## FPUP\_OO-1221FA

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

Type 2 CHHAG

## **ELEVATION CERTIFICATE**

Type 2 Cilling		Immodente 1	5		- A POFC M	9Y16'00рм 2 <b>:18</b>					
			Read the instruction								
THE PARTY OF THE P	4E	SECTION A -	PROPERTY OWN	ER INFORMA	ATION .	For Insurance Company Use:					
BUILDING OWNER'S NAM		la Carlo	X	1/2/2	3/8/00	Policy Number					
BUILDING STREET, ADDR	ESS (Including A	va Cordova	- 2 Mill	JAI MUC	,						
		andin Ivon P		. ROUTE AND	BUX NO.	Company NAIC Number					
CITY			STATE .		ZIP CODE 74	5 · ·					
PROPERTY DESCRIPTIO	N (Lot and Block	Numbers, Tax Parce		cription, etc.)	<u> </u>						
	Branding Ir					T/5 R/2 S/0					
BUILDING USE (e.g., Resi	dential, Non-resid Resident	dential, Addition, Acc	essory, etc. Use Cor	nments section	n if necessary.)						
LATITUDE/LONGITUDE (C		- HORIZONT	AL DATUM:	SOUR	CE: GPS (Type	<del></del>					
(-## <u>* +#</u> ; -##.## <u>"-oc-##</u>	#####\$) <u> </u>	<u> </u>		-		ad-Map = E-Other=					
<del></del>	650	TON D. EL COD.	WOUDANGE DATE								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION .											
B1. NFIP COMMUNITY NA	ITY NUMBER	B2. COUNTY NAME			B3. STATE ·						
Pima County 040073			Pima County			Arizona					
B4. MAP AND PANEL	B5, SUFFIX	B6. FIRM INDEX	B7. FIRM I	PANEL	B8. FLOOD	B9. BASE FLOOD ELEVATION(S					
NUMBER	1	DATE	EFFECTIVE/RE\		ZONE(S)	(Zone AO, use depth of flooding)					
04019C 2225	K	Feb.8, 1999		, 1999	A01 A02	2.0					
	of the Base Flor			<del> </del>							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  ☐ FIS Profile											
B11. Indicate the elevation				J MAND 400		-aibal					
D11. Indicate the elevation	dia a Casatal	Deuries December	STAGAD 1959 F	7 MYAD 189	o Other (De						
B12. Is the building locate	o in a Coastai	Barrier Resources	System (CBRS) ar	ea or Otherw	vise Protected Ar	ea (OPA)? 🔲 Yes 🔀 No					
Designation Date						•					
	SECTIO	N C - BUILDING	LEVATION INFO	RMATION (S	URVEY REQUIR	ED)					
C1. Building elevations ar						Finished Construction					
						Finished Construction					
*A new Elevation Cer											
						icate is being completed - see					
pages 6 and 7. Y no						/					
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 C3a-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 1	o document the datum conversion.					
Datum Conve	ersion/Commen	is .			ا المراجعة المراجعة المراجعة						
Elevation reference m			n reference mark u	sed annear o	n the EIDMO F	Vos ET No					
a) Top of bottom fl						I LES [] NO					
		asement or enclos	suie)	ft.(m)	Seal						
(a) Top of next high				ft.(m)							
*** c) Bottom of lowes		ıctural member <del>(V</del>	- <del>zoce enly)-</del>	. ft.(m)	osse Date						
O d) Attached garage			\ <del></del>	ft.(m)	Embossed and Date						
. D e) Lowest elevatio	n of machinery	and/or equipment			ក្ស	•					
servicing the bu	ilding			ft.(m)	License Number, Signature,						
' D f) Lowest adjacent		•		ft.(m)	P Se la						
g) Highest adjacer		_	/ —	ft.(rq)	<u>8</u> 22	•					
☐ h) No. of permane		od vents) within 1	ft above adjacent		<del>5</del> -  -	en e					
☐ i) Total area of all j			•	• •	_ =						
U i) Total alea of all	permanent oper	mings (mood vents)	in Consq. m.	(sq. cm)							
	SECTIO	SURVEYO	R, ENGINEER, OR	ARCHITEC	T CERTIFICATION	ON					
This certification is to be	signed and sea	led by a land surv	evor, engineer, or	architect auth	orized 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 1801.											
CERTIFIER'S NAME	Judicionieni III	a, no parnonable	of this or imprison		NSE NUMBER	aut rout.					
TITLE			COMPAN	YNAME		·					
ADDRESS			CITY	·	STATE	ZIP CODE					
SIGNATURE			DATE		TELEPHO	NE					
/		· · · · · · · · · · · · · · · · · · ·									
EEMA Form 81-31 AUG	10	SEE REVE	RSE SIDE EOD C	CHILIMITIA	ON PEDI	ACES ALL DREVIOUS EDITIONS					

