



Floodplain Use Permit- Case History

RECORD: P21FC00023

Building/Floodplain Use Permit

Case Name:SFR

Issue: Single Family Residence

1/11/2021 Application Intake - Submitted: Application successfully submitted

Case Reviewer:Gail Kroth

1/15/2021 Review - Note: permit for an SFR in a 0.5 ft sheet flow. no other floodplain factors on site

Case Reviewer:Philip Calabrese

1/15/2021 Review - Note: project has an approved model home plan that I've put in the efile. It appears to have been designed with the floodplain in mind as it shows the home elevated and the footer deep enough

Case Reviewer:Philip Calabrese

1/15/2021 Review - Note: Only eidt Im seeing is they need to raise the FFE a little to take into account the step down in the garage. Already confirmed with FR that orientation is ok since the footer only needs to be 18" all around the home

Case Reviewer:Philip Calabrese

1/15/2021 Review - Note: Given go ahead to adjust the FFE. Will finish this permit up

Case Reviewer:Philip Calabrese

1/15/2021 Review - Note: permit up for approval. not sure on el cert if we should call out the surveyor number our just depth. Also was not sure if it would be community determined with the surveyor or not.

Case Reviewer:Philip Calabrese

1/15/2021 Review - Note: Phil, lets discuss this review. Sheet A3.0 doesn't demonstrate FFE at or above the RFE.

Case Reviewer:Francisco Ramirez



1/19/2021 Review - Approved: FPUP approved. D1FC1 plan set uploaded to DSD plan review folder.
Case Reviewer:Francisco Ramirez

1/19/2021 Issuance - Note: applicant emailed approval
Case Reviewer:Philip Calabrese

1/25/2021 Issuance - Issued - Documents Required: permit issued. elcert and covs to be returned
Case Reviewer:Philip Calabrese

1/26/2021 Inspection - Note: 1/20/21 WAITING FOR GENERAL COV AND EL CERT TO BE RETURNED.
Case Reviewer:Deanna Reyes

2/16/2021 Inspection - Note: E-copy of P2S El Cert; 4 photos not dated & surveyor did not sign seal. E-m applicant list of revisions to make, and requested e-copy of revised El Cert to review.
Case Reviewer:Edward Eastburn

2/16/2021 Inspection - Note: P2S Elevation Certificate (e-copy) reviewed, OK, FFE to be above the RFE on a backfilled stem wall. E-mailed applicant to mail to EPE the original P2S El Cert. Awaiting the return of the P2F & completed covenants.
Case Reviewer:Edward Eastburn

2/23/2021 Inspection - Note: Orig P2S El Cert received.
Case Reviewer:Edward Eastburn

5/10/2021 Inspection - Documents Approved: Approved e-copy of P2F Elevation Certificate. El Cert shows FFE, SE & garage FF above the RFE on bk-filled stem wall. E-m surveyor to mail EPE original El Cert.
Case Reviewer:Edward Eastburn

5/10/2021 Close Out - Note: E-m applicant requesting orig covs be mailed to the District. P2F hold in-place for return of covs.
Case Reviewer:Edward Eastburn

7/14/2021 Close Out - Note: GENERAL COVENANT RETURNED AND RECORDED 5/25/21
Case Reviewer:Debbie Grijalva

4/28/2026 Close Out - Note: all documentation returned. ok to close out



Case Reviewer:Philip Calabrese

4/28/2026 Close Out - Complete: No Comments

Case Reviewer:Valerie Gonzales

FPUP # P21FC00023
 DSD # P21BP00206

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Rev #2
 HR 5/10/21

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name John & Vickie Hoffman				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr				Company NAIC Number:	
City Marana		State Arizona		ZIP Code 85653	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Taxcode: 208270030 Township 12S Range 10E Section 9 WHITE FENCE FARMS LOT 3					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential: Single Family Residence					
A5. Latitude/Longitude: Lat. 32.39700° Long. -111.32841° Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. <small>Pima County Regional Flood Control District requires four (4) photographs.</small>					
A7. Building Diagram Number 1B					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A8.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/A sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A9.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Pima County / 040073			B2. County Name Pima County		B3. State Arizona
B4. Map/Panel Number 04019C1015	B5. Suffix L	B6. FIRM Index Date 09/28/2012	B7. FIRM Panel Effective/ Revised Date 06-16-2011	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 100.5
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other/Source: Highest Adjacent Natural Grade (=100.0 ft)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

