FPUP# 07-385E

P0 7 CP 05017

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

National Flood Insurance P	3.4		Read the instructions on page	,	April and a Section of Section 19 201
A1. Building Owner's Name				For Insurance Company Use:	
Galad Investments LLC				Policy Number	
A2. Building Street Address 850S Camino Verde	ess (including Apt.,	Unit, Suite, and/or Blo	dg. No.) or P.O. Route and Box No.	ensited (1) not est	Company NAIC Number
City Tucson	\el		State AZ	tell at (o.82)	ZIP Code 85757
A3. Property Description Γax Code 210-18-2290	(Lot and Block Nu Township	mbers, Tax Parcel Nu 15 Range 12	mber, Legal Description, etc.) Section 10	ome Base	אופר אמו דבור וא זו פל
A4. Building Use (e.g., R	esidential, Non-Re	sidential, Addition, Acc	cessory, etc.) Residential: Mar	ufactured Ho	me Replacement
A5. Latitude/Longitude: L	_at. 32.1452	Long	111.1063	Horizontal I	Datum: NAD 1927 X NAD 1983
A7. Building Diagram Nur A8. For a building with a a) Square footage o b) No. of permanent	mber 5 crawl space or end of crawl space or er t flood openings in s within 1.0 foot ab	closure(s), provide: nclosure(s) the crawl space or ove adjacent grade _	NA sq ft a) Squa b) No. 0 walls	ilding with an atta are footage of atta of permanent floo within 1.0 foot a	ached garage, provide: ached garage d openings in the attached garage bove adjacent grade NA sq ft
pool raduid bein si	SECT	TION B - FLOOD IN	ISURANCE RATE MAP (FIRM	INFORMATIO	22. For Building Olagrams 6-8 with pN
R1 NFIP Community Nam	ne & Community N		32. County Name	en gestallus bril	B3. State
Pima County / 040073	3		Pima County		AZ
B4. Map/Panel Number 04019C 2225	B5. Suffix	B6. FIRM Index Date 2/8/99	B7. FIRM Panel Effective/Revised Date 2/8/99	B8. Flood Zone(s) AO1	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
Designation Date N/	d in a Coastal Barri A		1929 NAVD 1988 X C (CBRS) area or Otherwise Protect	ed Area (OPA)?	Highest Adjacent Natural Grade Yes X No
Designation Date_N/.	SECTION be based on:	N C - BUILDING EL	CBRS) area or Otherwise Protect CBRS OPA LEVATION INFORMATION (SU Building Under Cons	ed Area (OPA)?	Yes X No
C1. Building elevations are *A new Elevation Certifications E2. Elevations – Zones A1 below according to the	SECTION be based on: ficate will be require 1-A30, AE, AH, A (vertical building diagrams seconds)	N C - BUILDING EL Construction Drawings ed when construction with BFE), VE, V1-V30 specified in Item A7.	CBRS) area or Otherwise Protect CBRS OPA EVATION INFORMATION (SU Building Under Consofthe building is complete.	RVEY REQUII	☐ Yes 🗓 No RED) X Finished Construction H, AR/AO. Complete Items C2.a-g
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Designation Date N/ 21. Building elevations are *A new Elevation Certif 22. Elevations – Zones A1 below according to the Benchmark Utilized Conversion/Comments a) Top of bottom floor	SECTION be based on: fificate will be required in the second of the se	N C - BUILDING EL Construction Drawings ed when construction with BFE), VE, V1-V30 specified in Item A7.	C(CBRS) area or Otherwise Protect CBRS OPA EVATION INFORMATION (SL s* Building Under Cons of the building is complete. 0, V (with BFE), AR, AR/A, AR/AE, A FFE Vertical Datum Checkenclosure floor)	PRVEY REQUIREMENT AR/A1-A30, AR/A SSUMED Beck the measure Feet measure	Yes X No RED) Finished Construction H, AR/AO. Complete Items C2.a-g 100.00 ON FFE ment used. ters (Puerto Rico only)
Designation Date N/ 21. Building elevations are *A new Elevation Certic 22. Elevations – Zones A1 below according to the Benchmark Utilized Conversion/Comments a) Top of bottom floo b) Top of the next his	SECTION be based on: fificate will be required. 1-A30, AE, AH, A (we building diagram selected. DATURES. or (including basemore).	N C - BUILDING EL Construction Drawings ed when construction with BFE), VE, V1-V30 specified in Item A7.	C(CBRS) area or Otherwise Protect CBRS OPA EVATION INFORMATION (SU s* Building Under Cons of the building is complete. 0, V (with BFE), AR, AR/A, AR/AE, A FFE Vertical Datum Cherclosure floor)	RVEY REQUII Struction* AR/A1-A30, AR/A SSUMED leck the measure feet me	Yes X No RED) Finished Construction H, AR/AO. Complete Items C2.a-g OO ON FFE ment used. Iters (Puerto Rico only) Iters (Puerto Rico only)
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FPI	IP	# 1	n.	7_3	R	SF.
L. I.		<i>TT</i> 1		-	O.	31

