**CE PROGRAM** 

This form is to be used for: 1) Post-FIRM construction only when the base flood information is available for the building site; and 2) Pre-FIRM buildings rated using Post-FIRM rules.

		1113	atractions for completing	g this form can be four	d on the reverse side.				
BUILDING OWNER'S N	NAME	· · · · · · · · · · · · · · · · · · ·			POLICY NUMBER				
33535 1701	TH STREET E	AST				,			
STREET ADDRESS							<del></del>		
AptA/Unit-U Suite-S/	/BldgB		NO.		ROUTE	В	OX NUMBÉR		
AMB 3036-1	13-36	F				BDC #12E	BPC #1251		
OTHER DESCRIPTION		bers., etc.)				Dr C #125			
LLANO						CA	93544		
CITY						STATE	ZIP CODE		
IIntormation tor zone	is A1-A30, AE, Al r's representative	i, A(with BFE should come	), V1-V30, VE, and Nete the information odplain manageme	V(with BFE) is red in Section I and r ent information may	uired. In the case on nay also complete to also complete this		official the property		
		SEC	TION I BUIL	DING ELEVATIO	N INFORMATION	<b>V</b>			
1. Using the Flood	I Insurance Man	ual or the N	IFIP Flood Insura	nce Application-	-Part 2 Workshee	t, indicate the proper d	iagram number_1		
					evel floor from the	selected diagram is a	ıt an		
		•	other datum-see	•					
			.). The bottom offeet NG			ember of the reference	e level floor from		
	-			•		t above highest natura	l grada novt to		
						flood depth number list			
flood depth nun	nber is available	e, is the bu	ilding's lowest flo	or (or reference		accordance with the c			
floodplain mana	•	<del></del>	Yes □No □			₩ □			
			_			s:⊠NGVD ☐ Other (			
						Other (describe on I	•		
(ATTENTION must be conv	: If the elevation of the datu	datum used i m system us	n measuring the ele ed on the FIRM.)	evations is differen	t than that used on	the FIRM, then the eleval	tions provided		
tion drawings construction.	er is only valid and do not con After construction od insurance co owing measure	if the buildin oplete ques on of the reverage.	ng does not have tion #8. If "No" i ference level floo	e the reference le is checked, this or or is completed, a de next to the bu	certification will be a post-construction ilding (round to the		gs in the course of		
	· · · · · · · · · · · · · · · · · · ·	nu (abaal: a	one) the highest o		garage floor (if a	· <u>·</u>	46 - 14 - 6 - 4 - 4 - 4		
105 I feet X	Jabovebei	ow (check c	one) the highest g one) the lowest gr	grade. Di		below (check one)			
					<del></del>		the lowest grade.		
		SECTION	II FLOOD IN	SURANCE RAT	E MAP INFORMA	TION			
Provide the follow	ing from the pro	oper FIRM (	(see Instructions	on back-Date of	FIRM) and accor	mpanying insurance ap	plication:		
COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	BASE FLOOD ELI	epth)   ELEVATION ESTABL	MATED BASE FLOOD LISHED FOR ZONE A		
065043	450	D	12-2-80		3275.60	OR ZONE V,	IF AVAILABLE		
Elevation reference		poears on F		No (See revers	e side for details)		J		
			SECTION			<u></u>			
This certification is a elevation information property owner, or to floodplain management the data available. I	to be signed by a n for zones A1-A3 the owner's repre- nent information, i understand that	land surveyo 30, AE, AH, A sentative can nay also sigr any false sta	or, engineer, or archivith BEE) V1-V30	hitect who is autho	rized by state law to IFE) is required. In t cials who are author ormation on this cen imprisonment under	o certify elevation information case of the AO, the rize of the AO, the AO	nance to provide at efforts to interpret 001.		
D 5 4	01:11					OF THE PERSON OF			
Roger D. ( CERTIFIER'S NAME	ulladen		·		LICENSE NUMBERS	or Affin Spair 3845			
OWNER				ADDOM ENCL	₩.	Exp. 12-31-93	Ä		
TITLE		<del></del>	<del></del>	ARROW ENGI	NEEKING 1		<i> </i>		
	TH STREET V	<b>J</b> FST		LANCASTER		WATE CIVIL TO THE	9323 <i>l</i> ı		
ADDRESS //		- 1	• ·	CITY	· · · · · · · · · · · · · · · · · · ·	UI CATAL	ZIP		
Kogi	A/1.	Ola.	in		3/1/9	90 (805)	949-2525		
SIGNATURE	U					ATE PHON			