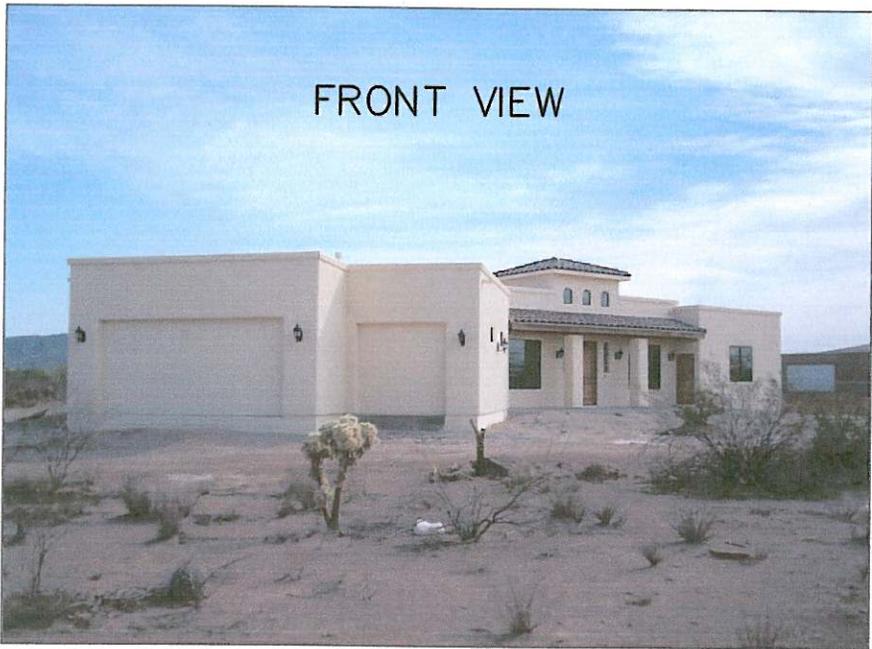
FPUP#

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. 6170 W. Nebraska St.			For Insurance Company Use: Policy Number
City Tucson	State AZ	ZIP Code 85730	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



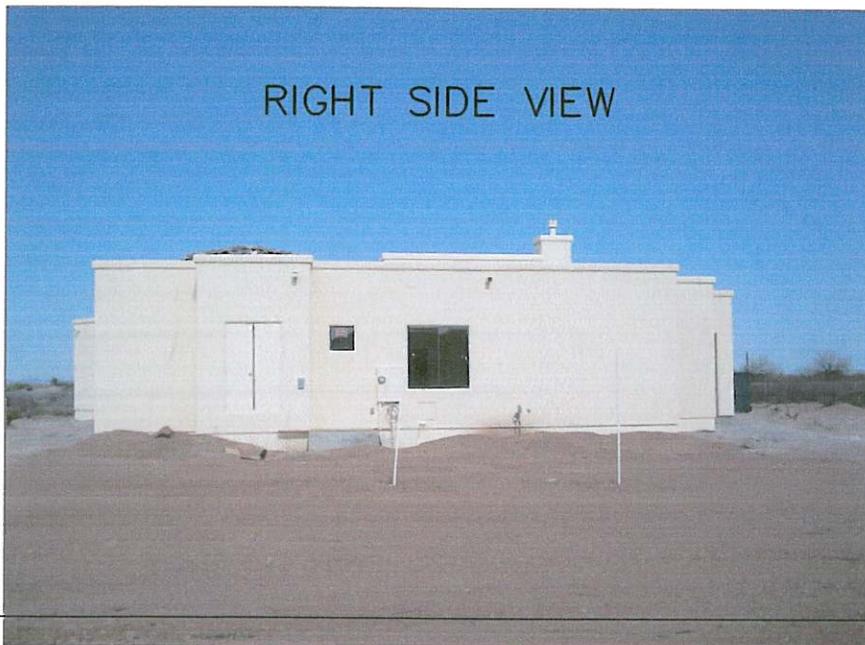
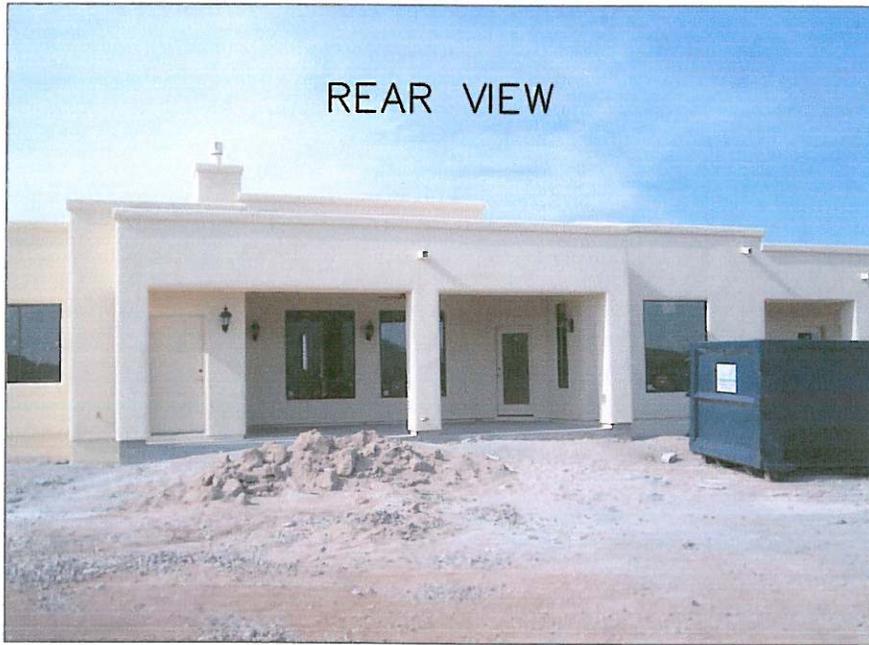
FPUP#