P0 7 CP 05017

	s, copy the corresponding information f		For Insurance Company Use:
5850S Camino Verde	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route	and Box No.	Policy Number
City Tucson	State	ZIP Code 85757	Company NAIC Number
SECTI	ON D - SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICATION (CO	ONTINUED)
	ertificate for (1) community official, (2) insurance	e agent/company, and (3) building o	wner.
Comments The lowest service equip	ment (C3.e) is the and the		is/are above this elevation.
WATER HEATER INSID	e home BASE eleVATION 1	00.00 BOT	Tom of electric meter
Lowest STRUCTU	nal member 98.6	eleVATION i	s 99.1 + ToP is 101.9
thed Sturm	iolo	7/10/87	Check here if attachments
SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
 E1. Provide elevation information grade (HAG) and the lowest a a) Top of bottom floor (includ b) Top of bottom floor (includ b) Top of bottom floor (includ celevation C2.b in the diagram E3. Attached garage (top of slab) E4. Top of platform of machinery E5. Zone AO only: If no flood delevation Garage (top of slab) 	ing basement, crawl space (name) is	es to show whether the elevation is feet meters meters meters meters ove or below to the HAG. feet meters meters meters feet	above or below the highest adjacent above or below the HAG. above or below the LAG. Instructions), the next higher floor the HAG. above or below the HAG.
SECTI	ON F - PROPERTY OWNER (OR OWNER	R'S REPRESENTATIVE) CERT	TFICATION
The property owner or owner's auth	norized representative who completes Sections A	A, B, and E for Zone A (without a FE	
or Zone AO must sign here. The st Property Owner's or Owner's Author	tatements in Sections A, B, and E are correct to	the best of my knowledge.	ter nor beaut muses nanswise easepair : 1 I terimo D a ni basesa jacoba d call at - S
	A35 C 430		Outspreading Distr. N.A.
Address	City	State	ZIP Code
Signature	Da e	Teleph	one ment as another guiller
Comments	SIA N. KENA, K. SENAS-ASO, ARRAS, AN	A (with BFIE)	Elevations - Zenes At-A30, AE, Att.
ATT NO DON	Vertical Distant A SSUM etc 100	Tion - 100.00 ON FEE	Check here if attachmer
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	Check here if attachmen
he local official who is authorized by	y law or ordinance to administer the community's	s floodplain management ordinance	can complete Sections A, B, C (or E),
	complete the applicable item(s) and sign below. C was taken from other documentation that has		
is authorized by law to cert	ify elevation information. (Indicate the source ar	nd date of the elevation data in the	Comments area below.)
	leted Section E for a building located in Zone A (ity-issued BFE) or Zone AO.
	Items G4G9.) is provided for community floodp	(alpament	Lessel elevation of machinery of the company o
G4. Permit Number FPUP# 07-385E	G5. Date Permit Issued	G6. Date Certificate Of Con	npliance/Occupancy Issued
7. This permit has been issued for:	☐ New Construction ☐ Substantial In	nprovement	and the property of the state o
	(including basement) of the building:	feet meters (
9. BFE or (in Zone AO) depth of flo	oding at the building site:	leet lemeters ((PR) Datum
Local Official's Name	1001 notices out to 2.0 at 100ns is an	Title	and here the same has been been sent to the first the same of the
Community Name		Telephone	elevery on strengton hard seed by
Signature	Come Number RLS 13-53.7	Date	CAUTE COST TURN
Comments	ON LAND SURVEYING INC	N.T. Company Harris P. C. S. S.	VICE PRESIDE
6 50	SET 10 COM 85710	ST ON TOESON	82 M E 22"
NAME OF THE PERSON OF THE PERS	7 Tomme Dr. 298 3205	0/01/2	Check here if attachmen

Building PhotographsContinuation Page

			For Insurance Company Use:
Building Street Address (including	Policy Number		
5850 SO. CAMIN	10 Verde		
City	State	ZIP Code	Company NAIC Number
lucson	ARIZ	85757	

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."



REAR



RIGHT Sive

Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (i	Policy Number		
5850 50	. CAMINO Verpe	Trous and Don tro.	
City	State	ZIP Code	Company NAIC Number
lucson	ARIZ	85757	

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



LefT