

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 - 5.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

Company NAIC Number

CITY

STATE

ZIP CODE

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use comments section if necessary.)

LATITUDE/LONGITUDE (OPTIONAL)
(##°-##'-##.##" or ##.####")

HORIZONTAL DATUM:

SOURCE: ☐ GPS (Type: _____)

☐ NAD 1927 ☐ NAD 1983

☐ USGS Quad Map ☐ Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER

B2. COUNTY NAME

B3. STATE

065043

LOS ANGELES

CA

B4. MAP AND PANEL
NUMBER

B5. SUFFIX

B6. FIRM INDEX
DATE

B7. FIRM PANEL
EFFECTIVE/REVISED DATE

B8. FLOOD
ZONE(S)

B9. BASE FLOOD ELEVATION(S)
(Zone AO, use depth of flooding)

0050

B

12-2-80

11-15-85

"C"

N/A "C"

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: PANEL 0050)

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)

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. Building Diagram Number B (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. 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, AR/A, 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 _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☐ No

☐ a) Top of bottom floor (including basement or enclosure) _____ ft. (m)

☐ b) Top of next higher floor _____ ft. (m)

☐ c) Bottom of lowest horizontal structural member (V zones only) _____ ft. (m)

☐ d) Attached garage (top of slab) _____ ft. (m)

☐ e) Lowest elevation of machinery and/or equipment servicing the building _____ ft. (m)

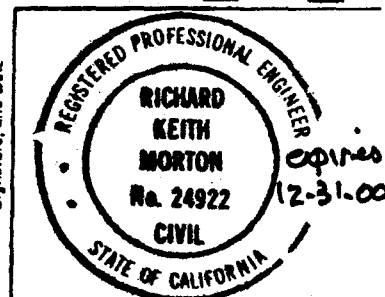
☐ f) Lowest adjacent grade (LAG) _____ ft. (m)

☐ g) Highest adjacent grade (HAG) _____ ft. (m)

☐ h) No. of permanent openings (flood vents) within 1.0 ft. of LAG _____

☐ i) Total area of all permanent openings (flood vents) in C3h _____ sq. in. (sq. cm)

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

RICHARD K. MORTON

LICENSE NUMBER

RCE 24922

TITLE

COMPANY NAME

ADDRESS 30181 STATE ST.

CITY HEMET

STATE CA

ZIP CODE 92543

SIGNATURE Richard K. Morton

DATE 5-8-00

TELEPHONE 909 925-3944

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use.
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

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 TOPO VARYS ABOUT 1' (VERT) - FW. FLR. TO BE 30" TO 42" ABOVE GROUND. HOUSE LOCATION IS IN ZONE "C". PORTION OF PARCEL IS IN ZONE "A": 200'± TO 300'± WIDE CENTERED ON CREEK. FROM E'LY PROP. LINE TO 475'± W. (BASED ON COPY OF PARCEL 0050)

☐ Check here if attachment:

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONES AO and A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade.
- E3. 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			

☐ Check here if attachment:

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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. Check the applicable box(es) 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 G1-G6) is provided for community floodplain management purposes.

G1. PERMIT NUMBER	G2. DATE PERMIT ISSUED	G3. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G4. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G5. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G6. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachment: