

ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name JOHN BENCK		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY		Policy Number
City AMADO	State AZ	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 304-33-051B Township 19S Range 13E Section 34		ZIP Code 85645

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Accessory: Attached Garage**

A5. Latitude/Longitude: Lat. **31.7382E** Long. **-111.0047N** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 4 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **NA**

A8. For a building with a crawl space or enclosure(s), provide:

a) Square footage of crawl space or enclosure(s)	NA sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	NA
c) Total net area of flood openings in A8.b	NA sq in

A9. For a building with an attached garage, provide:

a) Square footage of attached garage	925 sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	NA
c) Total net area of flood openings in A9.b	NA 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 3410	B5. Suffix K	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 0.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) **As measured from high point of garage m.p. 4 of site plan**

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

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

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. 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 **Pima Co. NN 074** Vertical Datum **NAVD 88**

Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	3177.5 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	NA <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)	NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	3174.4 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	3175.2 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

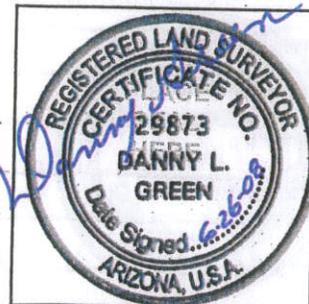
When B.9 is a depth, indicate highest and lowest NATURAL grade in Section D Comments

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.

Certifier's Name Danny Green	License Number PLS 29873
Title Survey Manager	Company Name ATEC
Address 3295 W. Ina	City Tucson
State AZ	ZIP Code 85741
Signature Danny Green	Date 6-26-08
Telephone 520-219-7508	



Expires 3/31/11

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. 1983 QUAIL WAY			Policy Number	
City AMADO	State AZ	ZIP Code 85645	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 _____ and the _____ is/are above this elevation.
Highest adjacent Natural Grade is 3175.2 Lowest adjacent Natural Grade is 3174.4

Water heater on Garage Floor EL: 3177.5

Signature Danny Green Date 6-26-08 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 8 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 _____

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# 07-599ER	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 _____

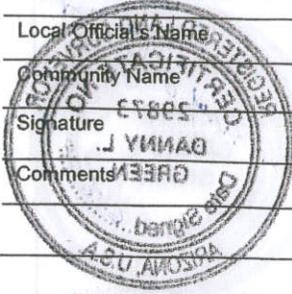
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet _____ meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____



Check here if attachments

FPUP# 07-599ER

Building Photographs (Four Color Photographs Required)

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY			For Insurance Company Use:
City AMADO State AZ ZIP Code 85645			Policy Number
			Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least Four 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# 07-599ER

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY			For Insurance Company Use: Policy Number
City AMADO	State AZ	ZIP Code 85645	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."



ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

JB 118

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name JOHN BENCK		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY		Policy Number
City AMADO	State AZ	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 304-33-051B Township 19S Range 13E Section 34		ZIP Code 85645

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential: Single Family Residence - LEVEL 1**

A5. Latitude/Longitude: Lat. **31.7380E** Long. **-111.0047N** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 4 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **NA**

A8. For a building with a crawl space or enclosure(s), provide:

a) Square footage of crawl space or enclosure(s)	NA sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	NA
c) Total net area of flood openings in A8.b	NA sq in

A9. For a building with an attached garage, provide:

a) Square footage of attached garage	925 sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	NA
c) Total net area of flood openings in A9.b	NA 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 3410	B5. Suffix K	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 0.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) *as measured from high point for level 1 m.p. 4 of side plan*

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 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 **N/A** CBRS OPA Yes No

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. 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 **Pima Co. NA 074** Vertical Datum **NAVD 88**

Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	3178 5	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	NA	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	NA	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	NA	<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)	NA	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	3175 8	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	3177 0	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

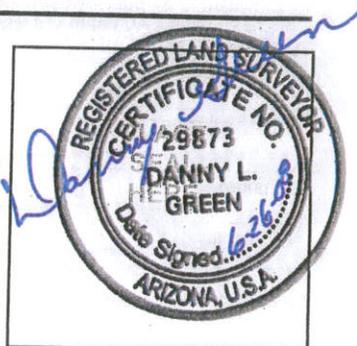
When B.9 is a depth, indicate highest and lowest NATURAL grade in Section D Comments

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.

Certifier's Name Danny Green	License Number ELS 29873
Title Survey Manager	Company Name AMEC
Address 3295 W. 17A	City TUCSON
State AZ	ZIP Code 85741
Signature <i>Danny Green</i>	Date 6-26-08
Telephone 520 219 7508	



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. 1983 QUAIL WAY			Policy Number	
City AMADO	State AZ	ZIP Code 85645	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 _____ and the _____ is/are above this elevation.
 Highest adjacent Natural Grade is 3177.0 Lowest adjacent Natural Grade is 3175.8

Signature: Danny Green Date: 6-26-08 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, and enclosure) is _____ feet _____ meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, and enclosure) is _____ feet _____ meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings per Section A Items 3 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: _____

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# 07-599ER	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# 07-599ER

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY			For Insurance Company Use: Policy Number
City AMADO	State AZ	ZIP Code 85645	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# 07-599ER

Building Photographs (Four Color Photographs Required)

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY			For Insurance Company Use: Policy Number
City AMADO	State AZ	ZIP Code 85645	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least Four 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.



ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name JOHN BENCK		For Insurance Company Use:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY		Policy Number	
City AMADO State AZ ZIP Code 85645		Company NAIC Number	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 304-33-051B Township 19S Range 13E Section 34			

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential: Single Family Residence - LEVEL 2**

A5. Latitude/Longitude: Lat. **31.7380E** Long. **-111.0048N** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 4 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **NA**

A8. For a building with a crawl space or enclosure(s), provide:

a) Square footage of crawl space or enclosure(s) NA 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 NA	a) Square footage of attached garage 925 sq ft
c) Total net area of flood openings in A8.b NA sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade NA
	c) Total net area of flood openings in A9.b NA 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 3410	B5. Suffix K	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 0.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) **As measured from high point for lead 2 m p. 4**

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 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 **N/A** CBRS OPA Yes No

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. 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 **Pima Co NN 074** Vertical Datum **NAVD 88**

Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 3179.5 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor NA <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) NA <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) NA <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) NA <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) 3177.5 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) 3178.0 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

When B.9 is a depth, indicate highest and lowest NATURAL grade in Section D Comments

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.

Certifier's Name Danny Green		License Number PLS 29873	
Title Survey Manager	Company Name PMTEC		
Address 3295 W. 17th	City Tucson	State AZ	ZIP Code 85711
Signature Danny Green	Date 6-26-08	Telephone 520 219 7508	



3/31/11

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. 1983 QUAIL WAY			Policy Number	
City AMADO	State AZ	ZIP Code 85645	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 _____ and the _____ is/are above this elevation.
Highest adjacent Natural Grade is 3170.0 Lowest adjacent Natural Grade is 3176.5

No Facilities or Equip

Signature Danny Green Date 6-26-08 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, and enclosure) is _____ feet _____ meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, and enclosure) is _____ feet _____ meters above or below the LAG.
 E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 3 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# 07-599ER	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# 07-599ER

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

1983 QUAIL WAY

City AMADO

State AZ

ZIP Code 85645

For Insurance Company Use:

Policy Number

Company NAIC Number

If submitted
photograph

Identify all
view."



ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name JOHN BENCK	For Insurance Company Use: Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY	Company NAIC Number
City AMADO State AZ ZIP Code 85645	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 304-33-051B Township 19S Range 13E Section 34	

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential: Single Family Residence - LEVEL 3**

A5. Latitude/Longitude: Lat. **31.7380E** Long. **-111.0048N** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 4 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **NA**

A8. For a building with a crawl space or enclosure(s), provide:

a) Square footage of crawl space or enclosure(s) NA 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 NA	a) Square footage of attached garage 925 sq ft
c) Total net area of flood openings in A8.b NA sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade NA
	c) Total net area of flood openings in A9.b NA sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

R1 NFIP Community Name & Community Number Pima County / 040073		B2. County Name Pima County		B3. State AZ	
B4. Map/Panel Number 04019C 3410	B5. Suffix K	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 0.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) **As measured from high points for level 3 on p. 4 of site plan**

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) **Highest Adjacent Natural 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** CBRS OPA

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. 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 **Pima Co. NN074** Vertical Datum **NAVD 88**
 Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 3180.5 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	3180.5
b) Top of the next higher floor NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	
c) Bottom of the lowest horizontal structural member (V Zones only) NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	
d) Attached garage (top of slab) NA <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) NA <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	
f) Lowest adjacent (finished) grade (LAG) 3178.2 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG) 3179.0 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)	

When B.9 is a depth, indicate highest and lowest NATURAL grade in Section D Comments

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.

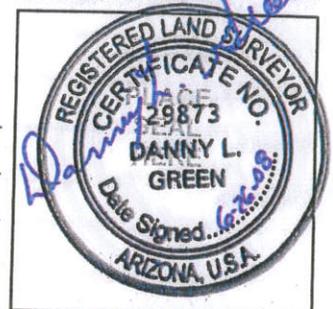
Check here if comments are provided on back of form.

Certifier's Name **Danny Green** License Number **RS 29873**

Title **Survey Manager** Company Name **AMEC**

Address **3295 W. 17th** City **TUCSON** State **AZ** ZIP Code **85741**

Signature **Danny Green** Date **6-26-08** Telephone **520-219-7508**



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. 1983 QUAIL WAY			Policy Number	
City AMADO	State AZ	ZIP Code 85645	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 _____ and the _____ is/are above this elevation.
Highest adjacent Natural Grade is 3179.0 Lowest adjacent Natural Grade is 3178.2

Heat pump on roof

Signature: Danny Green Date: 6-28-08 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 6 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# 07-599ER	G5. Date Permit Issued <u>6/28/08</u>	G6. Date Certificate Of Compliance/Occupancy Issued <u>6/28/08</u>
--	--	---

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: Danny Green Date: _____

Comments: _____

Check here if attachments

FPUP# 07-599ER

Building Photographs (Four Color Photographs Required)

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1983 QUAIL WAY			For Insurance Company Use: Policy Number
City AMADO	State AZ	ZIP Code 85645	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least Four 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.



