## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

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

12-12-03 P03:31 OUT

		PROPERTY OWNER INFORMAT		For Insurance Company Use:
BUILDING OWNER'S NAME				Policy Number
Lennar Homes				1 only rearrison
BUILDING STREET ADDRESS (Including Apt 6310 West Ocotillo Meadow Drive	t., Unit, Suite, and/or Bl	dg. No.) OR P.O. ROUTE AND BO	X NO.	Company NAIC Number
CITY Tucson	CODE			
PROPERTY DESCRIPTION (Lot and Block N	umbers, Tax Parcel Nu	AZ Imber, Legal Description, etc.)	85746	
Lot 52 in Camino Verde Estates II - Maps & Pla	ats - Book 56 Page 25			
BUILDING USE (e.g., Residential, Non-residential	ntial, Addition, Accessor	ry, etc. Use a Comments area, if ne	cessary.)	
LATITUDE/LONGITUDE (OPTIONAL)	HORIZON	TAL DATUM: SO	OURCE: GPS (T)	<b>50)</b> :
( ##° - ##' - ##.##" or ##.####")	_	□ NAD 1983		
O.F.	2070N P. El 00P III			·
		SURANCE RATE MAP (FIRM) IN	PORMATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER  Dima County	:R   B2   Pin	. COUNTY NAME		B3. STATE Arizona
B4 MAP AND PANEL	De CIDMINIDEV DATE	B7. FIRM PANEL	D0 E 000 701 E 0	B9. BASE FLOOD ELEVATION(S)
NUMBER B5. SUFFIX K	B6. FIRM INDEX DATE 02-08-99	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	(Zone AO, use depth of flooding) 2502.4
B10. Indicate the source of the Base Flood Elevation (				
FIS Profile FIRM	Community Determ		76 P1	<sup>3</sup> / <sub>63</sub>
B11. Indicate the elevation datum used for the BFE in	<i></i>		Other (Describe): _	
B12. Is the building located in a Coastal Barrier Resou				Designation Date
		EVATION INFORMATION (SURV		
C1. Building elevations are based on: Construction		<u></u> -	Finished Construction	3-32-0
*A new Elevation Certificate will be required when	•			
C2. Building Diagram Number 1 (Select the building di			a completed - see page	ss 6 and 7 If no dinamm
accurately represents the building, provide a sket		s building for writer this certificate is being	ig completed - see page	so and 7. If no diagram
		E) AD AD/A AD/AE AD/A1 A20 AD/	ALL ADVAC	
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE Complete Items C3a-i below according to the bull complete.				an eletron used for the DITT in
Section B, convert the datum to that used for the I			n. Use the space provid	ded or the Comments area of
Section D or Section G, as appropriate, to docum	ent the datum conversion	<b>.</b>		
Datum_ Conversion/Comments		annes an the FIDMO TO Van Male	r	
Elevation reference mark used _Does the elevation		• •		DIANG
□ a) Top of bottom floor (including basement or	enciosure)	2503. 4 ft.(m)	Sea C	· Comment
□ b) Top of next higher floor		<u>N/A</u> ft.(m)	⊽	S GALLES
c) Bottom of lowest horizontal structural memb	oer (V zones only)	<u>N/A</u> ft.(m)	Data	19316 9
☐ d) Attached garage (top of slab)		<u>2503</u> . <u>4</u> ft.(m)√	License Number, Embosse Signature, and Date	T. WAYNE ASHBY
e) Lowest elevation of machinery and/or equip		244		ASHBY ASHBY
servicing the building (Describe in a Comm	nents area)	<u>N/A</u> ft.(m)	umb ratu	12/3
f) Lowest adjacent (finished) grade (LAG)		2502 . 4 ft.(m) u	Si Si	To ned
g) Highest adjacent (finished) grade (HAG)		2501. 4 ft.(m)	Sugar Sugar	ONA U
h) No. of permanent openings (flood vents) with		· · · · · · · · · · · · · · · · · · ·	3 <u>[</u>	
i) Total area of all permanent openings (flood	vents) in C3.h <u>N/A</u> sq. in. (	(sq. cm)		
		, ENGINEER, OR ARCHITECT CI	<del></del>	
This certification is to be signed and sealed by				
I certify that the information in Sections A, B, a				<b>).</b>
I understand that any false statement may be p	ounisnable by fine or in			I C 10316 (A7)
CERTIFIER'S NAME T. Wayne Ashby			LICENSE NUMBER RI	LD 19010 (AZ)
TITLEPresident/Director of Survey		COMPANY NAME AST	nby Surveying & Drafting	g, Inc.
ADDRESS		СПҮ	STATE	E ZIP CODE
717 North Swan Road		Tucson	AZ	85711
SIGNATURE		DATE		PHONE
I la lance		12/05/03	1 (520)	) 325-1991

