Federal Emergency Management Agency

U.S. DEPARTMENT OF HOMELAND SECURITY ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28. 2009

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National Flood Insurance Program	important:	Read the ins	tructions on p	ages 1-8.	
	SECTI	ON A - PROP	ERTY INFORM	ATION	For Insurance Company Use:
A1. Building Owner's Name Luther Prouse & Pamela Vaught-Prouse					Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9740 N. Running Back Way					Company NAIC Number
	P Code 85653		b		- L
A3. Property Description (Lot and Block Tax Code: 208-25-1030 Township 12 S		mber, Legal Des section 17	scription, etc.)		
A4. Building Use (e.g., Residential, Non-		cessory, etc.)	Manufactured Ho		<u>م</u> .
A5. Latitude/Longitude: Lat. <u>32.38127</u> L A6. Attach at least 2 photographs of the		in haing upod to	obtain flood inc	Horizontal Datur	m: • 🔲 NAD 1927 🖾 NAD 1983
A7. Building Diagram Number 5	building if the Certificate	s being used to	obtain nood insi	urance.	
A8. For a building with a crawl space or e		22.10. (1		ing with an attached	
 a) Square footage of crawl space or e b) No. of permanent flood openings in 		<u>2043</u> sq ft	, ,	potage of attached g ermanent flood open	arage <u>N/A</u> sq f ings in the attached garage
enclosure(s) walls within 1.0 foot a	above adjacent grade	2	walls wi	thin 1.0 foot above a	adjacent grade <u>N/A</u>
 c) Total net area of flood openings in 	A8.b	<u>2079</u> sq in	c) Total net	area of flood openi	ngs in A9.b <u>N/A</u> sq i
			5 2		
SE	CTION B - FLOOD IN	SURANCE R	ATE MAP (FIF	RM) INFORMATIC	DN
B1. NFIP Community Name & Community Pima County / 040073		32. County Nam Pima County	e		B3. State AZ
B4. Map/Panel Number B5. Suffix	B6. FIRM Index		RM Panel	B8. Flood	B9. Base Flood Elevation(s) (Zo
	Date		Revised Date	Zone(s)	AO, use base flood depth)
04019C 0965 K	2/8/99	2	/8/99	AO1	1.0
B10. Indicate the source of the Base Floor					
FIS Profile FIRM	Community Deterr		Other (Describ		
 B11. Indicate elevation datum used for BF B12. Is the building located in a Coastal B 			NAVD 1988		be) <u>Highest Adjacent Natural Grade</u> ☐Yes ⊠No
Designation Date <u>N/A</u>	amer Resources System	CBRS) area o	OPA	lected Area (OPA)?	∐Yes ⊠No
SECT	ION C - BUILDING E	LEVATION IN	FORMATION	SURVEY REQUI	RED)
C1. Building elevations are based on: *A new Elevation Certificate will be rea	Construction Draw		Building Under	er Construction*	Finished Construction
C2. Elevations - Zones A1-A30, AE, AH, /	A (with BFE), VE, V1-V3			E, AR/A1-A30, AR/	AH, AR/AO. Complete Items C2.a-g
below according to the building diagra Benchmark Utilized Top of bottom flo		Detum local			
Conversion/Comments N/A	UI, Elev100.0 Ventical	Datum <u>Iocai</u>			
				Check the measur	ement used.
a) Top of bottom floor (including bas	sement, crawl space, or	enclosure floor)	100.0 🛛 f	eet 🔲 meters (Pu	erto Rico only)
b) Top of the next higher floor				eet 🔲 meters (Pu	
 c) Bottom of the lowest horizontal s d) Attrached servers (ten of slob) 	tructural member (V Zon			eet meters (Pu	
 d) Attached garage (top of slab) e) Lowest elevation of machinery or 	equipment servicing the			eet 🔲 meters (Public eet 🗌 meters (Public eet)	
(Describe type of equipment in C		Junutry			
f) Lowest adjacent (finished) grade				eet 🔲 meters (Pu	
g) Highest adjacent (finished) grade	(HAG)		<u>96.4</u> 🛛 f	eet 🗌 meters (Pu	erto Rico only)
SEC	TION D - SURVEYOR	, ENGINEER.	OR ARCHITE	CT CERTIFICAT	ION A
This certification is to be signed and sealed	ed by a land surveyor, er	ngineer, or archit	ect authorized b	y law to certify elevation	
information. I certify that the information I understand that any false statement ma					A Level Sun
Check here if comments are provided	I on back of form.				2 2 2 41603
Certifier's Name John David Reyes			License Number	AZ RLS 41603	NI JOHN DAVID
Title Field Supervisor	Company Nam	e Polaris Land	Surveying, Job	No.09093	REYES 2
Address 3528 N. Flowing Wells Rd.	City Tucson		State AZ ZIP	Code 85705	ARIANTIS, P.
Signature Am	Date 9/2/09	Telephone	(520) 322-6400	0	RIZONA U.S.I
Nº 1	11				ENTINES Igsific

