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

National Flood Insurance Program

FPUP # P23FC00337 DSD # P23BP03731

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. FOR INSURANCE COMPANY USE **SECTION A - PROPERTY INFORMATION** A1. Building Owner's Name: DICKSON MICKEY & DICKSON JENNIFER & DICKSON KADIN & DICKSON AMY Policy Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: Company NAIC Number: **12810 N ANWAY RD** City: Marana State: Arizona ZIP Code: 85653 A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: Taxcode: 20815019C Township 11S Range 10E Section 27 PTN S479.73' W700' SW4 SW4 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential: Manufactured Home Replacement Long. -111.32088° Horizontal Datum: ☐ NAD 1927 ▼ NAD 1983 ☐ WGS 84 A5. Latitude/Longitude: Lat. 32.43721° A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8). Pima County Regional Flood Control District requires four (4) photographs A7. Building Diagram Number: - 6 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): 1 900 sq. ft. b) Is there at least one permanent flood opening on two different sides of each enclosed area? 📉 Yes 🔲 No 🔀 N/A c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: Engineered flood openings: d) Total net open area of non-engineered flood openings in A8.c: 2000 sq. in. e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): NIA sq. ft. f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): N 1 > sq. ft. A9. For a building with an attached garage: a) Square footage of attached garage: MA sq. ft. b) Is there at least one permanent flood opening on two different sides of the attached garage?

Yes

No

No

No c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade; Non-engineered flood openings: N | A Engineered flood openings: N | A d) Total net open area of non-engineered flood openings in A9.c: N IA sq. in. e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): $V \ k$ sq. ft. f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): N 🔭 sq. ft. SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION Pima County B1.a. NFIP Community Name: B1.b. NFIP Community Identification Number: 040073 Pima County B2. County Name: B3. State: Arizona B4. Map/Panel No.: 04019C 1015 B5. Suffix: L B6. FIRM Index Date: 09/28/2012 §7. FIRM Panel Effective/Revised Date: 06/16/2011 B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): 100.5 B8. Flood Zone(s): X B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: ☐ FIS ☐ FIRM X Community Determined ☐ Other: B11. Indicate elevation datum used for BFE in Item B9:

NGVD 1929
NAVD 1988
Other/Source: N/A ☐ CBRS ☐ OPA B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? Tyes X No

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE			
12810 N ANWAY RD City: Marana State: Arizona ZIP Code: 85653	Policy Number: 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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: V1A Vertical Datum: LDCA				
Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☐ NAVD 1988 ☑ Other: ☐ # N 6 = 100.0 ft				
Datum used for building elevations must be the same as that used for the BFE. Conversion factor used for the Section D Comments area. a) Top of bottom floor (including basement, crawlspace, or enclosure floor): b) Top of the next higher floor (see Instructions): c) Bottom of the lowest horizontal structural member (see Instructions): d) Attached garage (top of slab): e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): f) Lowest Adjacent Grade (LAG) next to building: REPORTED Note: For projects involving a fill pad indicate lowest adjacent finished grade in Section D	Check the measurement used: Check the measurement used: Check the meters Check the meters the meters Check the meters the meters the meters Check the meters the me			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by information. I certify that the information on this Certificate represents my best efforts to interpret the 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 and describe in the Comments area.	TO VAND			
Certifier's Name: Howard M. Brown License Number: RLSZ3942 Title: President Company Name: Howard Brown Ent. LLC Address: 4960 N. Vista de Loma Segunda City: Tukon State: AZ ZIP Code: 85749 Signature: Date: 8/17/23 Telephone: 520403 6047 Ext.: N/A Email: tukon flere aol.com Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance	Traise Gear Fiere			
Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):				
The lowest service equipment (C2.e) is the Highest adjacent finished grade is Lowest adjacent finish grade is				

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and 12810 N ANWAY RD	T BOX NO
City: Marana State: Arizona ZIP Code: 85	Policy Number:
	Company NAIC Number:
SECTION E – BUILDING MEASUREMENT INFORMATI FOR ZONE AO, ZONE AR/AO, AND ZONE	
For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–intended to support a Letter of Map Change request, complete Sections A, B, and C enter meters.	
Building measurements are based on: Construction Drawings* Building U *A new Elevation Certificate will be required when construction of the building is cor	
E1. Provide measurements (C.2.a in applicable Building Diagram) for the following measurement is above or below the natural HAG and the LAG.	and check the appropriate boxes to show whether the
a) Top of bottom floor (including basement, crawlspace, or enclosure) is:	et meters above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is:	et meters above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section next higher floor (C2.b in applicable Building Diagram) of the building is:	
E3. Attached garage (top of slab) is:	
E4. Top of platform of machinery and/or equipment	index and the first
servicing the building is:	et meters above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the top of the bottom flo floodplain management ordinance? Yes No Unknown The	or elevated in accordance with the community's local official must certify this information in Section G.
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZE	D REPRESENTATIVE) CERTIFICATION
The property owner or owner's authorized representative who completes Sections A sign here. The statements in Sections A, B, and E are correct to the best of my kno	
Check here if attachments and describe in the Comments area.	, and the same of
Property Owner or Owner's Authorized Representative Name:	
Address:	
City:	State: ZIP Code:
Signature: Date:	
Telephone: Ext.: Email:	
Comments:	
*	

