

(3)  
**ELEVATION CERTIFICATE**  
**FEDERAL EMERGENCY MANAGEMENT AGENCY**  
**NATIONAL FLOOD INSURANCE PROGRAM**

O.M.B. No 3067-0077  
Expires May 31, 1993

**NOTE:** Use of this certificate does not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR). Instructions for completing this form can be found on the following pages.

**SECTION A PROPERTY INFORMATION**

<b>BUILDING OWNER'S NAME</b> [REDACTED]	<b>FOR INSURANCE COMPANY USE</b>
<b>STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NUMBER</b> 29224 LAKE SHORE DRIVE	<b>POLICY NUMBER</b>
<b>OTHER DESCRIPTION (Lot and Block Numbers, etc.)</b> BPC 6899 Dist of 9.1 3-4-91	<b>COMPANY NAIC NUMBER</b>
<b>CITY</b>	<b>STATE</b> <b>ZIP CODE</b>

**SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

Provide the following from the proper FIRM (See Instructions):

<b>1. COMMUNITY NUMBER</b> 065043	<b>2. PANEL NUMBER</b> 0757	<b>3. SUFFIX</b> B	<b>4. DATE OF FIRM INDEX</b> 12-2-80	<b>5. FIRM ZONE</b> A11	<b>6. BASE FLOOD ELEVATION</b> (in AO Zones, use depth) MIN FLOOR 737.0
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7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): ☐ NGVD '29 ☐ Other (describe on back)
8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE: [ ] feet NGVD (or other FIRM datum—see Section B, Item 7).

**SECTION C BUILDING ELEVATION INFORMATION**

1. Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level \_\_\_\_.
- 2(a). FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference level floor from the selected diagram is at an elevation of [ ] feet NGVD (or other FIRM datum—see Section B, Item 7).
- (b). FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest horizontal structural member of the reference level from the selected diagram, is at an elevation of [ ] feet NGVD (or other FIRM datum—see Section B, Item 7).
- (c). FIRM Zone A (without BFE). The floor used as the reference level from the selected diagram is [ ] feet above ☐ or below ☐ (check one) the highest grade adjacent to the building.
- (d). FIRM Zone AO. The floor used as the reference level from the selected diagram is [ ] feet above ☐ or below ☐ (check one) the highest grade adjacent to the building. If no flood depth number is available, is the building's lowest floor (reference level) elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown
3. Indicate the elevation datum system used in determining the above reference level elevations: ☐ NGVD '29 ☐ Other (describe under Comments on Page 2). (NOTE: If the elevation datum used in measuring the elevations is different than that used on the FIRM [see Section B, Item 7], then convert the elevations to the datum system used on the FIRM and show the conversion equation under Comments on Page 2.)
4. Elevation reference mark used appears on FIRM: ☐ Yes ☐ No (See Instructions on Page 4)
5. The reference level elevation is based on: ☐ actual construction ☐ construction drawings  
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)
6. The elevation of the lowest grade immediately adjacent to the building is: [ ] feet NGVD (or other FIRM datum—see Section B, Item 7).

**SECTION D COMMUNITY INFORMATION**

1. If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is: [ ] feet NGVD (or other FIRM datum—see Section B, Item 7).
2. Date of the start of construction or substantial improvement [ ]

# APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

## WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. \_\_\_\_\_ Company \_\_\_\_\_  
☐ Certified copy is hereby furnished.  
☐ Certified copy is filed with the county building inspection department.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

## CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 10-19-90 Applicant \_\_\_\_\_

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

## LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number \_\_\_\_\_ Lic. Class \_\_\_\_\_

Contractor \_\_\_\_\_ Date \_\_\_\_\_

☐ I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code.)

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code.)

## CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name \_\_\_\_\_

Lender's Address \_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent \_\_\_\_\_ Date 10-19-90

BUILDING ADDRESS <u>29224 S. LAKE SHORE DR.</u>		FOR APPLICANT TO FILL IN	
CITY <u>AGOURA</u>	CA.	ZIP <u>91301</u>	
SIZE OF LOT <u>1/4</u>	NO. OF BLDGS. NOW ON LOT <u>2</u>	LOT NO. <u>14</u>	
TRACT <u>8900</u>	BLOCK <u>763</u>	PAGE <u>053</u>	
ASSESSOR MAP BOOK <u>8900</u>	PARCEL <u>053</u>	TEL. NO. <u>899-1154</u>	
OWNER <u>29224 S. LAKE</u>	ADDRESS <u>AGOURA</u>	CA.	ZIP <u>91301</u>
ARCHITECT OR ENGINEER	TEL. NO.		
ADDRESS			
CONTRACTOR <u>OWNER</u>	TEL. NO.		
ADDRESS	LIC. NO.		
CITY	LIC. CLASS		
SQ. FT. SIZE <u>464</u>	NO. OF STORES <u>1</u>	NO. OF FAMILIES <u>1</u>	
DESCRIPTION OF WORK <u>ADD 2 BEDROOM / DECK</u>			
<u>ONE F / DINING AREA</u>			
USE OF EXISTING BLDG. <u>1-FAM 1-STORY</u>			
APPLICANT (PRINT) <u>DON MERTENS</u>	TEL. NO. <u>459-1093</u>		
ADDRESS <u>533 #1 W. CHANNEL RD.</u>			
WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL, EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD) SEE PERMITTING CHECKLIST FOR GUIDELINES			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
I HAVE READ THE HAZARDOUS MATERIALS INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST I UNDERSTAND ANY REQUIREMENTS UNDER THE LOS ANGELES COUNTY CODE, TITLE 22, CHAPTER 2.20, SECTIONS 2.20.100 THROUGH 2.20.140 CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.			
OWNER OR AGENT		PERMIT FEE	
P.C. FEE		ISSUANCE FEE	
INVESTIGATION FEE		TOTAL FEE	

BUILDING ADDRESS <u>29224 Lakeshore</u>		BUILDING AND SAFETY	
LOCALITY <u>Agoura</u>	NEAREST CROSS ST. <u>Malibu Lake</u>	USE ZONE <u>R1</u>	SPECIAL CONDITIONS <u>150-057</u>
WITHIN 1000 FT. OF SCHOOL?	YES	NO	
DISTRICT <u>9.1</u>	GROUP <u>R3</u>	TYPE CONST. <u>V</u>	FIRE ZONE <u>4</u>
STATISTICAL CLASSIFICATION <u>9.1</u>	DWELL UNITS <u>2</u>	APT	CONDO
REQUIRED SET BACK FRONT SIDE REAR	YARD	HWY	TOTAL SETBACK FROM PROP LINE
SEWER MAP BK PG	VALUATION <u>\$ 40,000</u>		
	\$		
	LDMA P/C #		
	LDMA Perm #		
FINAL DATE	FINAL BY		
Expired in plan check 10-17-93			
#23 01*31154 *23-6899 10-17-90			