ELEVATION CERTIFICATE

5/4/10

OMB No. 1660-0008 Expires March 31, 2012

Replaces all previous editions

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

National Flood Insurance Program

Important: Read the instructions on pages 1-9.

THE RESERVE OF THE PARTY OF THE	all the second	SECTI	ON A - PROPERTY INFO	ORMATION		For Insurance Company	Use:
A1. Building Owner's Name Jose Luis Lopez						Policy Number	
A2. Building Street Address 6430 E. Noyes #2			dg. No.) or P.O. Route and B	Box No.	1 7	Company NAIC Number	
City Tucson		0./45	State AZ	Z	ZI	P Code 85629	
A3. Property Description (L Tax Code 305-22-086F	ot and Block Nu Township		mber, Legal Description, etc. Section 7	.)			
A4. Building Use (e.g., Res	idential, Non-Re	sidential, Addition, Ac	cessory, etc.) Residential:	Manufactu	red Home		o identiti
A5. Latitude/Longitude: Lat	31.972432	Long	110.855650	Но	rizontal Dat		NAD 1983
A6. Attach at least 2 photog	raphs of the bui	ding if the Certificate	is being used to obtain flood	insurance.		E official AVE - It in CV	
A7. Building Diagram Numb A8. For a building with a cra	per	a a u ra (a):				and the second second second	
a) Square footage of c	rawispace or end	closure(s)	. / -	or a building with Square foota			a sq ft
b) No. of permanent fl	ood openings in	the crawlspace or				penings in the attached g	arage
enclosure(s) within			J/A	within 1.0 foo	t above adja	acent grade	+
 c) Total net area of flo d) Engineered flood or 				Total net area			1 sq in
a) Engineered nood of		4		Engineered f		gs? Yes No	
B1. NFIP Community Name			SURANCE RATE MAP (FIRM) INFOR		With \$2.8 In the diagram	
Pima County / 040073	& Community N	umber	2. County Name Pima C	ounty	B	3. State AZ	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index	B7. FIRM Panel	B8.	Flood	B9. Base Flood Elevatio	n(s) (Zone
04019C 3450	K	Date 2/8/99	Effective/Revised Date		ne(s)	AO, use base flood	
310 Indicate the source of th	a Page Flood Fl		2/8/99		X	0.5	
310. Indicate the source of the							
		Community Determine			YY.	1	10. 1
311. Indicate elevation datum	n used for BFE ii	i Item B9: I NGVD	1929 NAVD 1988	X Other (De	scribe) HIS	thest Adjacent Natura	al Grade
312. Is the building located in Designation Date N/A	a Coastal Barri	er Resources System		Protected Area	(OPA)?	Yes X No	
Designation Date 11/11			_ CBRS COPA				
	SECTION	LC DIIII DINO FI	FIVATION DIFFORMATION				_
		C - BUILDING EL	EVATION INFORMATIO	N (SURVEY	REQUIRE	0)	
C1. Building elevations are ba	ased on:	Construction Drawings	* Building Unde	r Construction*	X	Finished Construction	
A new Elevation Certifica	ate will be require	ed when construction	of the building is complete.				
C2. Elevations – Zones A1-A	30, AE, AH, A (W	nth BFE), VE, V1-V30	, V (with BFE), AR, AR/A, AF Use the same datum as the E	R/AE, AR/A1-A	30, AR/AH, A	AR/AO. Complete Items (C2.a-h
Benchmark Utilized	HANG	pecilied in item A7.		atum Loca	2 110	Comment of the Commen	
Conversion/Comments	HANG =	195 BF	E = 100.0	atum_200A	12 7755	DIN(L)	
1000	AD Uniol SU		- 100,0	Check the	measureme	nt used.	
a) Top of bottom floor (including basem	ent, crawlspace, or er	closure floor) 102	5 X feet		(Puerto Rico only)	
b) Top of the next higher		one, oramopass, or cr	N.	X feet		(Puerto Rico only)	
		ural member (V Zone	s only) N	A X feet		(Puerto Rico only)	
d) Attached garage (top		anso mag namengar		A X feet		(Puerto Rico only)	
e) Lowest elevation of r	machinery or equ	ipment servicing the	ouilding 101	ZX feet		(Puerto Rico only)	
(Describe type of equ	uipment and loca	tion in Comments)		24 1001		(I delto Itico omy)	
f) Lowest adjacent (fini			98	8 X feet	meters	(Puerto Rico only)	
g) Highest adjacent (fin			99	5 X feet		(Puerto Rico only)	
		ation of deck or stairs		/ X feet		(Puerto Rico only)	
structural support		THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	ndicate highest and lowest NATURAL		omments	1.50 (B)(B) (C)(A)(B)(D) (B)	38 S
This certification is to be sign	od and socied by	V D - SURVEYOR,	ENGINEER, OR ARCHIT	ECT CERTIF	FICATION	yaka burah mpianta angirakir	
This certification is to be significant information. I certify that the	information on th	is Certificate represe	nts my best efforts to interpre	of the data avail	lable	STANS	
I understand that any false st						ASS ABIOATS	SCO.
Check here il confinents	are provided on		ere latitude and longitude in ensed land surveyor?	Section A provi		28745	6
Certifier's Name	/		License Numb			- KRIS	1130
Title	ACENEN	Company Name	AZ 2874	5		WANWAGEN	VEN /
OWNER	VANWA	DENEN SUR	JEYINL			4-30-10	11
Address 17741 S. AVE. VAL	LE VERDE D		State REENUTILEY AZ	ZIP Code	4	DAIA II S	
Signature Ku Van Wa	y	Date 4-30-	10 520 250 1	521		EXCRES	3-31-13
EMA Form 81-31, Mar 09	1	See	reverse side for continuat	ion.		Replaces all previous	e editions

