FPUP 06-186E POUPDIGO2 U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

## **ELEVATION CERTIFICATE**



OMB No. 1660-0008 Expires February 28. 2009

Important: Read the instructions on pages 1-8.

National Flood Insurance Pro	gram	Important:	Read the in	structions	on pag	es 1-8.		)
			ION A - PRO	PERTY IN	ORMAT	TION	For Insurance C	Company Use:
A1. Building Owner's Name Burtman, Svetlana							Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4287 E. River Road								Number
City Tucson State	AZ ZIP Code	35718						
A3. Property Description (L Tax Code: 110-02-001N		bers, Tax Parcel Nu ange 14 E., section		escription, e	tc.)			25
<ul> <li>A4. Building Use (e.g., Res</li> <li>A5. Latitude/Longitude: Lat</li> <li>A6. Attach at least 2 photog</li> <li>A7. Building Diagram Numil</li> <li>A8. For a building with a craan</li> <li>a) Square footage of cr</li> <li>b) No. of permanent flowenclosure(s) walls w</li> <li>c) Total net area of floor</li> </ul>	. <u>32.278580</u> Lon graphs of the build ber <u>1</u> awl space or enclo awl space or enclo od openings in the ithin 1.0 foot abov	g. <u>-110.901362</u> ling if the Certificate sure(s), provide osure(s) e crawl space or e adjacent grade		to obtain floo A9. For a a) Sq b) No walls	od insurar building uare foota of perma within 1.	Horizontal D nce. with an attached g age of attached ga	arage ngs in the attached cent grade	<u>960</u> sq ft
	SECT	ON B - FLOOD I	NSURANCE	RATE MAR	P (FIRM)	INFORMATION	N	
B1. NFIP Community Name & Community Number B2. County Na Pima County / 400073 Pima County				me	B3. State AZ			
B4. Map/Panel Number 04019C 1644	B5. Suffix K	B6. FIRM Index Date 2/8/99		FIRM Panel e/Revised D 2/8/99	ate	B8. Flood Zone(s) X	AO, use ba	d Elevation(s) (Zone ase flood depth) 2436.0
10. Indicate the source of t			or base flood de		in Item B		2	430.0
<ol> <li>Is the building located Designation Date <u>N/A</u></li> <li>Building elevations are to *A new Elevation Certific</li> <li>Elevations – Zones A1-A below according to the to Benchmark Utilized <u>PC</u></li> </ol>	SECTION based on: [ cate will be require A30, AE, AH, A (w building diagram s -COT "br13" Vert	C - BUILDING E Construction Draw d when constructio ith BFE), VE, V1-V3 pecified in Item A7.	CBRS CEVATION I wings* n of the building 30, V (with BFE	OP/ NFORMAT	A ION (SU Under C	IRVEY REQUIR onstruction*	Finished Cor	
Conversion/Comments	N/A				Ch	eck the measurer	mentused	
a) Top of bottom floor	(including basem	ent, crawl space, or	enclosure floo	r) 2437.02		meters (Puer		
b) Top of the next higher floor				N/A		meters (Puer		
<ul> <li>Bottom of the lowest horizontal structural member (V Zones only)</li> <li>Attached garage (top of slab)</li> </ul>				<u>N/A</u> 2437.02		meters (Puer		
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)</li> </ul>				2437.02		meters (Puer		
f) Lowest adjacent (finished) grade (LAG)			2436.4		meters (Puer			
g) Highest adjacent (f	inished) grade (H/	AG)		2436.6	K feet	meters (Puer	to Rico only)	
This certification is to be sig information. <i>I certify that th</i> <i>I understand that any false</i>	ned and sealed b e information on ti statement may be	his Certificate repres punishable by fine	ngineer, or arc sents my best of	hitect author	ized by la	w to certify elevat data available.		ALAN ONE
Certifier's Name Todd Hou	t			License Nu	Imber AZ	RLS 35543	BE	36543 O
Title Owner		Company Nar	ne Polaris Lar	nd Surveying			18	HOUT
Address 3528 N, Flowing V	Vells Rd.	City Tucson		State AZ	ZIP Co	de 85705	10	ande
Signature	able	Date 6-9.08	Telepho	ne (520) 323	2-6400		GYPIR	312.31-09
grann u,	Nam	6-7.00						

