OMB No. 1660-0008

STREET SANSTE

ELEVATION CERTIFICATE IMPORTANT: Follow the instructions on pages 1-9. 3 14 FEDERAL EMERGENCY MANAGEMENT AGENCY Expiration Date: July 31, 2015 National Flood Insurance Program FOR INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION A1. Building Owner's Name Policy Number: San (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. Company NAIC Number: Building Street Address Tucson A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Tax Code Z12 48 0678 Township 148 Range 128 Section 35 Residen Long. -111. 080691 Horizontal Datum: NAD 1927 **M** NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number .. A9. For a building with an attached garage: A8. For a building with a crawlspace or enclosure(s): N/A sq ft a) Square footage of crawlspace or enclosure(s) a) Square footage of attached garage b) No, of permanent flood openings in the crawlspace or b) Number of permanent flood openings in the enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b c) Total net area of flood openings in A9.b d) Engineered flood openings? d) Engineered flood openings? ☐ Yes ☐ Yes SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B2. County Name Pima County B3. State AZ B1. NFIP Community Name & Community Number Pima County / 040073 B7. FIRM Panel Effective/ B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone B6. FIRM Index Date B4. Map/Panel Number B5. Suffix **Revised Date** AO, use base flood depth) 04019C 2245 6-16-11 1.0 6-16-11 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ community Determined ☐ Other/Source: FIRM TIS Profile ☑ Other/Source:Highest Adj. Nat. Grade (=100 ft) B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes /N/A / _ CBRS ☐ OPA Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction* X Finished Construction C1. Building elevations are based on: ☐ Construction Drawings* *A new Elevation Certificate will be required when construction of the building is complete. C2. 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/A0. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Local Benchmark Utilized: NANG = 100.0 Vertical Datum: _ Indicate elevation datum used for the elevations in items a) through h) below. 🗌 NGVD 1929 🔲 NAVD 1988 🔀 Other/Source: . Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.

a)	Top of bottom floor (including basement, crawlspace, or enclosure floor)	102 0	X feet	☐ meters
b)	Top of the next higher floor	NIA	M feet	☐ meters
c)	Bottom of the lowest horizontal structural member (V Zones only)	N/A	X feet	☐ meters
d)	Attached garage (top of slab)	NIA 1	X feet	☐ meters
e)	Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	101. 9 16	✓ X feet	meters
f)	Lowest adjacent (finished) grade next to building (LAG)	100.9	X feet	meters
g)	Highest adjacent (finished) grade next to building (HAG)	101.6	X feet	meters
h)	Lowest adjacent grade at lowest elevation of deck or stairs, including structural support When B.9 is a depth above grade, it is required to indicate highest an	d lowest NATURAL grade in Section	M feet D Comments	meters
	SECTION D - SURVEYOR, ENGINEER	OR ARCHITECT CERT	IFICATIO	N

Check here if attachments.	licensed land surveyor?		
Certifier's Name Howard M Braun	License Number RLS 23 942		
Title President	Company Name Heward Brown Ent. LLC		
Address 4403 E Timred ST	City Trus on State A 2 ZIP Code 8571		
Signature	Date 2 - 11 - 13 Telephone 520 - 403 - 6045		

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 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.



ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the c				FOR INSURANCE COMPANY USE
	hendan Av			Policy Number:
Tucson Tucson	State AZ	ZIP Code	35757	Company NAIC Number:
	- SURVEYOR, ENGINEER, O			and the second s
opy both sides of this Elevation Certificat		-		. 1
comments The lowest service equipment (comments adjacent natural grade is	and the second s	the heater	99.6	is/are above this elev
iest aujacent natural grade is	Lowest aujacent na	turar grade is	1 6 0	
ignature		Date	2-11-13	
SECTION E -BUILDING ELEVAT	TION INFORMATION (SURVE	Y NOT REQUIRE	D) FOR ZONE A	O AND ZONE A (WITHOUT BFE)
or Zones AO and A (without BFE), completed thems E1-E4, use natural grade, if available and the second seco				R-F request, complete Sections A, B,an
Provide elevation information for the forgrade (HAG) and the lowest adjacent g	ollowing and check the appropriate		20 K. MOS. MANUTES SEE	is above or below the highest adjacent
a) Top of bottom floor (including basen			☐ feet ☐ me	The state of the s
b) Top of bottom floor (including basen			☐ feet ☐ me	
2. For Building Diagrams 6–9 with perma		ection A Items 3 an		8–9 of Instructions),
the next higher floor (elevation C2.b in 3. Attached garage (top of slab) is	the diagrams) of the building		feet me	
	automont condition the building in		feet Ome	
 Top of platform of machinery and/or e Zone AO only: If no flood depth numbe 				
	nown. The local official must certif			are command a neceptain managemen
SECTION F	- PROPERTY OWNER (OR O	WNER'S REPRE	SENTATIVE) CEI	RTIFICATION
e property owner or owner's authorized one AO must sign here. The statements				FEMA-issued or community-issued BFE
operty Owner or Owner's Authorized Rep		to the est of my	nowieuge.	
				715.0.1
ddress		City		State ZIP Code
ignature		Date		Telephone
omments				
				Check here if attachmen
	SECTION G - COMMUNI			
ne local official who is authorized by law o of this Elevation Certificate. Complete the	r ordinance to administer the comme	nunity's floodplain m	anagement ordinan	ce can complete Sections A, B, C (or E),
1. The information in Section C was				
				data in the Comments area below.)
A community official completed S	ection E for a building located in 2	one A (without a FE	MA-issued or comm	nunity-issued BFE) or Zone AO.
3. The following information (Items	G4-G9) is provided for communi	ty floodplain manag	gement purposes.	
4. Permit Number	G5. Date Permit Issued	G	6. Date Certificate (Of Compliance/Occupancy Issued
7. This permit has been issued for:	☐ New Construction ☐ Subst	antial Improvement		
8. Elevation of as-built lowest floor (incl	uding basement) of the building:		☐ feet ☐ me	
BFE or (in Zone AO) depth of flooding	g at the building site:		☐ feet ☐ me	
10. Community's design flood elevation:			☐ feet ☐ me	eters Datum
ocal Official's Name Francisio	Raminez	Title	CFM	
community Name Pina Cov	nty RFCS	Telephone	(520) 2	43-1800
signature Fn		Date	3/14/13	
Comments for disc w	1 chief Hydro	ok to	ruest E	Ic showing love
Service equil	. A/C 0.9 +	it above	BFE.	0
/ /				Check here if attachme
MA Form 086-0-33 (7/12)				Replaces all previous edi
ATIA I VIIII VOU VOO (1/12)				replaces all previous eur

ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	corresponding information from Section A.	FOR INSUR	RANCE COMPANY USE
Building Street Address (including Apt., U. 4750 5.	nit, Suite, and/or Bldg. No.) or RO. Route and Box No. Shericlan Ave	Policy Numb	per:
City Tucson	State AZ ZIP Code	8575 Company N/	AIC Number:

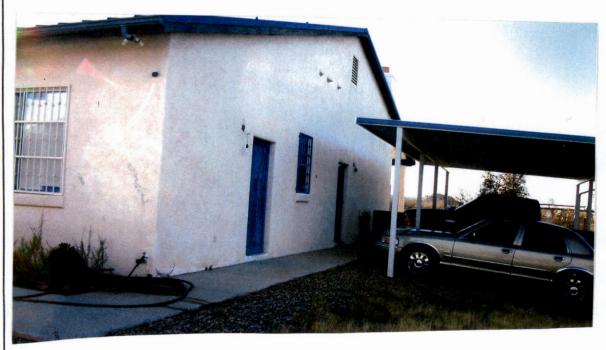
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Photo dote 2-11-13





Front (North)



Right Side West)

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

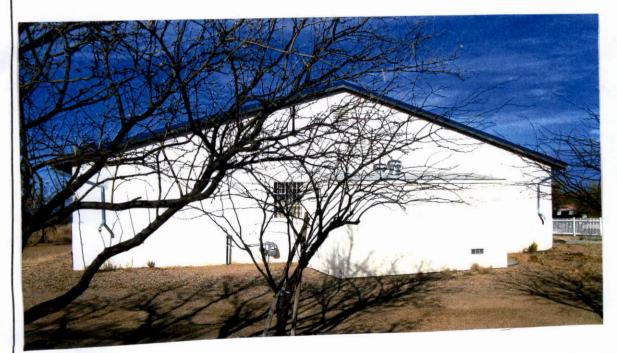
IMPORTANT: In these spaces, copy the corresponding	g information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 4750 S. Shevida		Policy Number:
City Tucson	State AZ ZIP Code 85.75.7	Company NAIC Number:

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Photo Date 2-1-13



Bach (South)



Keft Sidf (East)