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

National Flood Insurance Program

FPUP # P23FC00477 DSD # P23BP05662

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.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name: TITLE SECURITY AGENCY LLC TR 201434-T	Policy Number:					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 16040 S Kerry Rabbit Ct	Company NAIC Number:					
City: Sahuarita State: Arizona	ZIP Code: 85629					
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Num Taxcode: 303-56-0760 Township 17S Range 14E Section 8 SAHUARITA ACRE						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential: Single	e Family Residence					
A5. Latitude/Longitude: Lat. 31.958590° Long110.931000° Horizontal Datum: \(\sqrt{N} \)	AD 1927 X NAD 1983 WGS 84					
 A6. Attach at least two and when possible four clear photographs (one for each side) of the building Pima County Regional Flood Control District requires four (4) photographs A7. Building Diagram Number: 1A 	(see Form pages 7 and 8).					
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s): N/A 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 Non-engineered flood openings: N/A Engineered flood openings: N/A	above adjacent grade:					
d) Total net open area of non-engineered flood openings in A8.c: N/A sq. in.						
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instruction	ons): N/A sq. ft.					
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): N/A sq. ft.						
A9. For a building with an attached garage:						
a) Square footage of attached garage: 430 sq. ft.						
b) Is there at least one permanent flood opening on two different sides of the attached garage?	Yes No No N/A					
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: 0 Engineered flood openings: 0						
d) Total net open area of non-engineered flood openings in A9.c: 0 sq. in.						
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instruction	ons): <u>0</u> sq. ft.					
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): N/A sq. ft.						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFOR	RMATION					
B1.a. NFIP Community Name: Pima County B1.b. NFIP Community Iden	ntification Number: 040073					
B2. County Name: Pima County B3. State: Arizona B4. Map/Panel No.:	04019C 3460 B5. Suffix: L					
B6. FIRM Index Date: 09/28/2012 B7. FIRM Panel Effective/Revised Date: 06/16/20	11					
B8. Flood Zone(s): D B9. Base Flood Elevation(s) (BFE) (Zone AO, use E	Base Flood Depth):103.0					
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: ☐ FIS ☐ FIRM ☐ Community Determined ☒ Other: Bruce Patton PE. Drainage Re						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/	/Source: Highest Adjacent Natural Grade (=100.0 ft)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prote Designation Date: N/A CBRS OPA	ected Area (OPA)? Yes X No					
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?	No					

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or	FOR INS	FOR INSURANCE COMPANY USE				
16040 S Kerry Rabbit Ct	Policy Nu	Policy Number:				
ty: Sahuarita State: Arizona 7IP Code: 85629		Company	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: Sahuarita Acres Basis of Elevation Vertical Datum: NAVD88						
Indicate elevation datum used for the elevations in items a) through h NGVD 1929 X NAVD 1988 Other: Sahuarita Acres	•	37.39				
Datum used for building elevations must be the same as that used fo If Yes, describe the source of the conversion factor in the Section D (_	Yes No			
a) Top of bottom floor (including basement, crawlspace, or enclo	osure floor):273	35.1 ×				
b) Top of the next higher floor (see Instructions):	N	/A 🔀	feet meters			
c) Bottom of the lowest horizontal structural member (see Instru	ctions): N	/A 🔀	feet meters			
d) Attached garage (top of slab):	273	34.8 x	feet meters			
 e) Lowest elevation of Machinery and Equipment (M&E) servicing (describe type of M&E and location in Section D Comments and Equipment (M&E) servicing (M&E) and Iocation in Section D 	•	35.0 x] feet □ meters			
f) Lowest Adjacent Grade (LAG) next to building: 🗷 Natural	Finished 273	30.0	feet meters			
PCRFCD Note: For projects involving a fill pad indicate lowest adjacent finished grade in Seg) Highest Adjacent Grade (HAG) next to building: X Natural	Finished 273	30.7 ×	feet meters			
PCRFCD Note: For projects involving a fill pad indicate highest adjacent finished grade in S h) Finished LAG at lowest elevation of attached deck or stairs, is support:	ncluding structural	/A 🔀	feet meters			
SECTION D - SURVEYOR, ENGINE	ER, OR ARCHITECT CEI	RTIFICATIO	N			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state 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 and describe in the Comments area.						
Certifier's Name: Doug Schneider License Number: 17479						
Title: Survey Supervisor/Associate						
Company Name: Rick Engineering Co.						
Address: 3945 E. Fort Lowell Road, Ste. 111						
City: Tucson State: AZ ZIP Code: 85712						
	Date: 11/28/2023					
Signature:		Place Seal Here				
Telephone: (520) 795-1000 Ext.: Email: dschneider@rickengineering.com Place Seal Here						
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
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 AC compressor. Highest adjacent natural grade (HANG) is 2730.7 @ 3.0' BEE per Bruce.						
The lowest service equipment (C2.e) is the AC compressor. Highest adjacent natural grade (HANG) is 2730.7 @ 3.0' BFE per Bruce Patton PE. FloodPlain/Depth of Fill Exhibit (Dated 12/12/22). Lowest adjacent natural grade (LANG) is 2730.0. Elevation of (C2.d) is end of top of garage floor and not the drop of the door seal. The basis of elevation (BOE) is per the approved grading plan for Sahuarita Acres. The highest and lowest adjacent natural grade was determined from topographic mapping and data terrain models created from Sun						

