

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

PCFC MAY 11 '06 PM 1:54

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME <u>Laddy, Robin</u>		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>6555 N. Nelson Quibus Rd. #1</u>		Company/NAIC Number
CITY <u>Marana</u>	STATE <u>AZ</u>	ZIP CODE <u>85653</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TL 208-40-1240 T135, R10E, S1C02</u>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>Residential mobile Home</u>		
LATITUDE/LONGITUDE (OPTIONAL) (##-##-#### or ###.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Pima County 040073</u>		B2. COUNTY NAME <u>Pima County</u>		B3. STATE <u>Arizona</u>	
B4. MAP AND PANEL NUMBER <u>04019C11560</u>	B5. SUFFIX <u>K</u>	B6. FIRM INDEX DATE <u>2/8/99</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>2/8/99</u>	B8. FLOOD ZONE(S) <u>A01</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>1.0</u>

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 (Describe): Highest Adjacent Grade

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 6 Select the building diagram most similar to the building for which this 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

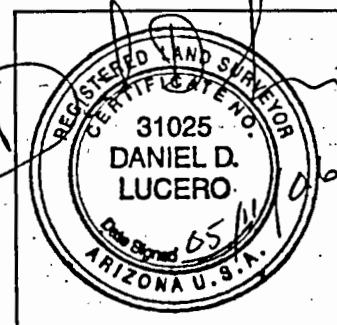
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum _____ Conversion/Comments assumed elevation at H.A.G. + 0.00

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- a) Top of bottom floor (including basement or enclosure) +3.48 FFE ft.(m)
- b) Top of next higher floor N/A ft.(m)
- c) Bottom of lowest horizontal structural member N/A ft.(m)
- d) Attached garage (top of slab) N/A ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 10.50 ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 10.10 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 0.00 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 12
- i) Total area of all permanent openings (flood vents) in C3.h 1536 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



SECTION D - SURVEYOR, CERTIFICATION

This certification is to be signed and sealed by a land surveyor, _____ 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 <u>Daniel D. Lucero</u>		LICENSE NUMBER <u>RLS 31025</u>	
TITLE		COMPANY NAME	
ADDRESS <u>6211 S. Mark Rd</u>	CITY <u>TUCSON</u>	STATE <u>AZ</u>	ZIP CODE <u>85746</u>
SIGNATURE <u>Daniel D. Lucero</u>	DATE <u>05/11/06</u>	TELEPHONE <u>520-578-9607</u>	

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. 6555 N. Nelson Quivuis Rd. #1			Policy Number _____
CITY Marion	STATE AZ	ZIP CODE 85653	Company NAIC Number _____

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

C3-c Bottom of lowest horiz. structural member is +2.40
 C3-e Lowest equipment Propane tank +0.50 to bottom, +2.2 bottom flex box, electric meter, +2.4 Bottom 30 Gallon Climate Control Unit, water heater + 3.40 inside House & FFE, New TC # 208-40-1240

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) _____
- E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft.(m) _____ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is _____ ft.(m) _____ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME _____

ADDRESS _____	CITY _____	STATE _____	ZIP CODE _____
SIGNATURE _____	DATE _____	TELEPHONE _____	
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 ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER _____	G5. DATE PERMIT ISSUED _____	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED _____
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME Brian Jones	TITLE Senior Hydrologist
COMMUNITY NAME Pima County	TELEPHONE (520) 740-6350
SIGNATURE <i>[Signature]</i>	DATE 5-12-02
COMMENTS Since the propane tank is not considered service equipment, the lowest service equipment is the climate control unit at +2.4	

☐ Check here if attachments

4/3/02

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAMO.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME <u>Labby, Robin</u>			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>6555 N Nelson Quichus Rd #1</u>			Company NAIC Number
CITY <u>Marana</u>	STATE <u>AZ</u>	ZIP CODE <u>85653</u>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TC 208-40-1240, T135 R1E Sec 02 FPUP 02-638E</u>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>Residential Mobile Home</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ###.####")		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	
		<input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Pima County 2040073</u>		B2. COUNTY NAME <u>Pima County</u>		B3. STATE <u>Arizona</u>	
B4. MAP AND PANEL NUMBER <u>04019 C1560</u>	B5. SUFFIX <u>15</u>	B6. FIRM INDEX DATE <u>2/8/99</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>2/8/99</u>	B8. FLOOD ZONE(S) <u>AO</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>1.0</u>

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 (Describe): Highest Adjacent GradeB12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this 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 measurements and datum conversion 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 _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☐ No

- a) Top of bottom floor (including basement or enclosure) n/a ft.(m)
- b) Top of next higher floor n/a ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) 2.40 ft.(m)
- d) Attached garage (top of slab) n/a ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) n/a ft.(m)
- f) Lowest adjacent (finished) grade (LAG) -0.10 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 0.60 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 12
- i) Total area of all permanent openings (flood vents) in C3.h 1536 sq. in. (sq. cm)

License Number, Embossed Seal, Signature and Date



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 <u>Daniel D. Lucero</u>		LICENSE NUMBER <u>RLS 31025</u>	
TITLE <u>Survey Manager</u>		COMPANY NAME <u>Castro Engineering Corp.</u>	
ADDRESS <u>3580 W. Ina Road #200</u>		CITY <u>Tucson</u>	STATE <u>AZ</u>
SIGNATURE <u>[Signature]</u>		DATE <u>4-3-03</u>	ZIP CODE <u>85741</u>
		TELEPHONE <u>(520) 293-2550</u>	

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. 6555 N Nelson Quichuis Rd			Policy Number
CITY Marana	STATE AZ	ZIP CODE 85653	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
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- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
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 ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER FPUP 02-638E	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

___ ft.(m) Datum: ___

G9. BFE or (in Zone AO) depth of flooding at the building site is:

___ ft.(m) Datum: ___

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachments