TYPE 1 ELEVATION CERTIFICATE

THIS CERTIFICATE IS TO BE COMPLETED BY A REGISTERED ARCHITECT, LAND SURVEYOR OR CIVIL ENGINEER, AND RETURNED TO THE FLOODPLAIN MANAGEMENT SECTION OF THE COUNTY DEPARTMENT OF TRANSPORTATION AND FLOOD CONTROL DISTRICT.

B-11-10

THIS CERTIFICATE IS TO BE RETURNED TO PIMA COUNTY WITHIN 6 MONTHS AFTER THE MANUFACTURED HOME IS PLACED. FAILURE TO RETURN THIS CERTIFICATE IS A VIOLATION OF THE FLOODPLAIN MANAGEMENT ORDINANCE AND WILL RESULT IN A HOLD BEING PLACED ON ALL FUTURE BUILDING PERMITS FOR THIS OR ANY ADJACENT PROPERTY UNDER THE SAME OWNERSHIP.

BUILDING OWNERS NAME RACHEL MACCARELLI	THOMAS MACCARELLI		
PROPERTY OWNERS NAME (IF DIFFERENT)			
ADDRESS 6450 S. POST VALE ROAD			
LEGAL DESCRIPTION E2 W305.12' E380.	12' SE4 SE4		
PHONE NO. 883-4385			
BASIS OF REQUIREMENT Black Wash Study Firm #2200			

BY PERMIT OFFICIAL

THE PROPOSED MANUFACTURED HOME IS TO HAVE A MINIMUM ELEVATION DIFFERENCE OF 2.0 FEET BETWEEN THE LOWEST STRUCTURAL FRAME MEMBER AND THE HIGHEST ADJACENT GRADE. IF THE HOME IS TO BE PLACED ON A FILL PAD, THE FILL PAD MUST BE BUILT UP NA FEET ABOVE THE HIGHEST ADJACENT GRADE AND ARMORED.

BY REGISTRANT

THE BOTTOM OF THE LOWEST STRUCTURAL FRAME MEMBER IS 2.0 FEET ABOVE THE HIGHEST ADJACENT GRADE

NAME DON C. Presswall	IFICATE BZ459
COMPANY NAME Presswall & Associates	PRESSNAGULAR
ADDRESS 4902 9. CALTUS WEEN	2574 med 5
PHONE NO. 883-8172	ONA

(Seal)

PERMIT NO. 89-049 ISSUE DATE

ISSUE DATE 1-31-89

RECALL DATE 1-31-89