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See reverse side for continuation.

Replaces all previous editions

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.	Policy Number
9740 N. Running Back Way City Marana State AZ ZIP Code 85653	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	I (CONTINUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) build	•
Comments A9) does not apply, no attached garage; C2b) does not apply, no next higher floor; C2c) not a "V Zon C2d) does not apply, no attached garage; C2e) lowest elevation of machinery servicing building = 96.7'; C2f) Low Highest Adjacent Natural Grade = 96.4'	ne"; bottom of horizontal structure = 98.5'; /est Adjacent Natural Grade = 96.2'; C2g)
Signature Date 9/1/19	M Check have if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE	Check here if attachments
 For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or Li and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, end E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevat grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawl space, or enclosure) is	ter meters. ion is above or below the highest adjacent ers above or below the HAG. ers above or below the LAG. e 8 of Instructions), the next higher floor ow the HAG. above or below the HAG.
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) C	ERTIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without or Zone AO must sign here. <i>The statements in Sections A, B, and E are correct to the best of my knowledge.</i> Property Owner's or Owner's Authorized Representative's Name	it a FEMA-issued or community-issued BFE)
Address City S	tate ZIP Code
Signature Date T	elephone
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 ordin and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used	nance can complete Sections A, B, C (or E),
G1. The information in Section C was taken from other documentation that has been signed and sealed by a is authorized by law to certify elevation information. (Indicate the source and date of the elevation data i	licensed surveyor, engineer, or architect who
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or con	
G3. The following information (Items G4G9.) is provided for community floodplain management purposes.	
G4. Permit Number G5. Date Permit Issued G6. Date Certificate C)f 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:	
01 831 53319X2	Check here if attachments

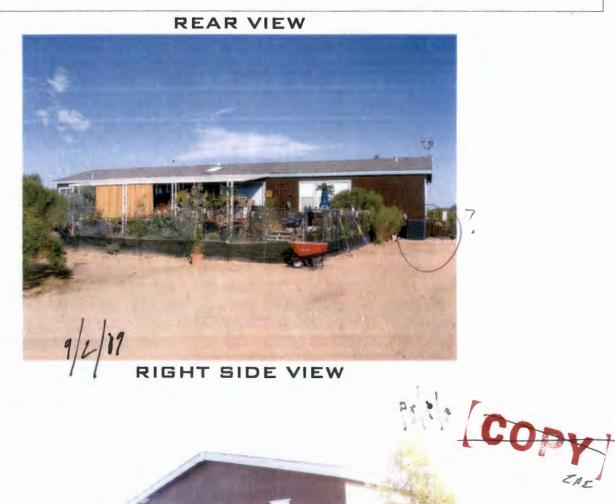
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Building Photographs Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1740 N. Running Back Way	Policy Number
City Marana 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."



Building Photographs

See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9740 N. Running Back Way	Policy Number
City Marana State AZ ZIP Code 85653	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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, following.

FRONT VIEW



CODY

LEFT SIDE VIEW



