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FEMA Form 81-31, January 2003

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. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number BUILDING OWNER'S NAME Carol and Joseph Locust BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOXINO. Company NAIC Number 3464 M. Hermans Road ZIP CODE STATE CITY 85736 TULSON PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 138-29 689B RBE 15-13-20 5 Tax Code T 15 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
Residential Mannfectural Home LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): ☐ NAD 1927 ☐ NAD 1983 USGS Quad Map (##°-##-#### or ##.#####°) Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B2. COUNTY NAME B3. STATE** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER ΑZ Pima County Pima County 040073 **B9. BASE FLOOD ELEVATION(S) B4. MAP AND PANEL** B7. FIRM PANEL **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE **B8. FLOOD ZONE(S)** (Zone AO, use depth of flooding) **B5. SUFFIX** NUMBER 2-8-99 04019C B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIRM Community Determined Other (Describe): ☐ FIS Profile NAVD 1988 Cother (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation DateN/A SECTION CEBUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawlings* Building Under Construction* M Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 5 (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 Lack Conversion/Comments Does the elevation reference mark used appear on the FIRM? Yes XNo Elevation reference mark used 100_ Oft(m) o a) Top of bottom floor (including basement or enclosure) o b) Top of next higher floor. Embossed and Date o c) Bottom of lowest horizontal structural member (V zones only) 17t(m) HOWARD M o d) Attached garage (top of slab) BROWN o e) Lowest elevation of machinery and/or equipment 100.0ft(m) servicing the building (Describe in a Comments area) 95.Zft(m) o f) Lowest adjacent (finished) grade (LAG) PIZONA U o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _______ o i) Total area of all permanent openings (flood vents) in C3.h 1/180. in. (sq. cm) 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 KL5 23942 COMPANY NAME TITLE 146 Enterprises Brown Howard ZIP CODE STATE CITY **ADDRESS** A 2 85711 LUCSON TELEPHONE DATE SIGNATURE 6045 4,3 2-20-06 Replaces all previous editions

See reverse side for continuation.

34 44 B 31 1 1

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX	XNO.	 	Policy Number
CITY	<u> </u>		
10LSM AZ		ZIPCODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFICA	TION (CONTINUE	(D)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/cor	mpany, and (3) building o	wner.	
COMMENTS ne lowest service equipment (C3e) is the and the	Heater EWater	be le -	1-100
This cert is a copy of one filed 2.8-0.			is/are above this elevation
to site	and apes	not rep	resent a new un
Lowest Structural Member	98.3364	 	Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT	REQUIRED FOR 7	ONE AO AND ZO	ME A MATUOLIT DED
or Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certification C must be completed.	cate is intended for use a	s supporting informa	ation for a LOMA or LOMR-F,
Building Diagram Number _(Select the building diagram most similar to the building to			
represents the building, provide a sketch or photograph.)	this certificate is being	completed - see pa	iges 6 and 7. If no diagram accurately
2. The top of the bottom floor (including basement or enclosure) of the building is Aft.(m)	or [below (check one) the highest adjacent grade. (Use
natural grade, if available)			
3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or divided for grade. Complete items C3.h and C3.i on front of form.	or (elegation b) of the build	fing isft.(m)i	n.(cm) above the highest adjacent
The state of the s		i	
natural grade, if available).	'	1	the highest adjacent grade. (Use
5. For Zone AO only: If no flood depth number is available, is the top of the bottom floot eleva	ted in accordance with th	j e community's flood	plain management ordinance?
Tes NO Unknown. The local chical must centry this information by Section	G.	i:	,
SECTION F - PROPERTY OWNER (OR OWNER	'S REPRESENTATIV	E) CERTIFICATIO	N .
The property owner or owner's authorized representative who completes Sections A, B, C (the	ms C3.h and C3.i only), a	and E for Zone A (wi	thout a FEMA-issued or community-
issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are com- PROPERTY OWNERS OR OWNERS AUTHORIZED REPRESENTATIVE'S NAME.	the best of my know	rledge.	
ADDRESS	CITY	STAT	E ZIP CODE
SIGNATURE	DIE.	TELE	PHONE
		: '	TIONE
COMMENTS	<u> </u>	1	,
	· '		'
		:	Check here if attachments
SECTION G - COMMUNITY INFO			
ne local official who is authorized by law or ordinance to administer the community's floodplain	management ordinance	can complete Section	ons A, B, C (or E), and G of this Elevation
ertificate. Complete the applicable Item(s) and sign below.		'	
 The information in Section C was taken from other documentation that has been signed or local law to certify elevation information. (Indicate the source and date of the elevation) 	I and embossed by a lice on data in the Comments	nsed surveyor, engi	neer, or architect who is authorized by s
2. A community official completed Section E for a building located in Zone A (without a FE	MA-issued or community	Hissued BFE) or Zor	ne AO.
The following information (Items G4-G9) is provided for community floodplain managen	nent purposes.	1	
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	G6. DATE C	RTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
7 This result has been been dead of the control of	<u>.</u>	'	
7. This permit has been issued for: New Construction Substantial improvement 8. Elevation of as-built lowest floor (including basement) of the building is:		# (mi)	Det
9. BFE or (in Zone AO) depth of flooding at the building site is:	***	ft.(m) ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME	TITLE		
COMMUNITY NAME	TELEPHONE		,
SIGNATURE	DATE	i I	
	LAIC	ı	
COMMENTE			
COMMENTS .		`	
COMMENTS			

