

### **COUNTY OF LOS ANGELES**

#### **DEPARTMENT OF PUBLIC WORKS**

"To Enrich Lives Through Effective and Caring Service"

#### MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SEC	TION A - PROPERTY INFORMA	TION For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or 3809 Roberts Road	Bidg. No.) or P.O. Route and Box No	Company NAIC Number
City State ZIP Code Acton CA 93510		
A3. Property Description (Lot and Block Numbers, Tax Parcel APN 3208-018-057	Number, Legal Description, etc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition,		
A5. Latitude/Longitude: Lat LongLat 34°28' 3	6.18" <b>Long</b> 118°11' 55.28"	Horizontal Datum: NAD 1927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certifica A7. Building Diagram Number	its is being used to obtain flood insura	nce.
A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b	sq ft a) Squi b) No. walk sq in c) Total	ilding with an attached garage, provide: are footage of attached garage sq ft of permanent flood openings in the attached garage s within 1.0 foot above adjacent grade i net area of flood openings in A9.b sq in
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM	INFORMATION
B1. NFIP Community Name & Community Number Los Angeles County 065043	B2. County Name	B3. State
84. Map/Panel Number         B5. Suffix         B6. FIRM Index Date           065043 0390         July 6, 1998	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) date	•	39.
☐ FIS Profile ☑ FIRM ☐ Community Deb	_ , ,	Other (Describe)
B11. Indicate elevation datum used for BFE in Item B9:   B12. Is the building located in a Coastal Barrier Resources Syst  Designation Date	<del>-</del>	☐ Other (Describe) and Area (OPA)? ☐Yes ☑No
SECTION C - BUILDING	ELEVATION INFORMATION (SI	JRVEY REQUIRED)
C1. Building elevations are based on:  Construction Dr A new Elevation Certificate will be required when construct	awings* Building Under C	
<ol> <li>Elevations Zones A1-A30, AE, AH, A (with BFE), VE, V1-Velow according to the building diagram specified in Item A7 Benchmark Utilized Vertical Datum</li> </ol>		AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g
Conversion/Comments		
COMMENTS: For Section F, See Section D.	·	
		diar
Date of Review: 7/29/10	Community Official:	The George De La D

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

### SUPPLEMENTAL INFORMATION FOR SECTION E

IMPORTANT: In these spaces, c	opy the corresponding information from	Section A.	For Insurance Company Use:
	Unit, Suite, and/or Bldg. No.) or P.O. Route and		Policy Number
City Acton, CA 93510	State	ZIP Code	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CON	ITINUED)
Copy both sides of this Elevation Certifi	icate for (1) community official, (2) insurance age	ent/company, and (3) building owr	ner.
Comments			
Signature	Date		
			Check here if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY NOT R	EQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
	omplete Items E1-E5. If the Certificate is intende trade, if available. Check the measurement used		
grade (HAG) and the lowest adjac	the following and check the appropriate boxes to cent grade (LAG). basement, crawlspace, or enclosure) is1.		_
<ul><li>b) Top of bottom floor (including to</li></ul>	basement, crawlspace, or enclosure) is	lfeet lmeters lab	ove or below the LAG.
E2. For Building Diagrams 6-9 with per (elevation C2.b in the diagrams)	ermanent flood openings provided in Section A I of the building is N/A . feet m	tems 8 and/or 9 (see pages 8-9 o leters above or below th	
E3. Attached garage (top of slab) is	feet meters above	or below the HAG.	
	I/or equipment servicing the building is1  number is available, is the top of the bottom floor		
<u> </u>	Unknown. The local official must certify this ir		community's noodplain management
SECTION	F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTIF	ICATION
	red representative who completes Sections A, B ments in Sections A, B, and E are correct to the		1A-issued or community-issued BFE)
Property Owner's or Owner's Authorize	d Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Telephor	
	Date	Γειεμποι	
Comments			
			☐ Check here if attachments
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)	
	v or ordinance to administer the community's flooplete the applicable item(s) and sign below. Che		
	vas taken from other documentation that has beelevation information. (Indicate the source and d		
	d Section E for a building located in Zone A (with	•	v-issued BFE) or Zone AO.
G3. L The following information (Item	ns G4-G9) is provided for community floodplain r	nanagement purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Comp	liance/Occupancy Issued
G7. This permit has been issued for:	New Construction Substantial Impro	vement	
G8. Elevation of as-built lowest floor (inc	cluding basement) of the building	feet meters (P	R) Datum
G9. BFE or (in Zone AO) depth of floodi	ing at the building site	feet meters (P	R) Datum
G10. Community's design flood elevation	n	feet  meters (P	R) Datum
Local Official's Name	Tit	le	_
Community Name	Te	lephone	
Signature	Da	ate	
Comments			
			Check here if attachments

# FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

### **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number IZEBERTS CITY STATE ZIP CODE PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 3 208 - 018 - 057

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) DEN CIAL HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) SOURCE: GPS (Type): ( ##° - ##' - ##.##" or ##.####") □ NAD 1927
□ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** METON 065043 **B4. MAP AND PANEL** B7. FIRM PANEL B9. BASE FLOOD ELEVATION(S) NUMBER B5. SUFFIX **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 2-2-80 390 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): 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)? Designation Date ☐ Yes ☐ No 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 [ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. 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 C3.-a-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\_ ROFESSIO o a) Top of bottom floor (including basement or enclosure) License Number, Embossed Seal, Signature, and Date o b) Top of next higher floor ft.(m) o c) Bottom of lowest horizontal structural member (V zones only) ft.(m) o d) Attached garage (top of slab) ft.(m) C 53083 o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) Exp. 6-30-07 o f) Lowest adjacent (finished) grade (LAG) . ft.(m) o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade o i) Total area of all permanent openings (flood vents) in C3.h \_ sq. in. (sq. cm) 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 LICENSE NUMBER COMPANY NAME **ADDRESS** ZIP CODE DALMOALL SIGNATURE TELEPHONE

IMPORTANT: In these spaces, copy t	<u></u>			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Ur	it, Suite, and/or Bldg. No.) OR P.O. ROUTE AN	D BOX NO.		Policy Number
CITY	Sī	ГАТЕ	ZIP CODE	Company NAIC Number
SECTION	ON D - SURVEYOR, ENGINEER, OR	ARCHITECT C	ERTIFICATION (CONTINUED	)
Copy both sides of this Elevation Certificate fo	r (1) community official, (2) insurance agent	t/company, and (3	) building owner.	
COMMENTS				
		/// <b>/</b>		Check here if attachments
<del></del>	EVATION INFORMATION (SURVE)		· · · · · · · · · · · · · · · · · · ·	<del></del>
or Zone AO and Zone A (without BFE), comple oction C must be completed	ete Items E1 through E4. If the Elevation C	ertificate is intende	ed for use as supporting information	for a LOMA or LOMR-F,
lection C must be completed. :1. Building Diagram Number _(Select the build	ding diagram most similar to the building for	which this cortific	ata is haing completed see nages	6 and 7. If no disoram accurately
represents the building, provide a sketch or		//	aic is builing withpicted – see pages	o and r. In no diagram accurately
<ol> <li>The top of the bottom floor (including basem natural grade, if available).</li> </ol>		.(m) <u>Ø</u> in.(cm) 🗍	above or below (check one) the	ne highest adjacent grade. (Use
<ol> <li>For Building Diagrams 6-8 with openings (so grade. Complete items C3.h and C3.i on fr</li> </ol>		l floor (elevation b)	of the building isft.(m)in.(cn	n) above the highest adjacent
<ol> <li>The top of the platform of machinery and/or natural grade, if available).</li> </ol>		.(m)in.(cm) 🗀	above or Delow (check one) the	ne highest adjacent grade. (Use
5. For Zone AO only: If no flood depth numbe	r is available, is the top of the bottom floor e al official must certify this information in Sec		ance with the community's floodplair	management ordinance?
	ON F - PROPERTY OWNER (OR OW		SENTATIVE) CERTIFICATION	· · · · · · · · · · · · · · · · · · ·
The property owner or owner's authorized repr	<del></del>	·····	<del></del>	
issued BFE) or Zone AO must sign here. The	statements in Sections A, B, C, and E are	correct to the best	of my knowledge.	
PROPERTY OWNER'S OR OWNER'S AUT	HORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELEI	PHONE
COMMENTS				
				Charle have if attachment
·	SECTION G - COMMUNITY	(INFORMATIO	N (OPTIONAL)	Check here if attachments
he local official who is authorized by law or ord			·	A, B, C (or E), and G of this Elevation
Certificate. Complete the applicable item(s) and	•	r.saiagomon		, = , 5 (or = ), and o or and clotudor
61. 🔲 The information in Section C was taken	from other documentation that has been s	•		r, or architect who is authorized by star
•	ion. (Indicate the source and date of the el		*	
62. A community official completed Section				.O.
33. The following information (Items G4-G9		ayement pulposes		NI JANIOE/OOOLIDANIOV/1001/ED
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF COMP	PLIANCE/OCCUPANCY ISSUED
7. This permit has been issued for: New	·	nt		
88. Elevation of as-built lowest floor (including b	· -		ft.(m)	Datum:
9. BFE or (in Zone AO) depth of flooding at the	e building site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TIT	LE	
COMMUNITY NAME			LEPHONE	
SIGNATURE		DA 	TE	
COMMENTS	_			
				Check here if attachments