Building Street Address (including Apt., Unit, Suite, and	FOR INSURANCE COMPANY USE				
16040 S Kerry Rabbit Ct	Policy Number:				
City: Sahuarita	rita State: Arizona ZIP Code: 85629				
	EASUREMENT INFORMATION (SURVEY), ZONE AR/AO, AND ZONE A (WITHOUT				
For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.					
Building measurements are based on: Constraint Constrai	- - -	on* Finished Construction			
E1. Provide measurements (C.2.a in applicable Bu measurement is above or below the natural HA		appropriate boxes to show whether the			
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is: 		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 floor next higher floor (C2.b in applicable Building Diagram) of the building is:					
E3. Attached garage (top of slab) is:	feet meters				
E4. Top of platform of machinery and/or equipmen servicing the building is:	nt feet meters				
E5. Zone AO only: If no flood depth number is ava floodplain management ordinance? Yes		ccordance with the community's ust certify this information in Section G.			
SECTION F - PROPERTY OWNER	OR OWNER'S AUTHORIZED REPRESEN	ITATIVE) CERTIFICATION			
The property owner or owner's authorized represersign here. The statements in Sections A, B, and E		one A (without BFE) or Zone AO must			
Check here if attachments and describe in the					
Property Owner or Owner's Authorized Representa	ative Name:				
Address:					
City:	State:	ZIP Code:			
Signature:	Date:				
	Email:				
Comments:					

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.0 16040 S Kerry Rabbit Ct		FOR INSURANCE COMPANY USE				
<u> </u>			Policy Nur	Policy Number:		
State: Arizona ZIP Code: 85629			Company	NAIC Number	er:	
SECTION G - COMMUNITY INFORMATION (RECOMME	NDED FOR	COMMUN	ITY OFFICIA	AL COMPL	ETION)	
The local official who is authorized by law or ordinance to administer the Section A, B, C, E, G, or H of this Elevation Certificate. Complete the ap				rdinance car	ı complete	
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 state law to certify elevation information. (Indicate the source and date of the 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 (withou	ut a BFE), Zo	one AO, or Zo	one AR/AO, o	or when item	
G2.b. A local official completed Section H for insurance purposes.						
G3.	es specific cor	rections to t	he informatio	n in Sections	A, B, E and H.	
G4. The following information (Items G5–G11) is provided for co	mmunity flood	plain manag	ement purpos	ses.		
G5. Permit Number: P23FC00477 G6. Date Permit	t Issued: 7/5	5/2023				
G7. Date Certificate of Compliance/Occupancy Issued:						
G8. This permit has been issued for: New Construction Sul	ostantial Impro	vement				
G9.a. Elevation of as-built lowest floor (including basement) of the building:		x feet	☐ meters	Datum:		
G9.b. Elevation of bottom of as-built lowest horizontal structural member:		x feet	☐ meters	Datum:		
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	103.0	 ⋉ feet	meters	Datum:	HANG	
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:	104.0	 ⋉ feet	☐ meters	Datum:	HANG	
G11. Variance issued? Yes No If yes, attach documenta	tion and descr	— — ibe in the Co	mments area	 1.		
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: Philip Calabrese	Title: _(CFM				
NFIP Community Name: Pima County						
Telephone: 520-724-4600 Ext.: Email:						
Address: 201 N Stone Ave 9th FI						
City:Tucson		State: AZ	ZIP C	ode: <u>8570</u>	<u> </u>	
Signature: Philip Calabrese	Date: <u>11</u>	1/28/2023				
Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):						

