

FPUP # P20FC00045  
 DSD # P20BP00590

# ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Clayton/Moon Family Living Trust				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3550 S Donald Ave				Company NAIC Number:	
City Tucson		State Arizona		ZIP Code 85735	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Taxcode: 212300550    Township 14    Range 12    Section 27 <b>MILLSTONE MANOR NO 3 LOT 117</b>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)    Residential: Addition					
A5. Latitude/Longitude: Lat. 32.17935°    Long. -111.09977°    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. <small>Pima County Regional Flood Control District requires four (4) photographs.</small>					
A7. Building Diagram Number <u>1B</u>					
A8. For a building with a crawlspace or enclosure(s): <u>5-6-20 ET</u>					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
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 Pima County / 040073			B2. County Name Pima County		B3. State Arizona
B4. Map/Panel Number 04019C2265	B5. Suffix L	B6. FIRM Index Date 09/28/2012	B7. FIRM Panel Effective/ Revised Date 06-16-2011	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: <u>Highest Adjacent Natural Grade (=100.0 ft)</u>					
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: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<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. 3550 S Donald Ave			Policy Number:
City Tucson	State Arizona	ZIP Code 85735	Company NAIC Number

**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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: N/A Vertical Datum: N/A

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: H.A.N.G. = 100.00

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) 101.5  feet  meters
- b) Top of the next higher floor N/A  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters
- d) Attached garage (top of slab) N/A  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 101.5  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 99.9  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 100.00  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A  feet  meters

**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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name <u>EVERETT TRUEBLOOD</u>		License Number <u>RLS 25405</u>		
Title <u>OWNER</u>				
Company Name <u>EVERETT TRUEBLOOD LAND SURVEYING</u>				
Address <u>6884 W. Hermitage PL</u>				
City <u>TUCSON</u>	State <u>AZ</u>	ZIP Code <u>85743</u>		
Signature <u>[Signature]</u>	Date <u>5-6-20</u>	Telephone <u>(520) 888-2549</u>	Ext.	

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

Comments (including type of equipment and location, per C2(e), if applicable)  
The lowest service equipment (C3.e) is the AC UNIT and the WATER HEATER/FURNACE are above this elevation.  
Highest adjacent natural grade is 100.00 Lowest adjacent natural grade is 99.9  
THE FFE OF THE EXISTING HOUSE IS 100.90. THE PICTURES ATTACHED SHOW THE AC UNIT AT THE WRONG ELEVATION. THE AC UNIT WAS THEN RAISED TO THE ELEVATION OF 101.50 UPDATED PHOTO ATTACHED.

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
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<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
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City Tucson	State Arizona	ZIP Code 85735	Company NAIC Number

**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 \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 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 or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

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

Comments

Check here if attachments.





EAST SIDE  
AC UNIT BEFORE RAISED  
4/28/2020



SOUTH SIDE  
AC UNIT BEFORE RAISED  
4-28-2020



WEST SIDE  
5-6-2020

AC RAISED  
AFTER 5-6-20