EICert, 05-118E P04CP12770 Client's Initials 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.

		d the instructions on pages 1 - 7.		T = : : 1
	SECTION A - F	PROPERTY OWNER INFORMATI	ON	For Insurance Company Use:
BUILDING OWNER'S NAME			•	Policy Number
Carol and Joseph Locust		- N- 100 D O DOLETT AND DOL	V NO.	Company NAIC Number
BUILDING STREET ADDRESS (Including A 3464 W. Hermans Road	Apt., Unit, Suite, and/or Bl			
CITY		STATE	ZIP COD 85736	E
Tucson PROPERTY DESCRIPTION (Lot and Block	Numbers Tay Darrel Mi	MAZ	00730	
Tax Code 138-29-689B, a portion of T15S F	R13E Sec. 20			15-13-20
BUILDING USE (e.g., Residential, Non-residential, Manufactured Home				
LATITUDE/LONGITUDE (OPTIONAL)			OURCE: GPS (Type	
(##°-##'-##.##" or ##.#####")		☐ NAD 1983		Id Map
		SURANCE RATE MAP (FIRM) IN		
B1. NFIP COMMUNITY NAME & COMMUNITY NUM	IBER B2	. COUNTY NAME		STATE zona
Pima County 040073	Pr	na County	I All	
B4, MAP AND PANEL NUMBER B5, SUFFIX 04019C 2810 K	B6. FIRM INDEX DATE 2/8/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 2-8-99	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 1.0
B10. Indicate the source of the Base Flood Eleva	ion (BFE) data or base floo	d depth entered in B9.	<u> </u>	
FIS Profile FIRM	Community Determ	nined 🔲 Other (Describ	oe):	1 /
B11. Indicate the elevation datum used for the BF	E in B9: NGVD 1929	☐ NAVD 1988	Other (Describe):	<u>A</u> , O.
B12. Is the building located in a Coastal Barrier R	esources System (CBRS) a	rea or Otherwise Protected Area (OPA)? ☐ Yes ☒ No □	Designation Date
SEC	TION C - BUILDING EL	EVATION INFORMATION (SUR)	EY REQUIRED)	
C1. Building elevations are based on: Constr	uction Drawings*	Building Under Construction*	Finished Construction	
*A new Elevation Certificate will be required	when construction of the bui		-W//	
C2. Building Diagram Number 5 (Select the buil	ding diagram most similar to	o the building for which this certificate is	being completed - see pa	ges 6 and 7. If no diagram
accurately represents the building, provide a		- (
C3. Elevations - Zones A1-A30, AE, AH, A (with	BFE), VE, V1-V30, V (with I	BFE), AR, AR/A, AR/AE, AR/A1-A30, A	R/AH, AR/AO	
Complete Items C3a-i below according to the	ne building diagram specifie	d in Item C2. State the datum used. If the	ne datum is different from t	the datum used for the BFE in
Section B, convert the datum to that used for	the BFE. Show field measu	rements and datum conversion calcula	ition. Use the space provi	ded or the Comments area of
Section D or Section G, as appropriate, to do				1
Datum LocoConversion/Comments	_			
		k used appear on the FIRM? Yes	DX(No ☐	AND
o a) Top of bottom floor (including basemer	t or enclosure)	(<u>oo</u> . <u>∞</u> ft(m)	<u> </u>	ENEQ CAND SUPPLY
o b) Top of next higher floor		A ft.(m)	jossed Seal	Secure Williams
o c) Bottom of lowest horizontal structural m	nember (V zones only)	9 <u>8_33</u> ft.(m)	iosse Date	23942
o d) Attached garage (top of slab)		<u> </u>	gu g	HOWARD M.
o e) Lowest elevation of machinery and/or e	equipment	∧	₽. ĕ. /	BROWN
servicing the building (Describe in a C	Comments area)	<u> </u>		TO SIGNED 2
of) Lowest adjacent (finished) grade (LAG)		95.2 ft.(m)	¥ 55	ARIZON SALVEN
o g) Highest adjacent (finished) grade (HAC	S)	96.3_ft.(m)	Ličense Number, Emt Signature, and	CUNA U. S.
o h) No. of permanent openings (flood vent	s) within 1 ft. above adjacen	t grade <u>w/</u> A	·	•
o i) Total area of all permanent openings (fl			-	No.
		R <mark>, ENGINEER, OR ARCHITECT C</mark>		
This certification is to be signed and seale	d by a land surveyor, eng	ineer, or architect authorized by law	to certify elevation info	rmation.
I certify that the information in Sections A, I understand that any false statement may	B. and C on this certificat	e represents my best efforts to inter	pret the data available.	
	ре ринізналів ду нне ог	umphodiumoni undor 10 0.5. 000 0, (LICENSE NUMBER	
CERTIFIER'S NAME TOWARD A	1. Brown)	RLS 2394	2
TITLE President		COMPANY NAME Howard Bi	rown Ent	erprises LLC
ADDRESS		CILY	STATE	ZIP CODE
	+1.		/\~	$\omega_{\ell-1}$
	<u> </u>	TUCSUS	デン TELEPH	8571/ HONE
SIGNATURE SIGNATURE	払 ST	70CSas DATE 2-8-0	TELEPI	

