FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

| important: Read the instructions on pages 1 - 7. | | | | | | |
|--|--------------------------------------|--|--|--|--|--|
| SECTION A - PROPERTY OWNER INFORMATION | For Insurance Company Use: | | | | | |
| BUILDING OWNER'S NAME LAURA CORNETO | Policy Number | | | | | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. | Company NAIC Number | | | | | |
| CITY TUC. | ZIP CODE | | | | | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) | | | | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL MOBIL HOND | | | | | | |
| LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: L GPS (Type): | | | | | | |
| (##°-##-##") NAD 1927 NAD 1983 USGS Quad Map Other. | | | | | | |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | |
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME Pima County 040073 | B3. STATE AZ | | | | | |
| B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL B8. FLOOD | B9. BASE FLOOD ELEVATION(S) | | | | | |
| NUMBER 2200 DATE EFFECTIVE/REVISED DATE ZONE(S) 04019 L Z S S S Z Z S S Z | (Zone AO, use depth of flooding) | | | | | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. | | | | | | |
| FIS Profile FIRM Community Determined Other (Describe): | | | | | | |
| B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (De | | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Are | a (OPA)? L_ Yes No | | | | | |
| Designation Date: | | | | | | |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE | ED) | | | | | |
| C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. | | | | | | |
| C2. Building Diagram Number (Select the building diagram most similar to the building for which this capacity to be selected as a select | certificate is being completed - see | | | | | |
| pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) | | | | | | |
| 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 C3.a-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 measure | | | | | | |
| calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. | | | | | | |
| Datum Conversion/Comments Does the elevation reference mark used SEE Comments Does the elevation reference mark used appearance processes and processes are processes as a second processes and processes are processes as a second processes are processed processes as a second processes are processed as a second processes are processes as a second processes are processed as a second processes are processes as | ar on the FIRM? I Yes V /INDA | | | | | |
| a) Top of bottom floor (including basement or enclosure) g g . o ft.(m) = | | | | | | |
| | LAND S | | | | | |
| □ b) Top of next higher floor □ c) Bottom of lowest horizontal structural member / □ 101.2 ft.(m) \$\frac{a}{2}\$ | | | | | | |
| | 55 EF O 12 | | | | | |
| The state of the s | | | | | | |
| e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | | | | | | |
| ① f) Lowest adjacent (finished) grade (LAG) | X | | | | | |
| g) Highest adjacent (finished) grade (HAG) | | | | | | |
| h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | TO A U | | | | | |
| I) Total area of all permanent openings (flood vents) in C3.h sq. In. (sq. cm) 1) Total area of all permanent openings (flood vents) in C3.h c sq. In. (sq. cm) | | | | | | |
| \// | NI . | | | | | |
| 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 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 1001. | | | | | | |
| CERTIFIER'S NAME | | | | | | |
| TITLE COMPANY NAME D 1/4/ 0 | 2000 | | | | | |
| Anness CITY STATE | An ZIP CODE OSTIO | | | | | |
| SIGNATURE SIGNATURE DATE 1-71-03 TELEPHO | 42 - 83110 | | | | | |
| Down whim | 010 00 10 | | | | | |

| IMPORTANT: In these s | paces, copy the corr | esponding informati | on from Section | 1A. | For Insurance Company Use: | |
|--|---|--|--------------------|-------------------------|--|--|
| BUILDING STREET ADDRE | SS (Including Apt., Unit, | Suite, and/or Bldg. No.) (| | | Policy Number | |
| CITY //(3 G | W KUSHMAU | C STATE | | ZIP CODE | Company NAIC Number | |
| TUC PE SUTURE SUTURE SUTURE SUTURED SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) | | | | | | |
| Copy both sides of this El | | | · | ····· | | |
| COMMENTS 1200 | _ | | | | | |
| - 3m | Assumed | | | NE COR WE | | |
| $\frac{300^{\circ}}{1000}$ | | HIS ADDR | | | ental test of the second | |
| SECT | | | | , | | |
| | (C K | | | | Check here if attachments | |
| | | | | | ND ZONE A (WITHOUT BFE) | |
| For Zone AO and Zone A (Information for a LOMA or | | | 4. II the Elevati | on Ceruncate is inten- | ueu for use as supporting | |
| E1. Building Diagram Num | ber (Select the | building diagram mos | | | certificate is being completed - | |
| see pages 6 and 7. If | no diagram accurately | represents the building | ng, provide a ske | etch or photograph.) | | |
| E2. The top of the bottom to (check one) the highest | floor (including baseme st adjacent grade. (Us | | | ft.(m) ir | n.(cm) _ above or _ below | |
| E3. For Building Diagrams | 6-8 with openings (se | e page 7), the next hig | gher floor or elev | | | |
| ft.(m) in | (cm) above the highest | st adjacent grade. Co | mplete items C3 | 3.h and C3.i on front o | of form. | |
| | | | | | lance with the community's s information in Section G. | |
| | nt ordinance? Yes SECTION F - PROPER | | | | | |
| The property owner or ow | mer's authorized repre | sentative who comple | etes Sections A, | B, C (Items C3.h and | C3.i only), and E for Zone A | |
| (without a FEMA-issued of | or community-issued B | | | | as A, B, C, and E are correct to | |
| the best of my knowledge PROPERTY OWNER'S OR |). OWNER'S ALITHOPIZE |) REPRESENTATIVE'S | NAME | | | |
| ADDRESS | - AUTORIZEL | | | | 710 (^^= | |
| • | <u> </u> | ta in the second | CITY | STATE | ZIP CODE | |
| SIGNATURE | ('ONRAI |) · · · : | DATE | TELEPH | UNE | |
| COMMENTS | - Company | |):. · | | - | |
| : | | | | | I Check here if attachments | |
| | SECTI | ON G - COMMUNITY | INFORMATION | (OPTIONAL) | I Oneon here it attachments | |
| The local official who is au | thorized by law or ordin | nance to administer th | e community's fl | loodplain managemer | | |
| Sections A, B, C (or E), and | d G of this Elevation C | ertificate. Complete t | he applicable ite | m(s) and sign below. | | |
| | | | | | sed by a licensed surveyor, ate the source and date of the | |
| | the Comments area be | | | | and source and date of till | |
| G2. A community offici | | E for a building locate | d in Zone A (with | out a FEMA-issued o | or community-issued BFE) or | |
| Zone AO. G3. [] The following infor | mation (thoma C4 CC) | Is provided for comm | unity floodalaia = | nanagament russas | • | |
| G3. The following infor | , | Is provided for commi PERMIT ISSUED | • | | COMPLIANCE/OCCUPANCY | |
| C4. PERMIT NUMBER | | FERMIT ISSUED | ISSUE | | | |
| G7. This permit has been i | ssued for: New | Construction S | Substantial Impro | vement | | |
| G8. Elevation of as-built lo | • , , , , | • | ng is: | • | ft.(m)Datum: | |
| G9. BFE or (in Zone AO) d | epur or nooding at the | building site is: | · · · | | ft.(m) Datum: | |
| LOCAL OFFICIAL'S NAME | | | TITLE | | · | |
| COMMUNITY NAME | | | TELEPHON | NE . | * | |
| SIGNATURE | | | DATE | | | |
| COMMENTS | | | | 1:00.1.21.21 | Tay Hoyer or | |
| | 2 2 40 12 12 | | | | ·· | |
| . N. Y | the same | * ************************************ | | | | |
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