See reverse side for continuation.

IMPORTANT: In these spaces, cop	For Insurance Company Use:		
Building Street Address (including Apt., Un 6430 E. Noyes #2	Policy Number		
Tucson Tucson	State	ZIP Code 85629	Company NAIC Number
SECTION D	SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATION (C	ONTINUED)
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insurar	nce agent/company, and (3) building	owner.
Comments The lowest service equipment (C	C2.e) is the ELECT, PED and the	HOT WATER TANK + EU.	P COULEN is/are above this elevation
ghest adjacent natural grade is	Lowest adjacent natural	grade is 98, 8	CHICAGO S.
EWEST STRUCT MEMB		AM) is 101,0 (101,	01)
Signature / / /	765	THE RESERVE OF THE PARTY OF THE	denti canalisation in the
for Vintering	district and a second state of the second se	Date 4-30-10	Check here if attachme
SECTION E - BUILDING ELEVAT	TION INFORMATION (SURVEY N	OT REQUIRED) FOR ZONE AC	AND ZONE A (WITHOUT BEE)
For Zones AO and A (without BFE), compl and C. For Items E1-E4, use natural grad	lete Items E1-E5. If the Certificate is i e, if available. Check the measureme	intended to support a LOMA or LOMI	R-F request, complete Sections A, B,
Provide elevation information for the	following and check the appropriate b	oxes to show whether the elevation	s above or below the highest ediscent
grade (HAG) and the lowest adjacen a) Top of bottom floor (including base	t grade (LAG).	The second secon	
b) Top of bottom floor (including base	ement, crawlspace o losure) is _ ement, crawlspace o losure) is _		above or below the HAG. above or below the LAG.
	Total In The Court of the Total		labove of I lbelow the LAC
 For Building Diagrams 6-9 with perm 	anent flood openir as p. ed in Sec		
(elevation C2.b in the diagrams) of the	ne building is feet	tir (A Items 3 a r 9 (see pages 8 pages 8 pages 9 pages 9 pages 8 pages 9 page	9 of Instructions), the next higher floo
(elevation C2.b in the diagrams) of the E3. Attached garage (top of slab) is	ne building is ∫ feet	tic 1 A Items 3 a r 9 (see pages 8 ove or belo bove or belo he HAG.	9 of Instructions), the next higher floor with HAG.
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FEMA Form 81-31, Mar 09

Replaces all previous editions

Check here if attachments

FPUP# 09-520E

Building Photographs(Four Color Photographs Required)

See Instructions for Item A6.

Estimated Service Line			For Insurance Company Use:
Building Street Address (inclu	ding Apt., Unit, Suite, and/or Bldg. No.) or P.O	. Route and Box No.	Policy Number
6430 E. Noyes #2			Si manazi da silam
City Tucson	State	ZIP Code 85629	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least Four 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 on the reverse.



428-10 FRONT VIEW NORTHFACE



4-28-10 LEFT VIEW EAST FACE FPUP# 09-520E

Building Photographs Continuation Page

Building Street Address (inc 6430 E. Noyes #2	luding Apt., Unit, Suite, and/or l	Bldg. No.) or P.O). Route and Box No.	For Insurance Company Use: Policy Number
City Tucson	State	AZ	ZIP Code 85629	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."



4-28-10 REAR VIEW SOUTH FACE



4-28-10 RIGHT SIDE WEST FACE