IMPORTANT: In these spaces, cop	y the corres ding information from Section	Α 🔍	For Insurance Company Use:
	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number
Tucson	AZ	85736	
	ION D - SURVEYOR, ENGINEER, OR ARCHITE		INUED)
	e for (1) community official, (2) insurance agent/compan	, and (3) building owner.	
COMMENTS	- 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0		
		,	Check here if attachment
SECTION E - BUILDING E	ELEVATION INFORMATION (SURVEY NOT RE	QUIRED) FOR ZONE AO AN	D ZONE A (WITHOUT BFE)
•	mplete Items E1 through E4. If the Elevation Certificate i	s intended for use as supporting ir	nformation for a LOMA or LOMR-F,
ection C must be completed.			0 17 1/ 1/
	building diagram most similar to the building for which th	s certificate is being completed —	see pages 6 and 7. If no diagram accurated
represents the building, provide a sketch	n or priotograph. <i>)</i> sement or enclosure) of the building is ft.(m)in.(c	m) 🗆 above or 🗀 helow (chec	k one) the highest adjacent grade. (Use
natural grade, if available).	Some in the state of the state	, 45575 6: 501011 (0100	
• •	s (see page 7), the next higher floor or elevated floor (ele	vation b) of the building isft.(r	n)in.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i o	on front of form.		
•	d/or equipment servicing the building is ft.(m)in.(c	m) 🔲 above or 🔲 below (ched	k one) the highest adjacent grade. (Use
natural grade, if available).	and the state of t		n floodoloin managament estimones?
	nber is available, is the top of the bottom floor elevated in local official must certify this information in Section G.	accordance with the community:	s ilooopiain management ordinance?
	FION F - PROPERTY OWNER (OR OWNER'S R	EDRESENT ATIVE) CEDTIEN	CATION
	representative who completes Sections A, B, C (Items C		
	The statements in Sections A, B, C, and E are correct to		(Williams)
<u> </u>	AUTHORIZED REPRESENTATIVE'S NAME		
PROPERTY OWNER'S OR OWNER'S A	AUTHORIZED REPRESENTATIVE'S NAME		
PROPERTY OWNER'S OR OWNER'S A	AUTHORIZED REPRESENTATIVE'S NAME		STATE ZIP CODE
PROPERTY OWNER'S OR OWNER'S A			STATE ZIP CODE TELEPHONE
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PROPERTY OWNER'S OR OWNER'S A ADDRESS SIGNATURE COMMENTS The local official who is authorized by law or certificate. Complete the applicable item(s) of local law to certify elevation information in Section C was to a critical completed Section of local law to certify elevation information. The following information (Items G4) of the following information (Items G4). This permit has been issued for: Nection of as-built lowest floor (including). BFE or (in Zone AO) depth of flooding a LOCAL OFFICIAL'S NAME COMMUNITY NAME	SECTION G - COMMUNITY INFORM r ordinance to administer the community's floodplain man and sign below. aken from other documentation that has been signed and rmation. (Indicate the source and date of the elevation d ction E for a building located in Zone A (without a FEMA- 1-G9) is provided for community floodplain management G5. DATE PERMIT ISSUED ew Construction Substantial Improvement ing basement) of the building is:	ATION (OPTIONAL) nagement ordinance can complete at a in the Comments area below.) issued or community-issued BFE; purposes. G6. DATE CERTIFICATE C ft.(m)ft.(m) TITLE TELEPHONE	TELEPHONE Check here if attachment e Sections A, B, C (or E), and G of this Elever, engineer, or architect who is authorized to or Zone AO. F COMPLIANCE/OCCUPANCY ISSUED Datum: