

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

BUILDING OWNER'S NAME <u>[REDACTED]</u>		For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>31229 San Martinez Road</u>		Company NAIC Number	
CITY <u>Castaic</u>	STATE <u>CA</u>	ZIP CODE <u>91384</u>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 102, Tr. No.</u>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use comments section if necessary.) <u>Residential</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##" or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type: <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: <input type="checkbox"/>	
		<input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	

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

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Val Verde 065043</u>		B2. COUNTY NAME <u>Los Angeles</u>		B3. STATE <u>CA</u>	
B4. MAP AND PANEL NUMBER <u>065043 0340</u>	B5. SUFFIX <u>B</u>	B6. FIRM INDEX DATE <u>12/02/80</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>12/2/80</u>	B8. FLOOD ZONE(S) <u>AO-1</u>	B9. BASE FLOOD ELEVATION (Zone AO, use depth of flood) <u>1414.0</u>

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

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.

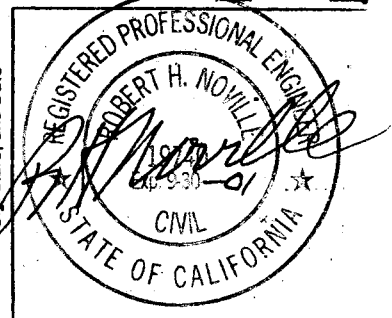
C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - pages 4 and 5. If no diagram accurately represents the building, provide a sketch or photograph.)

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

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>1415</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>1423</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V-zones only)	<u>1414</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>1415</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>1411.3</u> 4 ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>1412.8</u> 2 ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>4</u>
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1.0 ft. of LAG	<u>480</u> sq. in. (sq. cm)
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	

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 R.H. Noville LICENSE NUMBER CE 19740

TITLE Civil Engineer COMPANY NAME \_\_\_\_\_

ADDRESS 27959 Featherstar Ave. CITY Saugus STATE CA ZIP CODE 91350-1740

SIGNATURE R.H. Noville DATE 6/21/01 TELEPHONE (661) 296-8027

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>31229 San Martinez Road</b>		For Insurance Company Use Policy Number
CITY <b>Val Verde</b>	STATE <b>CA</b>	ZIP CODE <b>91384</b>
		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 **Building Foundation 3' Below Grade**

☐ Check here if attached

#### 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 attached

#### 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 attached