FPUP_99_440F-A

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

PCFC JAN : 7"02AM 7:41 O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

		SECTION A -	PROPERTY OWNER INFORMA	TION	For Insurance Company, Use:
BUILDING OWNER'S NA	Policy Number				
		Apt., Unit, Suite, and/or B	Idg. No.) OR P.O. ROUTE AND B		Company NAIC Number
CITY			STATE A	ZIP CO	95746
PROPERTY DESCRIPTION	ON (Lot and Block	Numbers, Tax Parcel N	umber, Legal Description, etc.)		<i>8</i> 3116
SOC	10021	TWN 0015	RN3 12		
		dential, Addition, Accesso	ory, etc. Use a Comments area, if a	necessary.)	
LATITUDE/LONGITUDE (##° - ##° - ##.##" or ##	(OPTIONAL)	HORIZON		GOURCE: GPS (Typ USGS Qu	
	· s	ECTION B - FLOOD IN	SURANCE RATE MAP (FIRM) I	NFORMATION	
B1. NFIP COMMUNITY NAME Pirma County	& COMMUNITY NUM 040073		2. COUNTY NAME ma County		33, STATE Arizona
B4. MAP AND PANEL	B5. SUFFIX		B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER 04019C 2.800	К	86. FIRM INDEX DATE 2/8/99	EFFECTIVE/REVISED DATE 2/8/99	B8. FLOOD ZONE(S)	(Zone AO, use depth of flooding)
B10. Indicate the source of the			d depth entered in B9.		. , , , ,
☐ FIS Profile	☐ FIRM	Community Determined	mined Other (Description		
B11. Indicate the elevation dat	tum used for the BFI	E in B9: NGVD 1929	☐ NAVD 1988	Other (Describe):	Back of B
B12. Is the building located in	a Coastal Barrier Re	esources System (CBRS) a	area or Otherwise Protected Area (OP		Designation Date
			LEVATION INFORMATION (SUF	RVEY REQUIRED)	
C1. Building elevations are ba				Finished Construction	
*A new Elevation Certifica	ate will be required w	then construction of the bui	ilding is complete.		
			the building for which this certificate is	being completed - see pac	ges 6 and 7. If no diagram
accurately represents the	building, provide a s	sketch or photograph.)		4	-
C3. Elevations - Zones A1-A3	30, AE, AH, A (with E	3FE), VE, V1-V30, V (with I	BFE), AR, AR/A, AR/AE, AR/A1-A30,	AR/AH, AR/AO	
Complete Items C3a-i b	elow according to th	e building diagram specifie	d in Item C2. State the datum used. If	the datum is different from	the datum used for the BFE in
Section B, convert the da	turn to that used for	the BFE. Show field measu	urements and datum conversion calcu	lation. Use the space prov	vided or the Comments area of
		cument the datum convers		. ,	
Datum Conversion	on/Comments				
		he elevation reference ma	rk used appear on the FIRM? 🔲 Ye		
a) Top of bottom floor			ft.(m)		
☐ b) Top of next higher f		•	ft.(m)	mbossed Seal, nd Date	
☐ c) Bottom of lowest ho		ember (V zonos only)	ft.(m)	ssec ate	
d) Attached garage (top of slab)				4 D D	. ~
e) Lowest elevation of		quipment		ा हा त	
•	ng (Describe in a Co	• -	ft.(m)	nber sture	
if) Lowest adjacent (fin			ft.(m)	<u> </u>	
g) Highest adjacent (fi			ft.(m)	License Number, E Signature,	
		s) within 1 ft. above adjacer		8	
i) Total area of all per			sq. in. (sq. cm)		
	SE	CTION D - SURVEYOR	R, ENGINEER, OR ARCHITECT		
This certification is to be s	signed and sealed	by a land surveyor, engi	ineer, or architect authorized by law	v to certify elevation info	rmation.
I certify that the information	on in Sections A, E	B, and C on this certificat	e represents my best efforts to inte	erpret the data available.	,
I understand that any fals	e statement may l	be punishable by fine or	imprisonment under 18 U.S. Code	, Section 1001.	
CERTIFIER'S NAME			. •	LICENSE NUMBER	
TITLE	.		COMPANY NAME		
ADDRESS			CITY	STATE	ZIP CODE
SIGNATURE			DATE	TELEP	HONE
FEMA Form 81-31, JUL 0	0	SEE REVERS	SE SIDE FOR CONTINUATION	REPLA	ACES ALL PREVIOUS EDITION

