FPUP # P23FC00532

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

DSD # P23BP06238

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.: 15732 S ORMES SUNSET PL	Company NAIC Number:		
City: TUCSON State: Arizona	ZIP Code: 85629		
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: Taxcode: 303-56-0380 Township 17S Range 14E Section 8 SAHUARITA ACRES LOT 23			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential: Singl	e Family Residence		
A5. Latitude/Longitude: Lat. 31.96454° Long110.93130° Horizontal Datum: NAD 1927 X NAD 1983 WGS 84			
 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: 1A 			
A8. For a building with a crawlspace or enclosure(s):			
a) Square footage of crawlspace or enclosure(s): <u>N/A</u> 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: <u>N/A</u> Engineered flood openings: <u>N/A</u> 	above adjacent grade:		
d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in.			
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instruction	ons): <u>N/A</u> sq. ft.		
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.			
A9. For a building with an attached garage:			
a) Square footage of attached garage: <u>682</u> sq. ft.			
b) Is there at least one permanent flood opening on two different sides of the attached garage?	? 🗌 Yes 🗙 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 Instructions): 0 sq. ft.			
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): 0 sq. ft.			
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION			
B1.a. NFIP Community Name: Pima County B1.b. NFIP Community Ide	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	011		
B8. Flood Zone(s): D B9. Base Flood Elevation(s) (BFE) (Zone AO, use B	Base Flood Depth):101.5		
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 Report (Dated 12/12/22)			
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 Prot Designation Date:N/A CBRS OPA	ected Area (OPA)? 🗌 Yes 💢 No		
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?	No		

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS (ON PAGES	5 9-19		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box	FOR INSURANCE COMPANY USE			
15732 S ORMES SUNSET PL City: TUCSON State: Arizona ZIP Code: 85629		Policy Number:		
City: TUCSON State: Arizona ZIP Code: 85629		Company NAIC Number:		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY F	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: <u>Sahuarita Acres Basis of Elevation</u> Vertical Datum: <u>NAVD88</u>				
Indicate elevation datum used for the elevations in items a) through h) below.				
Datum used for building elevations must be the same as that used for the BFE. Conversion If Yes, describe the source of the conversion factor in the Section D Comments area.	on factor us	sed?		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	2722.2			
b) Top of the next higher floor (see Instructions):	N/A	x feet meters		
c) Bottom of the lowest horizontal structural member (see Instructions):	N/A	x feet meters		
d) Attached garage (top of slab):	2722.0	.0 🗴 feet 🗌 meters		
 e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 	2722.0	.0 🗴 feet 🗌 meters		
f) Lowest Adjacent Grade (LAG) next to building: 🔀 Natural 🕂 Finished	2719.3	.3 🗴 feet 🗌 meters		
 PCRFCD Note: For projects involving a fill pad indicate lowest adjacent finished grade in Section D g) Highest Adjacent Grade (HAG) next to building: X Natural Finished 	2719.4	.4 x feet meters		
 PCRFCD Note: For projects involving a fill pad indicate highest adjacent finished grade in Section D h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: 	N/A	🗴 🗌 k feet 🗌 meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITE	CT CERTI	IFICATION		
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. <i>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.</i>				
Were latitude and longitude in Section A provided by a licensed land surveyor? Yes 🛛 Yes				
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: <u>3945 E. Fort Lowell Road, Ste. 111</u>				
City: Tucson State: AZ ZIP Code: 85712				
Signature: Date: 01/10/2024				
Telephone: (520) 795-1000 Ext.: Email: dschneider@rickengineeri	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 2719.4 @ 1.5' BFE per Bruce Patton PE. FloodPlain/Depth of Fill Exhibit (Dated 12/12/22). Lowest adjacent natural grade (LANG) is 2719.3. 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 Mapping LLC dated 04/09/17. HANG (B11) to BOE conversion 100.0 = 2719.4 HAG=2721.8, LAG=2721.1.				

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 15732 S ORMES SUNSET PL	FOR INSURANCE COMPANY USE		
City: TUCSON State: Arizona ZIP Code: 85629	Policy Number:		
	Company NAIC Number:		
SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY FOR ZONE AO, 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: Construction Drawings* Building Under Construction* Finished Construction * A new Elevation Certificate will be required when construction of the building is complete.			
E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the a measurement is above or below the natural HAG and the LAG.	ppropriate 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:	above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/o	9 (see pages 1–2 of Instructions), the		
next higher floor (C2.b in applicable Building Diagram) of the building is:	above or below the HAG.		
E3. Attached garage (top of slab) is:	above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is:	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 ac	cordance with the community's		
floodplain management ordinance? 🔄 Yes 🗌 No 📄 Unknown 🛛 The local official mu	ist certify this information in Section G.		
floodplain management ordinance? Yes No Unknown The local official mu SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN			
SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo	TATIVE) CERTIFICATION		
SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge	TATIVE) CERTIFICATION		
SECTION F PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Ze sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area.	TATIVE) CERTIFICATION		
SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name:	TATIVE) CERTIFICATION		
SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must		
SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Ze sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City: State: Signature: Date:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City: State: Signature: Date:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN The property owner or owner's authorized representative who completes Sections A, B, and E for Zo sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City:	TATIVE) CERTIFICATION one A (without BFE) or Zone AO must ZIP Code:		