IMPORTANT: In these space	es, copy the corresponding infor	mation from Section A	F	or Insurance Company Use:
	Apt., Unit, Suite, and/or Bldg. No.) or P			olicy Number
4287 E. River Road City Tucson State AZ ZIP Code		ompany NAIC Number		
City rucson state AZ ZIP COde				
SECT	TION D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTIFIC	ATION (CONTI	NUED)
Copy both sides of this Elevation	Certificate for (1) community official, (2)	insurance agent/company, and (	3) building owner.	
Comments C2b) no next higher i elevation; Inwest Adjacent Natura	floor; C2c) not a "V Zone", C2e) lowest r al Grade = 2433.1, Highest Adjacent nat	machinery servicing building is th tural Grade = 2436.4 6-9-0 3	e A/C unit, all oth	er machine is at or above this
Signature		Date	19 19 19 19 19 19	
	ELEVATION INFORMATION (SUR		ZONE AO AND	Check here if attachment
SECTION E - BUILDING	ELEVATION INFORMATION (SUR	TET NOT REQUIRED FOR	LUITE AU ANL	
<ul> <li>E1. Provide elevation information grade (HAG) and the lowes a) Top of bottom floor (inclue) b) Top of bottom floor (inclue) Top of bottom floor (inclue) Top of bottom floor (inclue) For Building Diagrams 6-8 (elevation C2.b in the diagrest (elevation C2.b in the diagrest) Attached garage (top of slatest) Top of platform of machinest E5. Zone AO only: If no flood of the statest of the</li></ul>	tural grade, if available. Check the mean on for the following and check the appro- st adjacent grade (LAG). Uding basement, crawl space, or enclosu with permanent flood openings provided rrams) of the building is [ ib) is feet met ry and/or equipment servicing the building depth number is available, is the top of the No Unknown. The local official met	priate boxes to show whether the ure) is [feet [ ure) is [feet [ in Section A Items 8 and/or 9 (so feet meters above or ers above or below the ng is [feet r ne bottom floor elevated in accord	e elevation is abov meters abov meters abov ee page 8 of Instru- below the HA HAG. meters above dance with the cor	ve or _ below the HAG. ve or _ below the LAG. uctions), the next higher floor G.
Contraction of the section				171011
	TION F - PROPERTY OWNER (OR	The second s	CARL AND DESCRIPTION OF AND	
	uthorized representative who completes statements in Sections A, B, and E are horized Representative's Name			issued or community-issued BFE)
these the	inonized Representative s Hame			
Address	and the second second second	City	State	ZIP Code
Signature		Date	Telephone	Landars adda to ment
Comments	ET? ine		auto a series a series a	we superint and the providence of the
<u> </u>			19 (19 (19 (19 (19 (19 (19 (19 (19 (19 (	n wear a salas - geologica da marca -
			de la construction de la	Check here if attachme
· · · · · · · · · · · · · · · · · · ·		NITY INFORMATION (OPTIC		
	by law or ordinance to administer the co Complete the applicable item(s) and sig			
	on C was taken from other documentation			
	ertify elevation information. (Indicate the			
32. A community official com	npleted Section E for a building located i	n Zone A (without a FEMA-issue	d or community-is	sued BFE) or Zone AO.
3. The following information	n (Items G4G9.) is provided for commu	nity floodplain management purp	oses.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Certi	ficate Of Complian	nce/Occupancy Issued
7. This permit has been issued for	or: New Construction	Substantial Improvement		
	or (including basement) of the building:	feet meters	e (PR) Datum	
i9. BFE or (in Zone AO) depth of t	Construction of the second state of the second state of the	leet I meters		
	incoding at the building site.		S (i Tt) Datam	icha an influence and influence
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments				and the second
CAPIRE DIA OF		and the faith of the	Carlos Dates	111 Kel
		60.4.9	0.1	

Check here if attachments

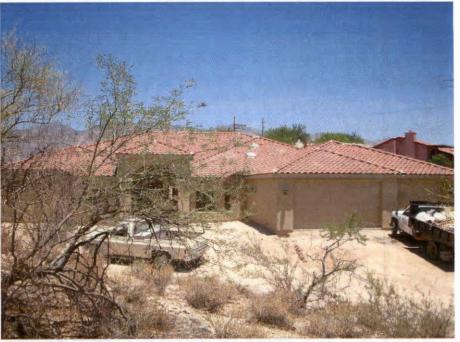
Replaces all previous editions

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4287 E. River Road	Policy Number
City Tucson State AZ ZIP Code 85718	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.

## FRONT VIEW



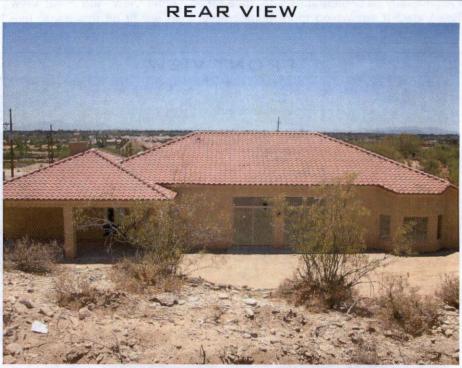
LEFT SIDE VIEW



## Building Photographs Continuation Page

For Insurance Company Use:
Policy Number
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."



RIGHT SIDE VIEW