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6170 W. Nebraska St.			For Insurance Company Use: Policy Number
City Tucson	State AZ	ZIP Code 85730	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."



FPUP # 06-006E

P06 CP 00080

Client's Initials *JMS 2/16/06*

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077

Expires December 31, 2005

8-29-06

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

Policy Number

Company NAIC Number

BUILDING OWNER'S NAME

Donald Lopaze

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

6170 W Nebraska St

CITY

Tucson

STATE

AZ

ZIP CODE

85 730

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Tax Code: 210-04-0250

T 15S R 12E Sec 02

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)

Residential: Single-family Residence

LATITUDE/LONGITUDE (OPTIONAL)

(###-##-### or ###.####)

N/A

HORIZONTAL DATUM:

NAD 1927 NAD 1983

SOURCE: GPS (Type):

USGS Quad Map

Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER

Pima County 040073

B2. COUNTY NAME

Pima County

B3. STATE

AZ

B4. MAP AND PANEL NUMBER

04019C 2225

B5. SUFFIX

K

B6. FIRM INDEX DATE

2/8/99

B7. FIRM PANEL EFFECTIVE/REVISED DATE

2/8/99

B8. FLOOD ZONE(S)

AO1

B9. BASE FLOOD ELEVATION(S)

(Zone AO, use depth of flooding)

1.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

FIS Profile

FIRM

Community Determined

Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929

NAVD 1988

Other (Describe): Highest Adjacent Grade

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date: N/A

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 1 (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, ARIA, ARIAE, ARIA1-A30, ARIA/H, ARIA/O

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 LOCAL Conversion/Comments

Elevation reference mark used FVE Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure)

100.0 ft.(m)

b) Top of next higher floor

NA ft.(m)

c) Bottom of lowest horizontal structural member (V zones only)

N/A ft.(m)

d) Attached garage (top of slab)

100.0 ft.(m)

e) Lowest elevation of machinery and/or equipment

servicing the building (Describe in a Comments area)

NA ft.(m)

f) Lowest adjacent (finished) grade (LAG)

96.9 ft.(m)

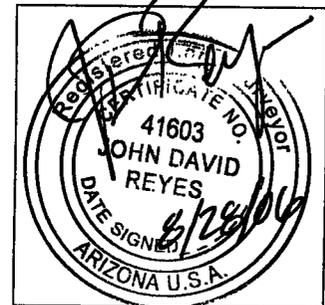
g) Highest adjacent (finished) grade (HAG)

97.8 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA

i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed, Seal, Signature, and Date



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

JOHN DAVID REYES

LICENSE NUMBER

AZ # 41603

TITLE

FIELD SUPERVISOR

COMPANY NAME

POLARIS LAND SURVEYING, LLC

ADDRESS

3528 N. FLOWING WELLS

CITY

TUCSON

STATE

AZ

ZIP CODE

85705

SIGNATURE

JDR

DATE

2/28/06

TELEPHONE

(520) 322-6400

FPUP # 06-006E

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

For Insurance Company User

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

Policy Number

6170 W Nebraska St

CITY
Tucson

STATE
AZ

ZIP CODE
85730

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

The lowest service equipment (C3e) is the _____ and the _____ is/are above this elevation.

**(C3a) TOP OF CONSTRUCTION FORMS HELD AS 100.00; (C3d) TOP OF CONSTRUCTION FORMS;
(C3e) NO MACHINERY AT THIS TIME**

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. 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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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 REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

06-006E

G5. DATE PERMIT ISSUED

02-16-06 D.W.

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

___ ft.(m)

Datum: ___

G9. BFE or (in Zone AO) depth of flooding at the building site is:

___ ft.(m)

Datum: ___

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments

911-36100