## **COUNTY OF LOS ANGELES**

#### **DEPARTMENT OF PUBLIC WORKS**

"To Enrich Lives Through Effective and Caring Service"

#### MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

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. 3809 Roberts Road	Company NAIC Number
City State ZIP Code Acton CA 93510	-
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	
APN 3208-018-057	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  A5. Latitude/Longitude: Lat Long Lat 34°28' 36.18" Long 118°11' 55.28" Horizontal Datum:  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 crawl space or enclosure(s), provide  a) Square footage of crawl space or enclosure(s) sq ft a) Square footage of attact	· · ·
	openings in the attached garage
enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above	· · · —
c) Total net area of flood openings in A8.b sq in c) Total net area of flood openings in A8.b sq in c) Total net area of flood openings in A8.b	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1. NFIP Community Name & Community Number Los Angeles County 065043  B2. County Name	B3. State
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date July 6, 1998 B7. FIRM Panel Effective/Revised Date December 2, 1980 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)?  ☐ CBRS ☐ OPA	) ∐Yes ⊠No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)
C1. Building elevations are based on:  Construction Drawings* Building Under 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/AF below according to the building diagram specified in Item A7.  Benchmark Utilized Vertical Datum  Conversion/Comments	Finished Construction  I, AR/AO. Complete Items C2.a-g
COMMENTS: For Section F, See Section D.	
Date of Review: Community Official:	

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

### SUPPLEMENTAL INFORMATION FOR SECTION E

IMPORTANT: In these spaces. c	copy the corresponding information fro	om Section A.	For Insurance Company Use:
Building Street Address (including Apt.,	, Unit, Suite, and/or Bldg. No.) or P.O. Route a		Policy Number
3809 Roberts Road City	State	ZIP Code	Company NAIC Number
Acton, CA 93510	D SUDVEYOR ENGINEER OF ASS.	JITEOT CERTIFICATION (CON	ITINILED)
,	D - SURVEYOR, ENGINEER, OR ARCH	•	· · · · · · · · · · · · · · · · · · ·
	icate for (1) community official, (2) insurance a	agent/company, and (3) building own	ner.
Comments			
Signature	Dat	e	☐ Check here if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO A	
For Zones AO and A (without BFE), co and C. For Items E1-E4, use natural g	omplete Items E1-E5. If the Certificate is inten- grade, if available. Check the measurement us the following and check the appropriate boxes	ded to support a LOMA or LOMR-F sed. In Puerto Rico only, enter mete	request, complete Sections A, B, ers.
grade (HAG) and the lowest adja a) Top of bottom floor (including l b) Top of bottom floor (including l		<u>5</u>	ove or below the HAG.
(elevation C2.b in the diagrams) E3. Attached garage (top of slab) is	of the building isN/A	meters  above or  below the document below the document below the HAG.	ne HAG.
	d/or equipment servicing the building isN number is available, is the top of the bottom flo Unknown. The local official must certify this		_
SECTION	F - PROPERTY OWNER (OR OWNER'S		CICATION
	zed representative who completes Sections A, ments in Sections A, B, and E are correct to the		MA-issued or community-issued BFE)
Property Owner's or Owner's Authorize	ed Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Telephor	ne
Comments			
			Check here if attachments
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	— onesk here it allasimone
	w or ordinance to administer the community's f plete the applicable item(s) and sign below. C		
	vas taken from other documentation that has belevation information. (Indicate the source and		
	d Section E for a building located in Zone A (wns G4-G9) is provided for community floodplain		y-issued BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Comp	liance/Occupancy Issued
			· · · · · · · · · · · · · · · · · · ·
G7. This permit has been issued for:	<del>-</del> - ·		
G8. Elevation of as-built lowest floor (in	, , , , , , , , , , , , , , , , , , , ,	feet	·
G9. BFE or (in Zone AO) depth of flood		feet   meters (P	,
G10. Community's design flood elevation	1		R) Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments			
			Check here if attachments

