FPUP# 09-435E

P 09 CP 04364

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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program Important: Read the instructions on pages 1-9.	
SECTION A - PROPERTY INFORMATION F	or Insurance Company Use:
A1. Building Owner's Name Jordan, DeAnna	olicy Number
The state of the s	ompany NAIC Number
City Tucson State AZ ZIP (Code 85743
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Code 211-11-019C Township 14 Range 11E Section 04 PTN S165.20' W584.29' E659.29	' S2 N2 NE4 SE4
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential: Manufactured Home	
A5. Latitude/Longitude: Lat. 32.239268 Long111.218570 Horizontal Datum A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	: NAD 1927 X NAD 1983
A7. Building Diagram Number 6	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) A9. For a building with an attached an actual square footage of attached an actual square footage of attached square footage of attac	
b) No. of permanent flood openings in the crawlspace or b) No. of permanent flood openings in the crawlspace or b)	
enclosure(s) within 1.0 foot above adjacent grade 26 within 1.0 foot above adjacent	
c) Total net area of flood openings in A8.b sq in c) Total net area of flood open	
d) Engineered flood openings? Yes No	? Yes No
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1. NFIP Community Name & Community Number Pima County / 040073 B2. County Name Pima County	State AZ
	39. Base Flood Elevation(s) (Zone
04019C 2250 L Date Effective/Revised Date Zone(s) X 10	AO, use base flood depth)
	30.3
Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) #46 Sheet Flood Map	ping (08/2007)
The folia Continuity Determined Continuity	est Adj. Nat. Grade (=100 ft)
	Yes X No
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date N/A CBRS OPA	Tes X No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: Construction Drawings* Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete.	nished Construction
C2. 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, AI	R/AO. Complete Items C2.a-h
below according to the building diagram specified in Item A7. Use the same datum as the BFE.	
Benchmark Utilized ADJACENT EXISTING GROUND Vertical Datum ASSUMED 100.00	
Conversion/Comments N/A	
a) Top of bottom floor (including basement crawlspace or enclosure floor) Check the measurement 100.0 X feet meters (
102.2 🔻	Puerto Rico only)
N/A V	Puerto Rico only)
, , , , , , , , , , , , , , , , , , , ,	Puerto Rico only)
d) / titorica garage (top or state)	Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building	Puerto Rico only)
00.0 == ==	Puerto Rico only)
4000	Puerto Rico only)
	Puerto Rico only)
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 on this Certificate represents my best efforts to interpret the data available.	STIFICAT
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	10/10
✓ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes ✓ No	PL 17927 QEOYD W.
Certifier's Name LLOYD W. ROGERS, P.E. License Number 17927	ROGERS
Title Company Name	1 1/3 /11/1/2/2011

Signature

ZIP Code 85704

Telephone 520-888-8533

City TUCSUN

Date 5/14/2012

EXPIRES 03/31/20

IMPORTANT: In these spaces, cop	y the corresponding information from	n Section A.	Fo	r Insurance Company Use:
Building Street Address (including Apt., Ur 1609 N. Sandario Rd.	nit, Suite, and/or Bldg. No.) or P.O. Route and	d Box No.	Po	licy Number
City Tucson	State	ZIP 8574		ompany NAIC Number
SECTION D	- SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICAT	ION (CONTIN	UED)
Copy both sides of this Elevation Certificat	te for (1) community official, (2) insurance ag	ent/company, and (3) I	building owner.	
Comments The lowest service equipment (C3.e) is theA/C (103.3) an	d the _HOT WATER H	EATER (103.3)	
Highest adjacent natural grade is100.0_	Lowest adjacent natural		<u> </u>	
Lowest	Structual Membe	r = 101.8		
				,
Signature	Date	5/14/2012		Check here if attachmen
SECTION E - BUILDING ELEVA	MON INFORMATION (SURVEY NOT F	EQUIRED) FOR ZO	ONE AO AND	ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural grade E1. Provide elevation information for the grade (HAG) and the lowest adjacer		d. In Puerto Rico only	, enter meters.	
a) Top of bottom floor (including bas b) Top of bottom floor (including bas E2. For Building Diagrams 6-9 with pern (elevation C2.b in the diagrams) of t	sement, crawlspace of losure) isnanent flood openir gs page 1 Section A	et me		or below the LAG.
	equipment servicire the building is available, is the top of the bottom floor Jnknown. The local official must certify this is	fe more elevated in accordance	eters above	
	- PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE	E) CERTIFICA	TION
	1.0 1.0 1.0 1.0 1.0			
The property owner or owner's authorized	representative who completes Sections A, E ints in Sections A, B, and E are correct to the Representative's Name			ssued or community-issued BFE)
The property owner or owner's authorized or Zone AO must sign here. <i>The statement</i>	nts in Sections A, B, and E are correct to the			ziP Code
The property owner or owner's authorized or Zone AO must sign here. <i>The statemen</i> Property Owner's or Owner's Authorized F	nts in Sections A, B, and E are correct to the Representative's Name			
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