

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 [REDACTED]		For Insurance Company Use: Policy Number [REDACTED]
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 33418 WILCONSAI STREET		Company NAIC Number [REDACTED]
CITY ACTON	STATE CA	ZIP CODE 93510
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) [REDACTED]		

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

RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.####") **[REDACTED]** HORIZONTAL DATUM: ☐ NAD 1927 ☐ NAD 1983 SOURCE: ☐ GPS (Type: **[REDACTED]**) ☐ USGS Quad Map ☐ Other: **[REDACTED]**

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 065043		B2. COUNTY NAME L.A. Co.		B3. STATE CA.	
B4. MAP AND PANEL NUMBER 0380	B5. SUFFIX B	B6. FIRM INDEX DATE 12-2-1980	B7. FIRM PANEL EFFECTIVE/REVISED DATE 11-15-85	B8. FLOOD ZONE(S) C/A	B9. BASE FLOOD ELEVATION (Zone AO, use depth of flooding) FLOOD WAY MAP 4081 ACTON CANYON FLOOD

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: **[REDACTED]**)

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

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or otherwise protected area (OPA)? ☐ Yes ☐ No
Designation Date: **[REDACTED]**

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 **5** (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 **[REDACTED]** Conversion/Comments **[REDACTED]**

Elevation reference mark used **[REDACTED]** Does the elevation reference mark used appear on the FIRM? ☐ Yes ☐ No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____ ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____ ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	_____ ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	_____ ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1.0 ft. of LAG	_____
<input type="checkbox"/> 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 NORIK BEDASSIAN	LICENSE NUMBER C053083
TITLE ENGINEER	COMPANY NAME AV-GEOTECHNICS INC.
ADDRESS 38713 9TH ST. E.	CITY Palmdale
SIGNATURE [Signature]	DATE 6-28-02
	STATE CA
	ZIP CODE 93550
	TELEPHONE 661-273-3123

In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:
STREET ADDRESS (Including Apt., Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number
3418 WISCONSIN STREET		
STATE	ZIP CODE	Company NAIC Number
ACTON CA.	93510	

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

THE SOUTH 100 FEET OF THE PROPERTY LOCATED WITH IN FLOOD HAZARD ZONE A. BUT BUILDING PAD ELEV. 2970 LOCATED IN ZONE C APPROX. 20 FEET ABOVE FLOOD ELEVATION.

☐ 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
G4. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> 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