FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

FPUP 03-066E

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1-7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION BUILDING OWNER'S NAME Policy Number.es Marcus, Donald BUILDING STREET ADDRESS, (Including Act., Unit. Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO. 11640 W. Sandario Hollow Trail CITY STATE ZIP CODE Tucson 85735 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 209-12-012H, 15-11-10 BUILDING USE (e.g., Residential, Non-residential, [Addition, Accessory, etc. Use a Comments area, If necessary.) Residential, Manufactured Home LATTUDELONGITUDE (OPTIONAL) SOURCE: GPS (Type): 42 HORIZONTAL DATUM: (##-##-#### or #######) ☐ NAD 1927 ☐ NAD 1983 USGS Quad Map A STATE OF THE STA SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3.STATE Pime County Pime County 040073 Arbona BL MAP AND PANEL **BS. SUFFIX** B7, FRM PANEL 89. BASE FLOOD ELEVATION'S NUMBER BB. FIRM INDEX DATE EFFECTIVE/REVISED DATE B8.FLOOD ZONE(S) (Zone AO, use depth of fooding) 04019C2200 2/8/99 2499 1.0 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. []FIRM □ Community Determined ☐ FIS Profile Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 G-Other (Describe): Highest Adjacent Grade B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes SENO Designation Date NA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* ☐ Building Under Construction* *A new Bevation 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 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-1 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. 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) L(m) D) Top of next higher floor t(m) C) C) Bottom of lowest horizontal structural member (V-annes col LAT (tilm) Attached garage (top of slab) fL(m) C) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) £(m) .ft.(m) if Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG) fL(m) in h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade [2] i) Total area of all permanent openings (flood vents) in C3.h. sq. in. (sq. am) 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. LICENSE NUMBER CERTIFIER'S NAME TITLE COMPANY NAME STATE ZIP CODE CITY **ADDRESS** TPI FPHONE SIGNATURE DATE

FPUP 03-066E	· ·	
IMPORTANT: In these spaces, copy the corresponding information from S	ection A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and or Bidg. No.) OR P.O. ROUTE AND E 640. W., Sandario Hollow Trail	OXNO	Policy Number
CTY	ZIP CODE	
JCSOIL	85735	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR AF	CHITECT CERTIFICATION (CONTI	NUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/	ompany, and (3) building owner.	
COMMENTS		
	* * · · · · · · · · · · · · · · · · · ·	
	* () () () () () () () () () (
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY N	OT REGULEED FOR ZONE AO AND	Check here if attachment
or Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Ce	filicate is intended for use as supporting in	omation for a LOVA or LOVA.E
 Building Diagram Number 5 (Select the building diagram most similar to the building for vepresents the building, provide a sketch or photograph.) The top of the bottom floor (Including basement or enclosure) of the building is 3 ft.(m) natural grade, if available). For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated if grade. Complete items C3.h and C3.i on front of form. For Zone AO only. If no flood depth number is available, is the top of the bottom floor ele 	9 in.(cm) 2 above or 6 below (check correction b) of the building is 8 if.(m) valid in accordance with the community's	cone) the highest adjacent grade. (Use) Air.(cm) above the highest adjacent
Yes. No Unknown. The local official must certify this information in Section		
SECTION E - PROPERTY OWNER (OR OWNER	R'S REPRESENTATIVE) CERTIFIC	ATION
The property owner's authorized representative who completes Sections A, B, C issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are or	items C3.h and C3.i only), and Efor Zone.	A (without a FEWA-issued or community-
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVES NAME	meet in the nest of this knowledge.	
•		
ADDRESS	CITY	STATE ZIP CODE
SIGNATURE	DATE	TELEPHONE
COMMENTS		
,		
		•
		Check here if attachment
SECTION G - COMMUNITY IN	FORMATION (OPTIONAL)	
he local official who is authorized by law or ordinance to administer the community's floodpl	ain management ordinance can complete :	Sections A, B, C (or E), and G of this Eleva
Certificate. Complete the applicable item(s) and sign below.		
61. The information in Section C was taken from other documentation that has been sign	ned 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		
52. \square A community official completed Section E for a building located in Zone A (without a \square). The following information (flams G4-G9) is provided for community floodplain manages.		r Zone AO.
		· -
G4. PERINT NUMBER FPUP 03-066E G5. DATE PERINT ISSUED	G6. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY ISSUED
77. This permit has been Issued for: New Construction Substantial Improvement		•
38. Elevation of as-built lowest floor (including basement) of the building is:	fL(m)	Datum:
39. BFE or (in Zone AO) depth of flooding at the building site is:	ft.(m)	Datum
LOCAL OFFICIAL'S NAME Eric Shepp	TITLE	ement Division Manager
COMMINITY NAME A	TELEPHONE	ement Division Manager
Pima/County	TELEPHONE 520-740-635	0
SIGNATURE (//	DATE ₆₋₁₋₀₆	
COMMENTS The information in Section E is from an Elevation Certification		ane on 04-07-2003
	o completed by Michael D. Owe	3110 VII V+V/-2003.
he bottom of the structural frame is 2.2 feet above HAG.		Check here if attachment

EMA Form 81-31, JUL 00

REPLACES ALL PREVIOUS EDITIONS

D. J. In 2/18/07

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

	portant: Read the instruction A - PROPERTY OW		For Insurance Company Use:
BUILDING OWNER'S NAME	DESTIONA-FROPERIT ON	INCUMATION	Policy Number
Marcus, Donald			r oncy number
BUILDING STREET ADDRESS (Including Apt., 1		O. ROUTE AND BOX NO.	Company NAIC Number
CITY		STATE	ZIP CODE
Tucson		A Z	85735
BUILDING USE (e.g., Residential, Non-residential)	1, TISS RIJE SI	5 FP4P 03-06	6 E
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.#####")	HORIZONTAL DATUM: _ NAD 1927 NAD 1983	SOURCE: GPS (Type):_ USGS Quad	Map _ Other:
SECTION	N B - FLOOD INSURANCE RA	TE MAP (FIRM) INFORMATI	ON
B1. NFIP COMMUNITY NAME & COMMUNITY	NUMBER B2. COUNTY NA	ME	B3. STATE
Pima County 2040073	Ping Co	eunty .	AZ
NUMBER	DATE EFFECTIVE/	M PANEL B8. FLOOD REVISED DATE ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zoné AO, úse depth of flooding)
04019C/2200 K :	218199 218	189 A	1.0
FIS Profile FIRM 311. Indicate the elevation datum used for the state of		NAVD 1988 ≥ Other	
SECTION C	- BUILDING ELEVATION INF	ORMATION (SURVEY REQU	JIRED)`;
C1. Building elevations are based on: C1. Building elevation Certificate will be requ	onstruction Drawings* _	Building Under Construction	
C2. Building Diagram Number (Select pages 6 and 7. If no diagram accurately C3. Elevations – Zones A1-A30, AE, AH, A (represents the building, provi with BFE), VE, V1-V30, V (with	de a sketch or photograph.) n BFE), AR, AR/A, AR/AE, AR	/A1-A30, AR/AH, AR/AO
Complete Items C3.a-i below according the datum used for the BFE in Section B calculation. Use the space provided or to Datum LOCAL Conversion/Com	, convert the datum to that use the Comments area of Section	d for the BFE. Show field mea	asurements and datum conversion
Elevation reference mark used HAG		ation reference mark used ap	pear on the FIRM? Yes X No
本a) Top of bottom floor (including base		103.75 ft.(m) \$\frac{1}{8}\$ 102.2 ft.(m) \$\frac{1}{8}\$	ELED LAND SEL
A ☐ d) Attached garage (top of slab) ☐ D e) Lowest elevation of machinery and	' · .	ft.(m)	31030 O
servicing the building (Describe in	a Comments area.)		OWENS 8
f) Lowest adjacent (finished) grade (L	<u></u>	99 . 🔌 ft.(m) 💆	
g) Highest adjacent (finished) grade (TO TO TO THE TOTAL PROPERTY OF THE TOTAL PRO
a ii) iao. Oi beimaneiir obeimigs (mood			PROMAUS!
(I) Total area of all permanent opening	gs (1100a vents) In C3.h	sq. in. (sq. cm)	The same of the same
SECTION	D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTIFICA	TION
This certification is to be signed and sealed			
I certify that the information in Sections A, I	-	_	•
I understand that any false statement may	be punishable by fine or impris		Section 1001.
WICHOLD D'OUTHS			030 42
ANDRESS PESSIDENT		CHIPPI	FURNEYING, INC
ADDRESS 425 5, PLUMBE #	107 7877	ON STATE	ZIP CODE 857 (9
CICNIATUDE			

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| Check here if attachments