Return-original to Pima County Floodplain Management, 201 N. Stone, 4th Floor, Tucson, AZ 85701-120

FPUP DRE-B					
IMPORTANT: In these space	es, copy the corresponding infor	nation from S	ection A	2	
<u> </u>	ncluding Apt., Unit, Suite, and/or Bldg.	lo.) OR P.O. ROI	UTE AND BOX NO.		ince Company Use:
CITY (ve)	O STATE	7	ZIP CODE	Company	NAIC Number
SECT	ON D - SURVEYOR, ENGINEER,	OR ARCHITEC	85796	1000 met 142	新年35年的1957年,以
Copy both sides of this Elevation	on Certificate for (1) community office	cial. (2) insuran	ce agent/company	ord (O) by it is	
COMMENTS		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	ec agenizonipany,	and (3) building o	owner.
		<del></del>			
SECTION E - BUILDING FI	EVATION INFORMATION (OLD)		· · · · · · · · · · · ·	☐ Checi	here if attachment
For Zone AO and Zone A (without	EVATION INFORMATION (SURV	EY NOT REQU	JIRED) FOR ZONE	AO AND ZONE	A (WITHOUT BFE)
information for a LOMA or I OME	RE Section C must be served in	'	vation Certificate is i	intended for use a	as supporting
E1. Building Diagram Number 1 ⋅	(Select the building diagram	imilar to the bu	ilding for which this	certificate in heim	
pages 6 and 7. If no diagram E2. The top of the bottom floor (iii	n accurately represents the building	, provide a ske	tch or photograph.)	ocitinoate is being	y completed – see
the highest adjacent grade	lolding basement of enclosure) of	the building is	<b>女ft.(m)in.(cm</b>	) above or	below (check one)
<del>E3. For Building Diagrams 6-8 will </del> in the second of the second o	th openings (see page 7) the payt	higher floor or a	elevated floor (olova	ofice his case of the	
ft.(m)in.(em) above the	highest adjacent grade.		Sicration nooi (olega	<del>itioti b) ot the buil</del>	<del>ding is -</del>
floodplain management ordin	I depth number is available, is the tance? ☐ Yes ☐ No ☐ Unkno	op of the bottor	n floor elevated in a	ccordance with th	e community's
SECTIO	N F - PROPERTY OWNER (OR O	WHERE DED	official must certify the	his information in	Section G.
The property owner or owner's a	uthorized representative who some	letes Sections	RESENTATIVE) CE	RTIFICATION	
community-issued BFE) or Zone	AO must sign here.	ictes dections	A, B, and E for Zone	e A (without a FE	MA-issued or
PROPERTY OWNER'S OR OWNER	'S AUTHORIZED REPRESENTATIVE'S	· · · · · · · · · · · · · · · · · · ·			
ADDRESS ADDRESS	DIGOVAL	SNAME			s <sup>*</sup>
	randme iron	CITY	STA	TE AD ZIP CO	DE
SIGNATURE	Portone	DATE	SON TEL	EPHONE CAN	85746
COMMENTS	ARCHEN ST	<u> </u>	00	883	2481
					•
		)		☐ Check h	nere if attachments
Cha lacet effected to the state of	SECTION G - COMMUNIT	/ INFORMATIO	ON (OPTIONAL)		
Sections A. B. C (or F), and G of the	DV ISW Of Ordinanco to administrative	11		ment ordinance c	an complete
31. The information in Section (	Was taken from other documents	ine abblicable li	tem(s) and sign belo	ow.	
engineer, or architect who i	s authorized by state or local law to ents area below.)	certify elevation	en signed and embo	ossed by a license	ed surveyor,
elevation data in the Comm	ents area below.)		mionizaon. (mer	cate the source a	nd date of the
G2. A community official comple Zone AO.	ted Section E for a building located	in Zone A (with	hout a FEMA-issued	for community-is	sued BFE) or
33.  The following information (Items	ems G4-G9) is provided for commu	nity floodolain r	Managamant		·
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED				
00-222	<u> </u>	1 1000	DATE CERTIFICATE JED	OF COMPLIANCE	OCCUPANCY
77. This permit has been issued for 88. Elevation of as-built lowest floor	: ☐ New Construction ☐ Subst	antial Improven	nent	•	<u>-</u>
9. BFE or (in Zone AO) depth of fic	(including basement) of the building	g is:	ft.(m)	. Datum	<b>:</b>
LOCAL OFFICIAL'S NAME	The state state is a s	<u>'</u>	ft.(m)	Datum	:
COMMUNITY NAME		TITLE			
BIGNATURE		TELEPHO	NE		
COMPANIE		DATE			
Type 2 Conven	tional House - Highest A	djacent G	rade		
	•				
				☐ Check he	re if attachments
MA Form 81-31, AUG 99			0.50	21.4052.411.555	1/10110 ================================