P 10 CP 03613

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

National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expires March 31, 2012

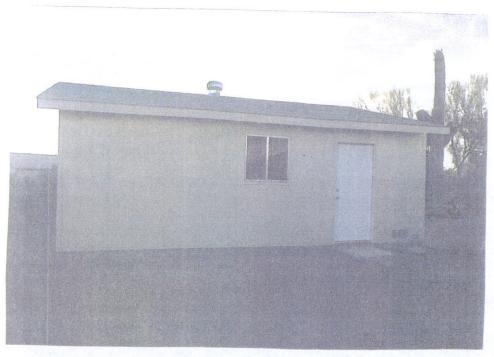
| | | SEC | TION A - PROPE | RTY INFOR | MATION | For Insurance Company Use: |
|---|--|---|--|---|---|--|
| A1. Building Owner's Name John & Debra McGinley | | | Policy Number | | | |
| A2. Building Street Ad 8469 W Quattlebaur | dress (including Apt. | | Bldg. No.) or P.O. F | Route and Box | No. | Company NAIC Number |
| City Tucson | | | 1774 | State AZ | | ZIP Code 85735 |
| A3. Property Description Tax Code 212-34-27 | on (Lot and Block Nu 80 Township | ımbers, Tax Parcel N 14 Range 12 | | | | 30730 |
| A4. Building Use (e.g., A5. Latitude/Longitude A6. Attach at least 2 pt | : Lat. 32.179268 notographs of the bu | Lo | ng111.145379 | | Horizontal | Datum: NAD 1927 X NAD 198 |
| b) No. of permane enclosure(s) w | a crawlspace or end of crawlspace or er ent flood openings in thin 1.0 foot above a of flood openings in A | nclosure(s) the crawlspace or adjacent grade | 576 sq ft 7 735 sq in | a) S b) N w c) T | building with an att equare footage of att lo. of permanent floo vithin 1.0 foot above otal net area of flood engineered flood ope | tached garage sq ft od openings in the attached garage adjacent grade d openings in A9.b |
| | SEC | TION B - FLOOD | INSURANCE RA | TE MAP (FIF | RM) INFORMATIO | ON |
| B1. NFIP Community N Pima County / 0400 | ame & Community N | | B2. County Name | Pima Cou | | B3. State AZ |
| B4. Map/Panel Numbe 04019C 2200 | B5. Suffix | B6. FIRM Index Date 2/8/99 | B7. FIRI Effective/Re | vised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |
| Designation Date_N | SECTION Te based on: | N C - BUILDING E | ELEVATION INFO | Idina I Index C | | RED) ✓ Finished Construction |
| *A new Elevation Cei C2. Elevations – Zones A below according to th Benchmark Utilized _ Conversion/Commen | tificate will be requin 1-A30, AE, AH, A (was building diagrams | ed when construction with BFE), VE, V1-V3 specified in Item A7. | n of the building is on the buil | omplete. R, AR/A, AR/AI m as the BFE. | E AD/A1 A30 AD/A | hH, AR/AO. Complete Items C2.a-h |
| 10 11 1 2 2 2 2 | | | I LIST VENTO | | Check the measure | ment used. |
| a) Top of bottom flo | or (including basem | ent, crawlspace, or e | enclosure floor) | | X feet me | ters (Puerto Rico only) |
| b) Top of the next i c) Bottom of the love | | | or that the training | N/A | X feet me | ters (Puerto Rico only) |
| d) Attached garage | (top of slah) | tural member (V Zon | ies only) | N/A | | ters (Puerto Rico only) |
| e) Lowest elevation (Describe type of the control of | of machinery or equipment and local | uipment servicing the ation in Comments) | building | N/A | | ters (Puerto Rico only) ters (Puerto Rico only) |
| f) Lowest adjacent | (finished) grade nex | t to building (LAG) | | | X feet me | ters (Puerto Rico only) |
| | (finished) grade nex grade at lowest elev t When B.9 is a depth of | kt to building (HAG) ration of deck or stair above grade, it is required to | rs, including | N/A | | ters (Puerto Rico only) ters (Puerto Rico only) |
| | SECTIO | N D - SURVEYOR | , ENGINEER, OF | ARCHITEC | T CERTIFICATIO | ON |
| This certification is to be information. I certify that | signed and sealed by the information on the | y a land surveyor, en nis Certificate represi | ngineer, or architect | authorized by | law to certify elevati | ion RED LAND 88 |
| I understand that any fals Check here if comme | nts are provided on | back of form. | | ngitude in Sec | tion A provided by a | (6)/0 404/4 9 131 |
| Certifier's Name | s Padilla | Company Name | | nse Number | 16474 | CARLOS O PADILLA |
| Address 1830 E. | INCIDAL | City 124 | AA Surve | 2) 1 | ZIP Code 8571 | SIGNED AND ON A U.S. D. |
| Signature | 1016 | Date 7/ | 70 Tele | -1- | -981-155 | 3 Expines 6:30.201 |
| EMA Form 81-31, Mar | 09 | See | reverse side for | | | Replaces all previous editions |