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, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: N/A Vertical Datum: N/A

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: HIGHEST ADJACENT GRADE (100.0)

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ 102.60 feet meters
- b) Top of the next higher floor _____ N/A feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) _____ N/A feet meters
- d) Attached garage (top of slab) _____ 102.30 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) _____ 101.80 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) _____ 100.10 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) _____ 101.60 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ 100.10 feet meters

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. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name RONALD E STOLL		License Number ARIZONA LS 11758	
Title OWNER			
Company Name RES LAND SURVEYS INC.			
Address 1910 E 14TH STREET			
City TUCSON	State Arizona	ZIP Code 85719	
Signature 	Date 05-06-2021	Telephone (520) 624-1142	Ext.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)
 The lowest service equipment (C2.e) is the AC Unit _____ and the _____ N/A _____ is/are above this elevation.
 The highest service equipment (C2.e) is the _____ and the _____ is/are above this elevation.
 Highest adjacent natural grade is _____ 100.4 _____ Lowest adjacent natural grade is _____ 100.1 _____
 The elevation of the bottom of the structural frame of the manufactured home is _____ N/A _____.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name	Title
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Community Name	Telephone
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Signature	Date
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Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008
Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption EAST SIDE DATE OF PHOTO: 04/27/2021

Clear Photo One



Photo Two

Photo Two Caption NORTH SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption SOUTH SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Three



Photo Four

Photo Four Caption WEST SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Four



FPUP # P21FC00023
DSD # P21BP00206

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name John & Vickie Hoffman				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr				Company NAIC Number:	
City Marana		State Arizona		ZIP Code 85653	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Taxcode: 208270030 Township 12S Range 10E Section 9 WHITE FENCE FARMS LOT 3					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential: Single Family Residence					
A5. Latitude/Longitude: Lat. 32.39700° Long. -111.32841° Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. <small>Pima County Regional Flood Control District requires four (4) photographs.</small>					
A7. Building Diagram Number 1B					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A8.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/A sq ft					
b) Number of permanent flood openings in the attached garage within					
c) Total net area of flood openings in A9.b N/A sq ft					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE					
B1. NFIP Community Name & Community Number Pima County / 040073			B2. County Pima County		
B4. Map/Panel Number 04019C1015	B5. Suffix L	B6. FIRM Index Date 09/28/2012	B7. FIRM Panel Effective/ Revised Date 06-16-2011	B8. Flood Zone X	B9. Base Flood Elevation (BFE) in feet 100.5
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other/Source: Highest Adjacent Natural Grade (=100.0 ft)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

FFE SE Gar
2.10' 1.30' 1.80'
 above BFE
 M.R. 5-10-21 EPE
 E-K Surveyor with EPE
 orig.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
- 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, AR/AO.
 Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: N/A Vertical Datum: N/A

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: HIGHEST ADJACENT GRADE (100.0) feet

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | | |
|--|---------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>102.60</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>102.30</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | <u>101.80</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>100.10</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)
<small>PCRFCD Note: Indicate lowest adjacent natural grade (LANG) in Section D.</small> | <u>101.60</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support
<small>PCRFCD Note: Indicate highest adjacent natural grade (HANG) in Section D.</small> | <u>100.10</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

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. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name RONALD E STOLL	License Number ARIZONA LS 11758	
Title OWNER		
Company Name RES LAND SURVEYS INC.		
Address 1910 E 14TH STREET		
City TUCSON	State Arizona	
Signature <i>R E Stoll</i>	Date 05-06-2021	Telephone (520) 624-1142

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)
 The lowest service equipment (C2.e) is the AC Unit _____ and the _____ concrete pad 101.8 is/are above this elevation.
 The highest service equipment (C2.e) is the Electric Box _____ and the _____ concrete pad 104.8 is/are above this elevation.
 Highest adjacent natural grade is 100.4 Lowest adjacent natural grade is 100.1
 The elevation of the bottom of the structural frame of the manufactured home is N/A

ELEVATION CERTIFICATE

OMB No. 1660-0008
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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
City Marana	State Arizona	ZIP Code 85653	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption EAST SIDE DATE OF PHOTO: 04/27/2021

Clear Photo One



Photo Two

Photo Two Caption NORTH SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16922 W Elk Tr			Policy Number:
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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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption SOUTH SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Three



Photo Four

Photo Four Caption WEST SIDE DATE OF PHOTO: 04/27/2021

Clear Photo Four