

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the Instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME ROBERT FELLOW CONSTRUCTION		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 578 BACHMAN CIRCLE		Policy Number
CITY CENTRAL ADULT	STATE OR	Company NAIC Number
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 77 COUNTRY MEADOWS ESTATES UNIT 1, PHASE 2		ZIP CODE 97502
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL		372W10RC TL3200
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##" or ##.####°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type); <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER JACKSON COUNTY 415589		B2. COUNTY NAME JACKSON	B3. STATE OR06004
B4. MAP AND PANEL NUMBER 415589 0402	B5. SUFFIX B	B6. FIRM INDEX DATE 4-1-82	B7. FIRM PANEL EFFECTIVE/REVISED DATE 4-1-82
		B8. FLOOD ZONE(S) C	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding, 1281.9)

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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. Building Diagram Number **8** (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, AR/AE, AR/A1-A30, AR/AH, AR/AO
 Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum **NGVD 29** Conversion/Comments **H/A**

Elevation reference mark used **Rm 1** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	1283	2 ft.
<input type="checkbox"/> b) Top of next higher floor	1284	2 ft.
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	H/A	ft.
<input type="checkbox"/> d) Attached garage (top of slab)	1283	0 ft.
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	1283	3 ft.
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	1283	2 ft.
<input type="checkbox"/> g) Highest adjacent grade (HAG)	1283	2 ft.
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	10	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	1500	sq. in.

REGISTERED PROFESSIONAL LAND SURVEYOR

James E. Hibbs

OREGON
JULY 17, 1986
JAMES E. HIBBS
2234
RENEWAL DATE 6-30-01

License Number, Embossed Seal, Signature, and Date

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
 I certify that the information in Sections A, B, and C 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.

CERTIFIER'S NAME JAMES E. HIBBS	LICENSE NUMBER PLS 2234 OR06004
TITLE LAND SURVEYOR	COMPANY NAME L.S. FRIAR & ASSOCIATES, P.C.
ADDRESS 816 WEST 8TH ST.	CITY MADFORD
SIGNATURE <i>James E. Hibbs</i>	STATE OR
	ZIP CODE 97501
	TELEPHONE (541) 772-2782

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 578 BACHMAN CIRCLE	For Insurance Company Use Policy Number
CITY CENTRAL POINT	Company NAIC Number
STATE OR	ZIP CODE 97501

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
Item C3a is elev of crawl space. Item C3b is elev of habitable floor.

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- 1 Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- 2 The top of the bottom floor (including basement or enclosure) of the building is 27 ft.(m) in.(cm) above or below (check one) the highest adjacent grade.
- 3 For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is 22 ft.(m) in.(cm) above the highest adjacent grade.
- 4 For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____ TELEPHONE _____

COMMENTS _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER <u>BOFC0321</u>	G5. DATE PERMIT ISSUED <u>10/25/01</u>	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED <u>1/28/02</u>
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This permit has been issued for: New Construction Substantial Improvement

Elevation of as-built lowest floor (including basement) of the building is: 1283 ft.(m) Datum: NGVD 1929
BFE or (in Zone AO) depth of flooding at the building site is: 1281 ft.(m) Datum: NGVD 1929

LOCAL OFFICIAL'S NAME Math Samitore TITLE Community Planner

COMMUNITY NAME Central Point TELEPHONE (541) 664-3321

SIGNATURE Math Samitore DATE 1/28/02

COMMENTS _____

Check here if attachments