	ppy the corresponding information from (		03-18311-R		Insurance Company Use:
BUILDING STREET ADDRESS (Including Ap 6310 West Ocotillo Meadow Drive	ot., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND	BOX NO.		Pol	icy Number
CITY Tucson	STA AZ	ITE	ZIP CODE 85746	Co	mpany NAIC Number
SE	CTION D - SURVEYOR, ENGINEER, OR A	VRCHITECT (	CERTIFICATION (CONT	NUED)	
Copy both sides of this Elevation Certification	ate for (1) community official, (2) insurance agent/o	ompany, and (	3) building owner.		
COMMENTS					
· ·				<u> </u>	
					Check here if attachmen
	G ELEVATION INFORMATION (SURVEY)		<del></del>	•	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	omplete Items E1 through E4. If the Elevation Cer	tificate is intend	led for use as supporting info	ormation for a LC	MA or LOMR-F,
Section C must be completed.	. La Maltana de La casa de la cas	Alak da	and a factor of the state of th		Kan Pa
<u> </u>	e building diagram most similar to the building for v ch or photograph \	w IICH THIS CERTIFIC	uale is being completed - se	≈ pages 6 and 7	. II no diagram accurately
represents the building, provide a sket E2. The top of the bottom floor (including ba		) ()in (cm) 🔽 -	above or Delow (check	one) the history	adiacent grade // les
natural grade, if available).		. <u></u>		J. ∼) u ro i liyi lest.	
• • •	gs (see page 7), the next higher floor or elevated fl on front of form.	oor (elevation b	o) of the building isft.(m)	in.(cm) above	the highest adjacent
E4. The top of the platform of machinery ar	on front of form. nd/or equipment servicing the building is ft.(i	m)in.(cm) [_	above or Delow (chec	ck one) the highe	st adjacent grade. (Use
natural grade, if available).	mber is available, is the top of the bottom floor ele		•		
	imber is available, is the top of the bottom floor ele e local official must certify this information in Section		will tale community's i	upiairi manag	roma il Ofull lel 108'?
	e local onicial must certily this information in Section CTION F - PROPERTY OWNER (OR OWN		ESENTATIVE) CEPTIE	CATION	·
	d representative who completes Sections A, B, C				A-issued or community-
	The statements in Sections A, B, C, and E are o	•		June work at LIV	
	AUTHORIZED REPRESENTATIVE'S NAME		,		
ADDRESS		СПҮ		STATE	ZIP CODE
SIGNATURE	Market and the second of the s	DATE		TELEPHONE	
			<del></del>		-
COMMENTS		·		percent in the contract of	
	3	<del>.</del>			Chook have if all all all and
A STATE OF THE STA	SECTION G - COMMUNITY I	NEODMATIC	N (OPTIONAL )		Check here if attachmen
	or ordinance to administer the community's floodpl			Soctions A. D. O.	or F) and C of this County
The loçal official who is authorized by law o Certificate. Complete the applicable item(s		an manageme	an ordinarios cari completê (	JOGULUTES PA, 15, C.	(or E), and G OI (TIS Elevado)
G1. 📋 The information in Section C was t	aken from other documentation that has been sign			engineer, or arch	nitect who is authorized by s
or local law to certify elevation info	ormation. (Indicate the source and date of the elev	ation data in the	e Comments area below.)	_	,
	oction E for a building located in Zone A (without a			r Zone AO.	
<u> </u>	4-G9) is provided for community floodplain manaç	gement purpose			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE O	OF COMPLIANCE	OCCUPANCY ISSUED
•	New Construction Substantial Improvement				
G8. Elevation of as-built lowest floor (includ	ing 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	**************************************	π	TLE	<del></del>	
COMMUNITY NAME		TE	ELEPHONE	·	
SIGNATURE		D/-	ATE	<u></u>	
COMMENTS				· · · · · · · · · · · · · · · · · · ·	
,			A in the		
And the second s					Check here if attachmen
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FEMA Form 81-31, January 2003

Replaces all previous editions