DERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

			.7.	
	SECTION A	- PROPERTY OWNER INFORMA	ATION	For Insurance Company Use:
BUILDING OWNER'S NAME				Policy Number
BUILDING STREET ADDRESS (Including	Ant Linit Suite and/or	BID NO LOR P.O. POLITE AND E	ROX NO	Company NAIC Number
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CITY FURSION TILLSON		STATE AZ	ZIP CO	5 704
PROPERTY DESCRIPTION (Lot and Blod	k Numbers, Tax Parcel	Number, Legal Description, etc.)	T125 K	12E Sec 14
BUILDING USE (e.g., Residential, Non-residential, Non-residential)	idential, Addition, Acces	sory, etc. Use a Comments area, if		
LATTTUDE/LONGITUDE (OPTIONAL) (## - ## - ## ##" or ## #####")		INTAL DATUM: 7 - NAD 1983	SOURCE: - OPS (TY	
•	SECTION B - FLOOD	INSURANCE RATE MAP (FIRM)	INFORMATION	
			· · · · · · · · · · · · · · · · · · ·	B3. STATE
B1. NFIP COMMUNITY NAME & COMMUNITY NUM Pima County 040073		B2. COUNTY NAME Pirna County		B3. STATE Arizona
B4, MAP AND PANEL B5, SUFFIX	-	B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER 04019C /0/5 K	B6. FIRM INDEX DATE 2/8/99		B8.FLOOD ZONE(S) 40	(Zone AO, use depth of flooding) Depth
B10. Indicate the source of the Base Flood Eleva				
☐ FIS Profile ☐ FIRM	Community Dete		cribe): B	
B11. Indicate the elevation datum used for the Bi	FE IN 89: [_] NGVD 1929			Designation Date
B12. Is the building located in a Coastal Barrier F	CTION C PUBLISHED	ELEVATION INFORMATION (SU	DIVEN DEVILIBEUT	Designation Date
C1. Building elevations are based on: Constr	ruction Drawings"		Finished Construction	
*A new Elevation Certificate will be required	when construction of the t	ouncing is complete. In the building for which this coefficies is	o boing completed see no	nace 6 and 7. If no discrem
C2. Building Diagram Number _ (Select the build		to the building for which this certificate i	s being completed - see pa	ages o and 7. In no diagram
accurately represents the building, provide a	skeich or photograph.)		ADIAU ADIAO	
C3. Elevations - Zones A1-A30, AE, AH, A (with	1 BFE), VE, V 1-V3U, V (Will	II DEE), AR, ARVA, ARVAE, ARVA 1700	, AIVAI 1, AIVAO	
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	ine building diagram speci in the DEE. Chaufold mod	ified in Item C2. State the datum used.	if the datum is different from	m the datum used for the BFE in
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IMPURIANT: In these space				
IMPORTANT: In these space	es, copy the c sponding information from	Section A		Continue
U	es, copy trie c. sponding information from ding Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND C.	D BOX NO.		For Insurance Company Use: Policy Number
Tucson	AŽ ^T		ZIP CODE	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR A	RCHITECT CER	TITIO	
Copy both sides of this Elevation C	Pertificate for (1) community official, (2) insurance agen	Moment and the	TIFICATION (CONTINU	ED) ,
COMMENTS	, (-)	routiparly, and (3) t	building owner.	
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SECTION E - BUILD	ING ELEVATION INFORMATION (SURVEY N E), complete Items E1 through E4. If the Elevation Ce	OT DECLUS		Check here if attachme
For Zone AO and Zone A (without BFF	E), complete Items E1 through E4. If the Elevation Ce	OI REQUIRED)	FOR ZONE AO AND ZO	NE A (WITHOUT BFE)
Accepted to things the wallshaled		· MICOLO IS INTERNED IN	Of USP 28 Stinnorling Inform.	Part of the second
E1. Building Diagram Number_(Selec	ct the building diagram most similar to the building for t sketch or photograph.)	which this configure	in hata	,
represents the building, provide as	sketch or photograph.)	ariaci u iis cei ulicate	is being completed – see pa	ges 6 and 7. If no diagram accurat
natural oracle if available)	by basement or enclosure) of the building is 2 ft.(m)	in.(cm) 🔽 abov	e or Dhelaw/abadeana	46-111
E3. For Building Diagrams 6-8 with and	Prince (see page 7) #	- , ,	La valor (Latect one)	une nignest adjacent grade, (Use
grade. Complete items C3.h and (enings (see page 7), the next higher floor or elevated fluction from the form.	oor (elevation b) of t	he building isft.(m) in).(cm) above the biobast ===== +
☐ Yes ☐ No ☐ Unknown.	The local official must certify this information in Section	rated in accordance	with the community's floodp	lain management ordinance?
	FOTION E. DRODERRY CHARLES INC.			
The property owner or owner's authori	ized representative who completes Sections A, B, C (in ere. The statements in Sections A, B, C, and E are con	NO KEPKESENT	ATIVE) CERTIFICATION	Y
issued BFE) or Zone AO must sign he	ere. The statements in Sections A, B, C, and E are cores. S AUTHORIZED REPORTED TAXABLE TO SECTION	eans Coun and Coun	only), and E for Zone A (with	out a FEMA-issued or community-
PROPERTY OWNER'S OR OWNER'	'S AUTHORIZED REPRESENTATIVE'S NAME	ied in the best of m	y Knowledge.	
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COMMENTS	SECTION O. CONTINUE			Check here if attachments
COMMENTS	SECTION O. CONTINUE			Check here if attachments
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