| IMPORTANT: In these spaces, copy the co | rresponding information from Section A. | For Insurance Company Use: |
|--|--|--|
| Building Street Address (including Apt., Unit, Suite, a 8469 W Quattlebaum Dr | Policy Number | |
| City Tucson | State | ZIP Code Company NAIC Number |
| SECTION D - SURVE | YOR, ENGINEER, OR ARCHITECT CERTIFI | CATION (CONTINUED) |
| Copy both sides of this Elevation Certificate for (1) c | | |
| Comments The lowest service equipment (C2.e) is the | 6 \ / A | |
| Highest adjacent natural grade is [O, O] | Lowest adjacent natural grade is | is/are above this elevat |
| | | |
| 1 | | |
| Signature | Date 7/70/ | |
| SECTION E PUN DING EL EVA TION INTE | 1/29/10 | Check here if attachm |
| SECTION E ABBILDING ELEVATION INF | ORMATION (SURVEY NOT REQUIRED) FO | R ZONE AO AND ZONE A (WITHOUT BFE) |
| For Zones AO and A (without BFE), complete Items and C. For Items E1-E4 use natural grade if availa | E1-E5. If the Certificate is intended to support a LC | MA or LOMR-F request complete Sections A. R. |
| or to nome ET-ET, use natural grade, il avalla | ble. Check the measurement used. In Puerto Rico | only, enter meters |
| E1. Provide elevation information for the following a grade (HAG) and the lowest adjacent grade (L | and check the appropriate boxes to show whether the | e elevation is above or below the highest adjacen |
| a) Top of bottom floor (including basement, cra | wispace nclosure is | meters above or below the HAG. |
| b) Top of bottom floor (including basement, cra | wlspace o losure) iset [| meters above or below the LAG. |
| E2. For Building Diagrams 6-9 with permanent floo (elevation C2.b in the diagrams) of the building | | see pages 8-9 of Instructions), the next higher floo |
| E3. Attached garage (top of slab) is | | or ∐ below the HAG. HAG. |
| E4. Top of platform of machinery and/or equipment | servicing the building is | meters Dabove or Dhelow the HAG |
| E5. Zone AO only: If no flood depth number is ava | lable, is the top of the bottom floor elevated in accordance | dance with the community's floodolain management |
| ordinance? Yes No Unknown. | The local official must certify this information in Secti | on G. |
| SECTION F - PROPER | RTY OWNER (OR OWNER'S REPRESENTA | TIVE) CERTIFICATION |
| The property owner or owner's authorized representa or Zone AO must sign here. The statements in Section | tive who completes Sections A, B, and E for Zone A | (without a FEMA-issued or community-issued BF |
| Property Owner's or Owner's Authorized Representat | ive's Name | dge. |
| CX DX PRY L' LIMBY, emA | NO 5 Name | |
| Address | City | State ZIP Code |
| Signature | Dat | Telephone |
| Comments | 50 | relephone |
| Comments | | |
| | | |
| SECTI | ON G - COMMUNITY INFORMATION (OPTIC | Check here if attachm |
| he local official who is authorized by law or ordinance | to administer the community's floodplain management | nt adiabase and a second of Continuous Conti |
| nd G of this Elevation Certificate. Complete the applic | able item(s) and sign below. Check the measurement | ent ordinance can complete Sections A, B, C (or E) ent used in Items G8 and G9. |
| 1. The information in Section C was taken from | other documentation that has been signed and seal | ad by a licensed supresser analysis |
| To ded to the law to defutly elevation inform | ation. (indicate the source and date of the elevation | data in the Comments area below.) |
| The state of the s | a building located in Zone A (without a FEMA-issue | d or community-issued BFE) or Zone AO. |
| | ovided for community floodplain management purpo | ses. |
| G4. Permit Number FPUP# 10-288E G5. Date Permit Number FPUP# 10-288E | rmit Issued G6. Date Certif | icate Of Compliance/Occupancy Issued |
| 7. This permit has been issued for: New Constru | | |
| Elevation of as-built lowest floor (including basement) | A) (# 1 ## | |
| BFE or (in Zone AO) depth of flooding at the buildi | | meters (PR) Datum |
| Community's design flood elevation | | meters (PR) Datum |
| y a saight more distance. | feet | meters (PR) Datum |
| Local Official's Name Francisco Ran | nirer Title Sr. CE | A RESIDENCE OF THE PROPERTY OF |
| Community Name | Telephone | |
| Signature - 1 | FCD 24: | 3-1800 |
| t. Ranney | Date 8 / 6 / | 10 |
| Comments Spoke with survey | | 1 11 1 |
| 300000 | regarding of 1. He ST | ites it should be IA. |
| 1984 1982 1 | | Landing to the second second to the second s |
| | | |
| | | Check here if attachme |