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.	O. Route and Box No.:	FOR INSU	JRANCE COMPANY USE	
15732 S ORMES SUNSET PL		Policy Nun	Policy Number:	
City: TUCSON State: Arizona Z	IP Code: 85629	Company NAIC Number:		
SECTION G – COMMUNITY INFORMATION (RECOMM			L 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			rdinance can 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 Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.				
G2.b. 🔲 A local official completed Section H for insurance purposes				
G3. In the Comments area of Section G, the local official descri	bes specific corrections to th	e informatior	n in Sections A, B, E and H.	
G4. The following information (Items G5–G11) is provided for co	ommunity floodplain manage	ement purpos	es.	
G5. Permit Number: G6. Date Perm	it Issued:			
G7. Date Certificate of Compliance/Occupancy Issued:				
G8. This permit has been issued for: \Box New Construction \Box Su	ubstantial Improvement			
G9.a. Elevation of as-built lowest floor (including basement) of the building:	feet	meters	Datum:	
G9.b. Elevation of bottom of as-built lowest horizontal structural member:	feet	meters	Datum:	
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	feet	meters	Datum:	
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:	☐ feet	☐ meters	Datum:	
G11. Variance issued? Yes No If yes, attach documenta	🖬			
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:				
Telephone: Ext.: Email:				
Address:				
City:	State:	ZIP C	ode:	
Signature:	Date:			
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):				

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19				
Building Street Address (including Apt., U 15732 S ORMES SUNSET PL	Jnit, Suite, and/or Bldg. No.)) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE	
TS732 S ORMES SUNSET PL City: TUCSON State: Arizona ZIP Code: 85629		 Policy Number: Company NAIC Number: 		
SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION F		FOR ALL ZONES		
(SURVI	EY NOT REQUIRED) (F	OR INSURANCE PURPOS	ES ONLY)	
The property owner, owner's authorized to determine the building's first floor he nearest tenth of a foot (nearest tenth of <i>Instructions) and the appropriate Bu</i>	ight for insurance purposes f a meter in Puerto Rico). F	s. Sections A, B, and I must also Reference the Foundation Typ	e Diagrams (at the end of Section H	
H1. Provide the height of the top of the	e floor (as indicated in Four	ndation Type Diagrams) above t	the Lowest Adjacent Grade (LAG):	
a) For Building Diagrams 1A, 1E floor (include above-grade floors o subgrade crawlspaces or enclosur	nly for buildings with	m [] feet	☐ meters ☐ above the LAG	
b) For Building Diagrams 2A, 2E higher floor (i.e., the floor above ba enclosure floor) is:		feet	☐ meters ☐ above the LAG	
H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?				
SECTION I – PROPERTY	OWNER (OR OWNER	'S AUTHORIZED REPRESE	ENTATIVE) CERTIFICATION	
 A, B, and H are correct to the best of my knowledge. Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G. Check here if attachments are provided (including required photos) and describe each attachment in the Comments area. Property Owner or Owner's Authorized Representative Name: 				
			ZIP Code:	
		0.000	2.1 0000	
Signature:		Date:		
Telephone:	Ext.: Email:			
Comments:				

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

		IOIOGRAPHS ons for Item A6.	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 15732 S ORMES SUNSET PL		FOR INSURANCE COMPANY USE	
City: TUCSON	State: <u>Arizona</u>	ZIP Code: 85629	 Policy Number: Company NAIC Number:
Instructions: Insert below at least two able to take front and back pictures of "Right Side View," or "Left Side View." close-up photograph of representative	townhouses/rowhouses). Iden Photographs must show the f	tify all photographs with the d oundation. When flood openir	late taken and "Front View," "Rear View," ngs are present, include at least one
	<image/>	o One	
Photo One Caption: East side photo	date 01/08/24		

Photo Two

Photo Two Caption: West side photo date 01/08/24

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		
15732 S ORMES SUNSET PL			Policy Number:	
City: TUCSON	State: Arizona	ZIP Code: 85629		
, <u></u>			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 Three

Photo Three Caption: North side photo date 01/08/24



Photo Four

Photo Four Caption: South side photo date 01/08/24