FP44:-01-709E-A

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7

<u>a - 3000 - 6</u>	10-91195
O.M.B. No. 30	67-0077
Expires July 3	1, 2002

PCFC FEB 13'02pm 2:58

	the maddedons on pages 1-7					
SECTION A - PI	ROPERTY OWNER INFORMAT	ION	For Insurance Company Use: 32339			
BUILDING OWNER'S NAME Sorenson			Policy Number			
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bid	g. No.) OR P.O. ROUTE AND BO	X NO.	Company NAIC Number			
CITY Tucson	STATE AZ	ZIP CC	95705			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory	•	,				
LATITUDE/LONGITUDE (OPTIONAL) HORIZONT/ (##° - ##' - ##.##" or ##.#####")		URCE: GPS (TY USGS Q				
. SECTION B - FLOOD INS	URANCE RATE MAP (FIRM) IN	FORMATION				
	COUNTY NAME County	The state of the s	B3. STATE Arizona			
B4. MAP AND PANEL B5. SUFFIX NUMBER 04019C 1 6 7 K B6. FIRM INDEX DATE 2/8/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 2/2/99	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 22.45.07			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood FIS Profile FIRM Community Determine B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) are	ned Other (Describ	Other (Describe):	Designation Date			
	VATION INFORMATION (SURV					
<u> </u>	uilding Under Construction*					
		-inspectors/roccon				
*A new Elevation Certificate will be required when construction of the build			and Cand 7. Kan diagram			
C2. Building Diagram Number S (Select the building diagram most similar to the	e building for which this certificate is be	ang completed - see pa	iges band 7. Il no dagram			
accurately represents the building, provide a sketch or photograph.)	T AD ADIA ADIAE ADIA4 ADO A	DALL ADMO				
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BF			and a second of the second of the second			
Complete Items C3a-i below according to the building diagram specified in						
Section B, convert the datum to that used for the BFE. Show field measure		ion. Use the space pro	wided or the Comments area of			
Section D or Section G, as appropriate, to document the datum conversion	1.					
Datum Conversion/Comments						
 ,	used appear on the FIRM? Yes	□ No - · · · · · · · ·	TIAN.			
a) Top of bottom floor (including basement or enclosure)	_ ///A_ ft(m)	Seal	TO WAYOU			
□ b) Top of next higher floor	// A_ft(m)		ALL STRUCTURE OF THE			
 c) Bottom of lowest horizontal structural member (V-zenes only) 	Z2 <u>45 \$1(E</u> (m)	ssed	15 0 31031 OF MIT			
☐ d) Attached garage (top of slab)		Embos and D	EDGAR ERLDFORD C			
e) Lowest elevation of machinery and/or equipment		ឃឹគ	RETRIOLDS # 151			
servicing the building (Describe in a Comments area)	N _ ∆ ft(m)	e Number, Signature,	8,1/24/02/9-			
f) Lowest adjacent (finished) grade (LAG)	ft.(m)	2 <u>8</u>				
g) Highest adjacent (finished) grade (HAG)		· · · •	10000018			
h) No. of permanent openings (flood vents) within 1 ft. above adjacent s		Licen	6/12			
	in. (sq. cm)		till a			
		EDTIFICATION				
	ENGINEER, OR ARCHITECT C					
This certification is to be signed and sealed by a land surveyor, engine I certify that the information in Sections A, B, and C on this certificate is	represents my best efforts to interp	ret the data available	ormauon.			
I understand that any false statement may be punishable by fine or im	prisonment under 18 U.S. Code, S	LICENSE NUMBER	· · · · · · · · · · · · · · · · · · ·			
CERTIFIERS NAME EUGAR B. REYPOLOS		AZ	3/03/			
TITLE	COMPANY NAME					
LAND SINDEY OR		long Surve	Tire			
ADDRESS	CITY	STATE	ZIP CODE			
1926 W. CALLE MECEDORA	TUCKOU	AZ				
SIGNATURE /	DATE		PHONE			
G/B New	1/24/02	- 5-	20-884-0292			

Prur-01-109E			<u> </u>	•
	opy the corresponding information			For Insurance Company Use:
BUILDING STREET ADDRESS (Including A	pt, Unit, Suite, and/or Bldg. No.) OR P.O. ROU	JIE AND BOX NO.		Policy Number
CITY		STATE	ZIP CODE	Company NAIC Number
SEC	CTION D - SURVEYOR, ENGINEER	, OR ARCHITECT CER	TIFICATION (CONTINUE	D)
	ate for (1) community official, (2) insurance			
COMMENTS		•		
		-	: '	S. J. S.
				Check here if attachment
SECTION E - BUILDING	ELEVATION INFORMATION (SUI	RVEY NOT REQUIRED	FOR ZONE AO AND ZO	
represents the building, provide a ske The top of the bottom floor (including to natural grade, if available). For Building Diagrams 6-8 with opening grade. Complete items C3.h and C3. For Zone AO only: If no flood depth n Yes No Unknown. To	pasement or enclosure) of the building is angs (see page 7), the next higher floor or e	ft.(m)in.(cm) [] ab elevated floor (elevation b) on the floor elevated in accordant to in Section G.	ove or below (check one of the building is ft.(m)	the highest adjacent grade. (Use in.(cm) above the highest adjacent plain management ordinance?
	ed representative who completes Sections . The statements in Sections A, B, C, and			thout a FEMA-issued or community-
	AUTHORIZED REPRESENTATIVES N		, Nonioogo,	
ADDRESS	<u> </u>	CITY	STAT	TE ZIP CODE
	·			<u> </u>
SIGNATURE	•	DATE	. TELE	PHONE
COMMENTS				
				Check here if attachment
	SECTION G - COMMU	NITY INFORMATION (OPTIONAL)	} - y
ertificate. Complete the applicable item(I. The information in Section C was state or local law to certify elevation. A community official completed S	or ordinance to administer the community s) and sign below. taken from other documentation that has on information. (Indicate the source and ection E for a building located in Zone A (64-G9) is provided for community floodplates.	been signed and embosse date of the elevation data in without a FEMA-issued or o	d by a licensed surveyor, engithe Comments area below.)	neer, or architect who is authorized b
64. PERMIT NUMBER	G5. DATE PERMIT ISSUED		. DATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
	•	vement	fL(m)	Datum: Datum:
OCAL OFFICIAL'S NAME	**	TITLE	· · · · · · · · · · · · · · · · · · ·	·
COMMUNITY NAME		TELEP	HONE	
SIGNATURE		DATE		
COMMENTS				
. : :			, 32 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	. , , , , , , , , , , , , , , ,
				- Check here if attachmen
	/ * %			[] OHEOV HEIGH WARMING

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