Building Photographs (Four Color Photographs Required) See Instructions for Item A6.

| Building Street Address (incl 8469 W Quattlebaum Dr | For Insurance Company Use: Policy Number | | |
|--|--|-------------------|---------------------|
| City Tucson | State AZ | ZIP Code 85735 | 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

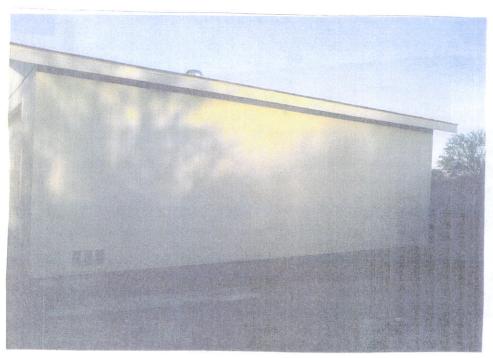


LEFT SIDE VIEW

Building Photographs (Four Color Photographs Required) See Instructions for Item A6.

| Ruilding Street Address (inch. | I. A. III. | | For Insurance Company Use: |
|---------------------------------|---------------|----------|----------------------------|
| Building Street Address (includ | Policy Number | | |
| 8469 W Quattlebaum Dr | | | |
| City | State | ZIP Code | Company Naight 1 |
| Tucson | AZ | | Company NAIC Number |
| | | 85735 | |

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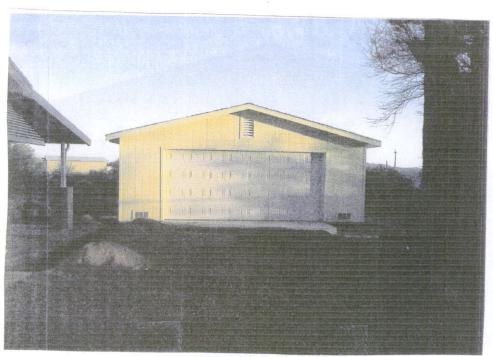


RIGHT SIDE VIEW

Building Photographs (Four Color Photographs Required) See Instructions for Item A6.

| Building Street Address (inch | For Insurance Company Use: | | |
|----------------------------------|----------------------------|----------|---------------------|
| Building Street Address (include | Policy Number | | |
| 8469 W Quattlebaum Dr | | | |
| City Tucson | State | ZIP Code | Company NAIC Number |
| | PARA | 85735 | |

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FRONT VIEW

Building Photographs (Four Color Photographs Required) See Instructions for Item A6.

| Building Street Address (incl | uding Apt., Unit, Suite, and/or Bldg. No.) or P.O | . Route and Box No | For Insurance Company Use: Policy Number |
|-------------------------------|---|--|--|
| 8469 W Quattlebaum Dr City | | THE STATE OF THE S | oloy Northbar |
| Tucson | State | ZIP Code 85735 | Company NAIC Number |

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REAR VIEW