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 12810 N ANWAY RD		FOR INSURANCE COMPANY USE		
City: Marana State: Arizona Z	IP Code: <u>85653</u>	Policy Number: Company NAIC Number:		
SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)				
The local official who is authorized by law or ordinance to administer th Section A, B, C, E, G, or H of this Elevation Certificate. Complete the a			dinance can complete	
G1. The information in Section C was taken from other docume engineer, or architect who is authorized by state law to cert elevation data in the Comments area below.)				
G2.a. A local official completed Section E for a building located in E5 is completed for a building located in Zone AO.	Zone A (without a BFE),	Zone AO, or Zo	ne AR/AO, or when item	
G2.b. A local official completed Section H for insurance purposes				
G3.	bes specific corrections to	the information	in Sections A, B, E and H.	
G4. The following information (Items G5–G11) is provided for c	ommunity floodplain man	agement purpos	es.	
G5. Permit Number: G6. Date Perm	nit Issued:	***************************************	P	
G7. Date Certificate of Compliance/Occupancy Issued:				
G8. This permit has been issued for:	ubstantial Improvement			
G9.a. Elevation of as-built lowest floor (including basement) of the building:	fee	t meters	Datum:	
G9.b. Elevation of bottom of as-built lowest horizontal structural member:	fee	t meters	Datum:	
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	fee	t meters	Datum:	
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:	∏ fee	t ☐ meters	Datum:	
G11. Variance issued? ☐ Yes ☐ No If yes, attach document				
The local official who provides information in Section G must sign here. I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.				
Local Official's Name:	Title:			
NFIP Community Name:			7	
Telephone: Ext.: Email:			ě	
Address:				
City:	State:	ZIP C	ode:	
			40 v = + 27;	
Signature:				
Comments (including type of equipment and location, per C2.e; descri Sections A, B, D, E, or H):	otion of any attachments;	and corrections	to specific information in	
			, "	

Building Street Address (inc 12810 N ANWAY RD	uding Apt., Unit, Suit	te, and/or Bldg. N	lo.) or P.O. Rout	te and Box No.:	FOR IN	SURANCE	COMPANY US
City: Marana		State: Arizo	ona ZIP Code	e: 85653		Policy Number:	
SECT	SECTION H - BUILDING'S FIRST FLOOR HEIGHT INFORMATION			Company NAIC Number:			
	(SUKVEY NUI	REQUIRED)	(FOR INSUR	ANCE PURPOS	SES ONLY)		
The property owner, owner to determine the building's nearest tenth of a foot (nea <i>Instructions</i>) and the appli	s authorized represe irst floor height for in rest tenth of a meter	entative, or local nsurance purpos	floodplain man	nagement official , B, and I must als	may complete	ed. Enter he	ights to the
H1. Provide the height of the	e top of the floor (as	s indicated in Fo	undation Type	Diagrams) above	the Lowest A	djacent Grad	de (LAG):
 a) For Building Diagr floor (include above-gra subgrade crawlspaces 	ams 1A, 1B, 3, and ade floors only for bu	5-9. Top of both	tom	feet	meters	above	
b) For Building Diagr higher floor (i.e., the flo enclosure floor) is:	ams 2A, 2B, 4, and or above basement,	6–9. Top of nex crawlspace, or		feet	meters	above	the LAG
H2. Is all Machinery and Ed H2 arrow (shown in the ☐ Yes ☐ No	quipment servicing th Foundation Type Di	he building (as lis iagrams at end c	sted in Item H2 of Section H ins	instructions) elever elevertions) for the	rated to or abo appropriate Bo	ove the floor uilding Diagr	indicated by the ram?
SECTION I DE	ROPERTY OWNE	R (OR OWNE	R'S AUTHOR	IZEN PEDDES	ENTATIVE)	CERTIFICA	ATION.
OECHON I - PI	TO THE TOTAL STREET	IN TOLL OFFIRE				PEKTIFICA	KIION
SECTION I – PF The property owner or owne A, B, and H are correct to the indicate in Item G2.b and sig	r's authorized repres e best of my knowle	sentative who co	mnloton Santia	222 A D 223 LLL		The statemed Section H	ents in Sections I, they should
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BUILDING PHOTOGRAPHS See Instructions for Item A6.

Building Street Address (including Ap	FOR INSURANCE COMPANY USE	
12810 N ANWAY RD City: Marana	State: Arizona ZIP Code: 85653	Policy Number: Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



8126123

Photo One Caption:



Photo Two Caption:

Right Side (North)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

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Continuation Page

Building Street Address (including Apt., U	FOR INSURANCE COMPANY USE	
12810 N ANWAY RD City: Marana	Policy Number: Company NAIC Number:	

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo date 8/2/0/23

Photo Three

Photo Three Caption:

Back (Next)



Photo Four Caption:

Lett Side

(South)