

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

16 AUG 26 AM 11:07

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name Patricia E. Leal-Waldher	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12075 N. Anway Rd.	Company NAIC Number:	
City Tucson	State AZ	ZIP Code 85653
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 208-19-2290 Township 11S Range 10E Section 33 Rancho Del Sol Lindo Lot 2		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential: Manufactured Home Replacement		
A5. Latitude/Longitude: Lat. 32.423800 Long. -111.322239 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 5		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) NA sq ft	a) Square footage of attached garage NA sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA	
c) Total net area of flood openings in A8.b NA sq in	c) Total net area of flood openings in A9.b NA sq in	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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 1015	B5. Suffix L	B6. FIRM Index Date 9-28-12	B7. FIRM Panel Effective/ Revised Date 06-16-11	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 100.5
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 type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
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/Source: Highest Adj. Nat. Grade (=100 ft)					
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 Designation Date: N/A / N/A / _____ <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 *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. In Puerto Rico only, enter meters. Benchmark Utilized: LOCAL Vertical Datum: 100.0' = N.A.N.G.	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 103.2	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 103.2	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) 99.5	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) 100.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 99.8	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
<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 checked="" 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 checked="" type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name EDGAR B. REYNOLDS JR.		License Number AZ RLS 31031	
Title LAND SURVEYOR		Company Name EDGAR REYNOLDS AND ASSOCIATES	
Address 1926 W. CALLE MELCORA		City TUCSON	State AZ
Signature <i>[Signature]</i>		ZIP Code 85745	Telephone 520-884-0292
Date 8/25/2016			



ELEVATION CERTIFICATE, page 2

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. 12075 N. Anway Rd.			Policy Number:	
City Tucson	State AZ	ZIP Code 85653	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 FURNACE and the WATER HEATER is/are above this elevation.**

Highest adjacent natural grade is **100.0** Lowest adjacent natural grade is **79.5**

NEW SET UP OF USED MANUFACTURED HOME ON PILES, NO SKINTAIL, THERE IS

1.5' BETWEEN HIGHEST ADJACENT GRADE AND LOWEST STRUCTURAL MEMBER

Signature **[Signature]** Date **8/25/2016**

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, or enclosure) is **N/A** feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is **N/A** feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is **N/A** feet meters above or below the HAG.
- E3. Attached garage (top of slab) is **N/A** feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is **N/A** 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 or Owner's Authorized Representative's Name **N/A**

Address **N/A** City **N/A** State **N/A** ZIP Code **N/A**

Signature **N/A** Date **N/A** Telephone **N/A**

Comments **N/A**

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–G10. In Puerto Rico only, enter meters.

- 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 15-335E	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum N/A
G9. BFE (or in Zone AO) depth of flooding at the building site:	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum N/A
G10. Community's design flood elevation:	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum N/A

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments.

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. 12075 N. Anway Rd.			Policy Number:
City Tucson	State AZ	ZIP Code 85653	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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