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 16040 S Kerry Rabbit Ct					FOR IN	FOR INSURANCE COMPANY USE		
			Policy Nu	Policy Number:				
City: Sahuarita	Sahuarita State: Arizona ZIP Code: 85629			Compan	Company NAIC Number:			
		S FIRST FLOOR REQUIRED) (FOR				ZONES		
The property owner, owner's author to determine the building's first floor nearest tenth of a foot (nearest tent <i>Instructions</i>) and the appropriate	r height for insu h of a meter in	urance purposes. Se Puerto Rico). <i>Refer</i>	ections A, B, and rence the Found	l must also dation Typ	be complete ne <i>Diagrams</i>	ed. Enter heights to the (at the end of Section H		
H1. Provide the height of the top of	f the floor (as in	ndicated in Foundati	on Type Diagran	ns) above	the Lowest A	djacent Grade (LAG):		
 a) For Building Diagrams 1A floor (include above-grade floor subgrade crawlspaces or enclosed) 	rs only for build	dings with		feet	meters	above the LAG		
 b) For Building Diagrams 2A higher floor (i.e., the floor above enclosure floor) is: 				feet	meters	above the LAG		
H2. Is all Machinery and Equipmer H2 arrow (shown in the Foundar Yes No								
SECTION I - PROPER	RTY OWNER	(OR OWNER'S A	UTHORIZED F	REPRESE	ENTATIVE)	CERTIFICATION		
The property owner or owner's auth A, B, and H are correct to the best of indicate in Item G2.b and sign Section	of my knowled							
maioato in itomi Oz.b ana oign Coot	ЮП О.							
☐ Check here if attachments are p		ding required photos) and describe ea	ach attach	ment in the C	omments area.		
	provided (includ		,			omments area.		
Check here if attachments are p	provided (includ		,			omments area.		
☐ Check here if attachments are p Property Owner or Owner's Authorize	provided (includ		,			omments area. Code:		
Check here if attachments are p Property Owner or Owner's Authoriz Address: City:	provided (includ							
Check here if attachments are p Property Owner or Owner's Authoriz Address: City: Signature:	provided (includ	ative Name:	,					
Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						
Check here if attachments are p Property Owner or Owner's Authoriz Address: City: Signature:	provided (includ	ative Name:						
Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						
Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						
Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						
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Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						
Check here if attachments are property Owner or Owner's Authorized Address: City: Signature: Telephone:	provided (includ	ative Name:						

ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite	, and/or Bldg. No.) o	r P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
16040 S Kerry Rabbit Ct City: Sahuarita	State: <u>Arizona</u>	ZIP Code: <u>85629</u>	Policy 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.



Photo One

Photo One Caption: North side photo date 11/22/23



Photo Two

Photo Two Caption: South side photo date 11/22/23

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

Continuation Page

Building Street Address (including Apt., Unit, Suite,	and/or Bldg. No.) or	P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
16040 S Kerry Rabbit Ct City: Sahuarita	State: Arizona	ZIP Code: <u>85629</u>	Policy 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 Three

Photo Three Caption: East side photo date 11/22/23



Photo Four

Photo Four Caption: West side photo date 11/22/23