1P-99-440F-1				
IMPORTANT: In these spaces, co	py the corresponding information from Se	ction A.		For Insurance Company Use:
1650 W YE	t, Unit, Suite, and/orBidg. No.) OR P.O. ROUTE AND BO	XNO.		Policy Number
TUCSEN	STATE	AZ 8	ZIP CODE 5 746	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFICATIO	N (CONTINUE))
Copy both sides of this Elevation Certifica	ate for (1) community official, (2) insurance agent/co	moany and (3) building own	er e	
COMMENTS	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	inputy, and (5) ballang Own	я. ————	
		•		
-		-		
SECTION E PUIL DING	ELEVATION INFORMATION (CHECK TANCE)			Check here if attachmen
or Zone AO and Zone A 6-th-out DEED an	ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZON	E AO AND ZON	E A (WITHOUT BFE)
or zone AO and zone A (without BFE), co ection C must be completed.	mplete Items E1 through E4. If the Elevation Certifi	cate is intended for use as su	pporting information	on for a LOMA or LOMR-F,
1. Building Diagram Number /(Select the	building diagram most similar to the building for wh	ich this certificate is being co	Moletedeoo.eoe	oo 6 and 7. If no discourse as well
schreaging ris rolling 18' brosins 9 2Kelt	an or photograph.)			
2. The top of the bottom floor (including be	sement or endosure) of the building is Zft.(m)	On.(cm) 🗖 above or 🔲 b	elow (check one) f	the highest adjacent grade. (Use
natural grage, ir avaliabie).				
grade. Complete items C3.h and C3.i	is (see page 7), the next higher floor or elevated floo	r (elevation b) of the building	is 🚣 ft.(m) <u>@</u> in.	(cm) above the highest adjacent
4. For Zone AO only: If no flood death nut	mber is available, is the top of the bottom floor eleva	tod in noondones with the ex		
Yes No Unknown. The	local official must certify this information in Section	ica in accoluance will ine co G	anananays noodpa	ain management ordinance?
	TION F - PROPERTY OWNER (OR OWNER		ERTIFICATION	1
The property owner or owner's authorized	representative who completes Sections A, B, C (Ite	ms C3 h and C3 i only) and	F for Zone A /with	out a EEMA isound or community
issued BFE) or Zone AO must sign here.	The statements in Sections A, B, C, and E are corre	ect to the best of my knowled	79	1 -
PROPERTY OWNER'S OR OWNER'S A	UTHORIZED REPRESENTATIVE'S NAME		- SANT	Alha Tornez
ADDRESS ADDRESS			A2.	85746
Natto (LATA	11-2	CITY CON	STATE	ZIP CODE
SIGNATURE (DATE	TELEPI	
COMMENTS				
		- · · · · · · · · · · · · · · · · · · ·		Check here if attachment
a land affects to be to a state of	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)		
e local official who is authorized by law or artificate. Complete the applicable item(s)	ordinance to administer the community's floodplain	management ordinance can	complete Sections	A, B, C (or E), and G of this Eleva
	and sign below. Ken from other documentation that has been signed	and ambassad by a licenses	laurana analaa	or or outlies to be a set - 1 - 1 to
state or local law to certify elevation	information. (Indicate the source and date of the el	evation data in the Comment	i surveyor, engine s area below)	er, or architect who is authorized by
 A community official completed Sec 	tion E for a building located in Zone A (without a FEI	MA-issued or community-issu	ed BFE) or Zone	AO.
The following information (Items G4-	G9) is provided for community floodplain managem	ent purposes.	•	
34. PERMIT NUMBER 99~ 440 F	G5. DATE PERMIT ISSUED	G6. DATE CERTIF	TCATE OF COMPLI	ANCE/OCCUPANCY ISSUED
	w Construction Substantial Improvement			
 Elevation of as-built lowest floor (includin 	g basement) of the building is:	•	ft.(m)	Datum:
). BFE or (in Zone AO) depth of flooding at			ft.(m)	Datum:
OCAL OFFICIAL'S NAME		TITLE	2	1
COMMUNITY NAME		TELEPHONE		
SIGNATURE	——————————————————————————————————————	DATE		
COMMENTS				
		·		
				Check here if attachments