**FPUP #** P23FC00533

#### DSD # P23BP06240

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

# **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.: 15776 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 Num Taxcode: 303-56-0400 Township 17S Range 14E Section 8 SAHUARITA ACR	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential: Single	e Family Residence
A5. Latitude/Longitude: Lat. 31.96369° Long110.93128° Horizontal Datum:	IAD 1927 🗙 NAD 1983 🔲 WGS 84
<ul> <li>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</li> <li>A7. Building Diagram Number: 1A</li> </ul>	g (see Form pages 7 and 8).
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
<ul> <li>c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot</li> <li>Non-engineered flood openings: <u>N/A</u></li> <li>Engineered flood openings: <u>N/A</u></li> </ul>	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 Instructi	ons): <u>N/A</u> 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: <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
<ul> <li>c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adj</li> <li>Non-engineered flood openings: 0</li> <li>Engineered flood openings: 0</li> </ul>	acent grade: -
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 Instructi	ons): 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) INFO	RMATION
B1.a. NFIP Community Name: Pima County B1.b. NFIP Community Ide	entification 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	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 F	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	j 9-19		
and Street Address (incidently Apt., Onit, Suite, and/or bidg. No.) or 1.0. Notice and box No		FOR INSURANCE COMPANY USE		
City: TUCSON State: Arizona ZIP Code: 85629	5776 S ORMES SUNSET PL tv: TLICSON State: Arizona, ZIP Code: 85629			
City: <u>TUCSON</u> State: <u>Arizona</u> ZIP Code: <u>85629</u> C		Company NAIC Number:		
SECTION C – BUILDING ELEVATION INFORMATION (	SURVEY I	REQUIRED)		
C1. Building elevations are based on: Construction Drawings* Building Under *A new Elevation Certificate will be required when construction of the building is com		ion* 🔀 Finished Construction		
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), A99. Complete Items C2.a–h below according to the Building Diagram specified in Ite Benchmark Utilized: <u>Sahuarita Acres Basis of Elevation</u> Vertical Datum: <u>NAN</u>	em A7. In P			
Indicate elevation datum used for the elevations in items a) through h) below.	n = 2737.3	39		
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? Yes No Check the measurement used:		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	2723.2			
b) Top of the next higher floor (see Instructions):	N/A	🗶 feet 🗌 meters		
c) Bottom of the lowest horizontal structural member (see Instructions):	N/A	🗾 🗴 feet 🗌 meters		
d) Attached garage (top of slab):	2723.0	0 x feet meters		
<ul> <li>e) Lowest elevation of Machinery and Equipment (M&amp;E) servicing the building (describe type of M&amp;E and location in Section D Comments area):</li> </ul>	2723.2	1 🗴 feet 🗌 meters		
f) Lowest Adjacent Grade (LAG) next to building: 🔀 Natural 🔚 Finished	2720.3	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 PCRFCD Note: For projects involving a fill pad indicate highest adjacent finished grade in Section D	2720.4	4 <b>x</b> feet meters		
<ul> <li>h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:</li> </ul>	N/A	🗶 feet 🗌 meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITE	CT CERTI	FICATION		
This certification is to be signed and sealed by a land surveyor, engineer, or architect autilinformation. I certify that the information on this Certificate represents my best efforts to in false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section	nterpret the			
Were latitude and longitude in Section A provided by a licensed land surveyor?	X 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: <u>3945 E. Fort Lowell Road, Ste. 111</u>		_		
City: Tucson State: AZ ZIP Code: 8	5712	_		
Signature: Date: 01/10	0/2024			
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 p	er C2.e; an	d description of any attachments):		
The lowest service equipment (C2.e) is the AC compressor. Highest adjacent natural gra Patton PE. FloodPlain/Depth of Fill Exhibit (Dated 12/12/22). Lowest adjacent natural gra of top of garage floor and not the drop of the door seal. The basis of elevation (BOE) is p The highest and lowest adjacent natural grade was determined from topographic mappin Mapping LLC dated 04/09/17. HANG (B11) to BOE conversion 100.0 = 2720.4, HAG=27	ide (LANG) er the appro g and data	is 2720.3. Elevation of (C2.d) is end oved grading plan for Sahuarita Acres. terrain models created from Sun		

