



# COUNTY OF LOS ANGELES

## DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

### Memo of Review For Correctness and Completion

The attached FEMA Elevation Certificate has been reviewed by this office.  
The items noted below are not correct on the attached form and should read as entered on this page.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29470 Lake Vista Drive		Company NAIC Number
City Agoura Hills	State CA ZIP Code 91301	

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
PORTION OF LOT 1, PM 209-96-98 APN:4464-002-049

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)

A5. Latitude/Longitude: Lat. Long. Horizontal Datum: ☐ NAD 1927 ☐ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade

c) Total net area of flood openings in A8.b sq in

d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

a) Square footage of attached garage sq ft

b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade

c) Total net area of flood openings in A9.b sq in

d) Engineered flood openings? ☐ Yes ☐ No

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/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 base flood depth)

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe)

B11. Indicate elevation datum used for BFE in Item 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 ☐ CBRS ☐ OPA

Local Official's Name George De La O

Title Senior Civil Engineer

Community Name County of Los Angeles 065043

Telephone (626) 458-7155

Signature

Date January 21, 2016

Comments: Corrections to page 2 as was shown on applicants prior submittal:

Section E5: E5 is to indicate "N/A"

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name	FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29470 LAKE VISTA DRIVE	Policy Number:
City AGOURA HILLS State CA ZIP Code 91301	Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
PORTION OF LOT 1, PM 209-96-98 APN: 4464-002-049

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat 34°06'24.5" Long 118°46'01.7" Horizontal Datum ☐ NAD 1927 ☒ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 1A

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 10 foot above adjacent grade N/A  
c) Total net area of flood openings in A8 b N/A sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage

- a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 10 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☒ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number LOS ANGELES COUNTY 065043	B2. County Name LOS ANGELES	B3. State CA			
B4. Map/Panel Number 06037C1507	B5. Suffix F	B6. FIRM Index Date 09-26-2008	B7. FIRM Panel Effective/Revised Date 09-26-2008	B8. Flood Zone(s) A,D	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 740.7

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other/Source: Preliminary FIRM Triunfo Creek

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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

## 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. 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 C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: DY9126

Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- |  |               |  |
|--|---------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  | <u>762.04</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor  | <u>774.36</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)  | <u>N/A</u>    | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| d) Attached garage (top of slab)   | <u>762.59</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | <u>762.83</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)   | <u>761.98</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | <u>762.83</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                               | <u>N/A</u>    | <input type="checkbox"/> feet <input type="checkbox"/> meters            |

## 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 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☐ Check here if attachments. licensed land surveyor? ☐ Yes ☒ No

Certifier's Name STEVE OPDAHL License Number LS6498  
Title LAND SURVEYOR Company Name STEVE OPDAHL SURVEYING  
Address 206 DRYDEN STREET City THOUSAND OAKS State CA ZIP Code 91360  
Signature [Signature] Date 12-02-2015 Telephone (805) 495-6438



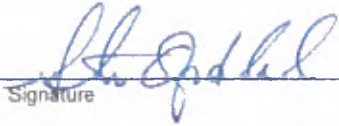
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29470 LAKE VISTA DRIVE		Policy Number:
City AGOURA HILLS	State CA ZIP Code 91301	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 Lowest elevation of machinery or equipment refers to a pair of air conditioning units on the eastern side of the property. Latitude and Longitude derived from Google Earth Pro. Preliminary FIRM published by FEMA is attached

  
Signature12-02-2015  
Date**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG)
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A ☐ feet ☐ meters ☐ above or ☒ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A ☐ feet ☐ meters ☒ above or ☐ below the LAG
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2 b in the diagrams) of the building is N/A ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is N/A ☐ feet ☐ meters ☐ above or ☐ below the HAG
- E4. Top of platform of machinery and/or equipment servicing the building is N/A ☐ feet ☐ meters ☐ above or ☐ below the HAG
- E5. 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. The statements in Sections A, B, and E are correct to the best of my knowledge

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1 ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below)
- G2 ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO
- G3 ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site:	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G10. Community's design flood elevation:	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.



**Building Photographs**

See Instructions for Item A6.

**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.  
29470 LAKE VISTA DRIVE

Policy Number:

City AGOURA HILLS

State CA

ZIP Code 91301

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT VIEW

# Building Photographs

Continuation Page

**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.  
29470 LAKE VISTA DRIVE

Policy Number:

City AGOURA HILLS

State CA

ZIP Code 91301

Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



REAR VIEW.