

# ELEVATION CERTIFICATE

HR  
1/6/11

OMB No. 1660-0008  
 Expires March 31, 2012

Important: Read the instructions on pages 1-9.

11 JAN 5 AM 11:19

| SECTION A - PROPERTY INFORMATION   |  | For Insurance Company Use:  |
|--|--|---|
| A1. Building Owner's Name<br><b>D.R. Horton, Inc.</b>  | Policy Number  |   |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br><b>17802 S. Golden Valley Dr.</b>                                   | Company NAIC Number  |   |
| City <b>Sahuarita</b> State <b>AZ</b> ZIP Code <b>85629</b>  |  |   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br><b>Tax Code 303-54-0280 Township 17S Range 14E Section 28</b>                |  |   |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential: Single Family Residence</b> <span style="float: right;"><b>LOT 4</b></span> |  |   |
| A5. Latitude/Longitude: Lat. <b>31.926315</b> Long. <b>-110.925097</b> 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 <b>1B</b>  |  |   |
| A8. For a building with a crawlspace or enclosure(s):  |  |   |
| a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft   | A9. For a building with an attached garage:                  |   |
| b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>N/A</b>   | a) Square footage of attached garage <b>± 680</b> sq ft      | b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>N/A</b> |
| c) Total net area of flood openings in A8.b <b>N/A</b> sq in   | c) Total net area of flood openings in A9.b <b>N/A</b> sq in | d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No         |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  |   |

| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  |                        |                                       |  |                               |   |
|--|------------------------|---------------------------------------|--|-------------------------------|---|
| B1. NFIP Community Name & Community Number<br><b>Pima County / 040073</b>  |                        | B2. County Name<br><b>Pima County</b> |  | B3. State<br><b>AZ</b>        |   |
| B4. Map/Panel Number<br><b>04019C 3420</b>   | B5. Suffix<br><b>K</b> | B6. FIRM Index Date<br><b>2/8/99</b>  | B7. FIRM Panel Effective/Revised Date<br><b>02/08/1999</b> | B8. Flood Zone(s)<br><b>X</b> | B9. Base Flood Elevation(s) (Zone AO, use base flood depth)<br><b>1.0</b> |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.<br><input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" 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) <b>Highest Adjacent Natural Grade</b>  |                        |                                       |  |                               |   |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Designation Date <b>N/A</b> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA        |                        |                                       |  |                               |   |

| 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<br>*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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.<br>Benchmark Utilized <b>NGS STATION "RITA 1935"</b> Vertical Datum <b>NAVD 88 = 2871.61</b><br>Conversion/Comments _____ |  |
| Check the measurement used.   |  |
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>2818 46</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)  |  |
| b) Top of the next higher floor <b>2828 32</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)  |  |
| c) Bottom of the lowest horizontal structural member (V Zones only) <b>N/A</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)  |  |
| d) Attached garage (top of slab) <b>2818 43</b> <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 and location in Comments) <b>2818 31</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)   |  |
| f) Lowest adjacent (finished) grade next to building (LAG) <b>2817 67</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)   |  |
| g) Highest adjacent (finished) grade next to building (HAG) <b>2817 80</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)  |  |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <b>N/A</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)<br><small>When B.9 is a depth above grade, it is required to indicate highest and lowest NATURAL grade in Section D Comments</small>                              |  |

| 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 type="checkbox"/> Check here if comments are provided on back of form.   |  | Were latitude and longitude in Section A provided by a licensed land surveyor? <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |
| Certifier's Name<br><b>MICHAEL AMERSON</b>  | License Number<br><b>PLS 22245</b>             |   |                          |
| Title<br><b>PRESIDENT</b>   | Company Name<br><b>AMERSON SURVEYING, INC.</b> |   |                          |
| Address<br><b>4552 E. CAMP LANE DR. TULSON</b>  | City<br><b>TULSON</b>                          | State<br><b>AZ</b>  | ZIP Code<br><b>85712</b> |
| Signature<br><i>Michael A</i>   | Date<br><b>1-5-11</b>                          | Telephone<br><b>520-325-5883</b>  |                          |



|  |                    |                                   |                     |
|--|--------------------|-----------------------------------|---------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>  |                    | <b>For Insurance Company Use:</b> |                     |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br><b>17802 S. Golden Valley Dr.</b> |                    | Policy Number                     |                     |
| City<br><b>Sahuarita</b>   | State<br><b>AZ</b> | ZIP Code<br><b>85629</b>          | 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 (C2.e) is the AC and the WH + ELECTRIC PANEL is/are above this elevation.  
 Highest adjacent natural grade is 2816.28 Lowest adjacent natural grade is 2814.67

Signature Mikhail A Date 1-5-11  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, crawlspace, enclosure) is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, enclosure) is \_\_\_\_\_ feet \_\_\_\_\_ meters  above or  below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 6 and 9 (see pages 8-9 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<br><b>FPUP# 10-433E</b> | G5. Date Permit Issued | 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 \_\_\_\_\_ feet \_\_\_\_\_ meters (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site \_\_\_\_\_ feet \_\_\_\_\_ meters (PR) Datum \_\_\_\_\_
- G10. Community's design flood elevation \_\_\_\_\_ feet \_\_\_\_\_ meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

FPUP# 10-433E

### 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.

17802 S. Golden Valley Dr.

City  
Sahuarita

State  
AZ

ZIP Code  
85629

|                               |
|-------------------------------|
| For the Insurance Company Use |
| 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 on the reverse.



FPUP# 10-433E

# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
17802 S. Golden Valley Dr.

City Sahuarita

State AZ

ZIP Code 85629

For Insurance Company Use  
Policy Number  
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."