**ELEVATION CERTIFICATE** 

IMPORTANT: MUST F	FOLLOW THE INSTRUCTIONS ON PAGE	S 9-19	
Building Street Address (including Apt., Unit, Suite, and/or 15776 S ORMES SUNSET PL	Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE	
15776 S ORMES SUNSET PL       City: TUCSON       State: Arizona       ZIP Code:       85629		Policy Number:	
		Company NAIC Number:	
	UREMENT INFORMATION (SURVEY NE 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 *A new Elevation Certificate will be required when const	n Drawings*  Building Under Construction of the building is complete.	on*  Finished Construction	
E1. Provide measurements (C.2.a in applicable Building measurement is above or below the natural HAG ar		appropriate boxes to show whether the	
<ul> <li>a) Top of bottom floor (including basement, crawlspace, or enclosure) is:</li> </ul>	feet 🔲 meters	above or below the HAG.	
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is:</li> </ul>	feet 🔲 meters	above or below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Section A Items 8 and/o	r 9 (see pages 1–2 of Instructions), the	
next higher floor (C2.b in app <b>licable</b> Building Dia <mark>gram) o</mark> f the building is:	🗌 feet 🚺 meters	above or below the HAG.	
E3. Attached ga <mark>rage (to</mark> p 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 on <mark>ly: If no</mark> flood depth number is available floodplain management ordinance?		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 representative sign here. The statements in Sections A, B, and E are c		cone A (without BFE) or Zone AO must	
Check here if attachments and describe in the Comr	ments area.		
Property Owner or Owner's Authorized Representative I	Name:		
Address:			
City:	State:	ZIP Code:	
Signature:	Date:		
Telephone: Ext.: Em	ail:		
Comments:			

**ELEVATION CERTIFICATE** 

# 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
15776 S ORMES SUNSET PL		Policy Number:	
City: TUCSON State: Arizona Z	IP Code: <u>85629</u>	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			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), Zo	ne AO, or Zo	ne AR/AO, or when item
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	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: New Construction	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		Datum:
G11. Variance issued? Yes No If yes, attach documenta			
The local official who provides information in Section G must sign here correct to the best of my knowledge. If applicable, I have also provided			
Local Official's Name:	Title:		
NFIP Community Name:			
Telephone:   Ext.: Email:			
Address:			
City:			
Signature:			
Comments (including type of equipment and location, per C2.e; descrip Sections A, B, D, E, or H):	otion of any attachments; and	d corrections	to specific information in

		TRUCTIONS ON PAG	323 3-13	
Building Street Address (including Apt., Unit, Sui 15776 S ORMES SUNSET PL	te, and/or Bldg. No.) or P.O. F	Route and Box No.:	FOR INSURA	NCE COMPANY USE
City: TUCSON	State: <u>Arizona</u> ZIP C	ode: 85629	Policy Number:	
·			Company NAIC	Number:
SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)				
The property owner, owner's authorized repres to determine the building's first floor height for nearest tenth of a foot (nearest tenth of a meter <i>Instructions) and the appropriate Building</i>	insurance purposes. Section r in Puerto Rico). <i>Reference</i>	s A, B, and I must als the Foundation Typ	o be completed. Ent be Diagrams (at the	er heights to the end of Section H
H1. Provide the height of the top of the floor (a	as indicated in Foundation Ty	/pe Diagrams) above	the Lowest Adjacent	Grade (LAG):
a) <b>For Building Diagrams 1A, 1B, 3, an</b> floor (include above-grade floors only for b subgrade crawlspaces or enclosure floors	buildings with	feet	☐ meters     ☐ al	pove the LAG
b) For Building Diagrams 2A, 2B, 4, an higher floor (i.e., the floor above basemen enclosure floor) is:		feet	☐ meters	pove the LAG
H2. Is <b>all</b> Machinery and Equipment servicing H2 arrow (shown in the Foundation Type Yes No				
SECTION I – PROPERTY OWN	FR (OR OWNER'S AUTH		ENTATIVE) CERT	FICATION
<i>A, B, and H are correct to the best of my know</i> indicate in Item G2.b and sign Section G.	<i>ledge.</i> <b>Note:</b> If the local flood	lplain management o	fficial completed Sec	tion H, they should
Check here if attachments are provided (in Property Owner or Owner's Authorized Repres	sentative Name:			
Property Owner or Owner's Authorized Repres				
Property Owner or Owner's Authorized Repres	sentative Name:			
Property Owner or Owner's Authorized Repres	sentative Name:			
Property Owner or Owner's Authorized Repres Address: City:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
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Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		
Property Owner or Owner's Authorized Repres Address: City: Signature: Telephone: Ext.:	sentative Name:	State:		

**ELEVATION CERTIFICATE** 

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

	BUILDING PHOTOGRAPHS See Instructions for Item A6.			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:		FOR INSURANCE COMPANY USE		
	776 S ORMES SUNSET PL			
City: TUCSON	State: <u>Arizona</u> ZIP Code: <u>85629</u>	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.				
	<image/>			

Photo One Caption: East side photo date 01/10/24



Photo Two Caption: West side photo date 01/10/24

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

	Continuation Page	
Building Street Address (including Apt 15776 S ORMES SUNSET PL	., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
City: TUCSON	State: Arizona ZIP Code: 85629	Policy Number:      Company NAIC Number:
Insert the third and fourth photograph View," or "Left Side View." When floo vents, as indicated in Sections A8 ar	ns below. Identify all photographs with the date taken and "F od openings are present, include at least one close-up photo nd A9.	ront View," "Rear View," "Right Side
	Photo Three	
Photo Three Caption: North side p	hoto date 01/10/24	
	Photo Four	

Photo Four Caption: South side photo date 01/10/24