FEMA Form 81-31, Mar 09

#### FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

		SECTION	A - PROPERTY OWNER INF	ORMATION		For Insurance Company Use:
BUILDING OWNER'S NA	AME					Policy Number
BUILDING STREET ADD	PRESS (Including)	Apt., Unit, Suite, and/o	r Bldg. No.) OR P.O. ROUTE A	AND BOX NO.		Company NAIC Number
3809	V KOL	BERTS R	CAD			
CITY ACTON			STATE		ZIP COD	)E
			Number, Legal Description, et	C.)		
PHILDING USE (a.e. Da	APN H	3208-0	18-057	<del></del>		· · · · · · · · · · · · · · · · · · ·
BUILDING USE (e.g., Re	sidentiai, Non-resid	dential, Addition, Access	ssory, etc. Use a Comments a	rea, if necessary.)		
LATITUDE/LONGITUDE	(OPTIONAL)		ONTAL DATUM:	SOURCE: [	GPS (Type	۸۰
(##°-##'-##.##" or ##	.##### <sup>o</sup> )	NAD 192			USGS Qua	
		SECTION B - FLOOD	INSURANCE RATE MAP (F	IRM) INFORMATI	ON	
B1. NFIP COMMUNITY NAME	_	1	B2. COUNTY NAME	<del></del>	B3	STATE _
ACTON	0650	743	LA. Co.		ļ	CA
B4. MAP AND PANEL			B7. FIRM PANEL			B9. BASE FLOOD ELEVATION(S)
NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	_	ATE B8. FLOC	DD ZONE(S)	(Zone AO, use depth of flooding)
390	B	12-2-80	11-15-85	- /3	20	/
B10. Indicate the source of the						
	☐ FIRM	Community Det	<del></del>	(Describe):		
B11. Indicate the elevation date			NAVI	, — Ge. (		<del>-</del>
D12. Is the building located in a			area or Otherwise Protected Area			Designation Date
21.5			ELEVATION INFORMATION			
C1. Building elevations are bas			☐ Building Under Construction*	Finished Co	nstruction	
*A new Elevation Certifica	te will be required wh	hen construction of the bu	uilding is complete.			
C2. Building Diagram Number	[ (Select the building	g diagram most similar to	the building for which this certifica	te is being completed	l - see pages 6	and 7. If no diagram
accurately represents the						
C3. Elevations – Zones A1-A3	D, AE, AH, A (with BI	FE), VE, V1-V30, V (with	BFE), AR, AR/A, AR/AE, AR/A1-	430, AR/AH, AR/AO		
Complete Items C3a-i be	low according to the	building diagram specifi	ed in Item C2. State the datum use	d. If the datum is diffe	erent from the d	atum used for the BFE in
Section B, convert the data	um to that used for th	ne BFE. Show field meas	urements and datum conversion o	alculation. Use the s	space provided	or the Comments area of
Section D or Section G, as		ument the datum convers	sion.			
Datum Conversion						7.55
			rk used appear on the FIRM?	Yes No		PROFESSION .
o a) Top of bottom floor (in		or enclosure)	ft.(m)		ea //	BEDAS STATE
o b) Top of next higher flo			ft.(m)		bossed Seal, d Date	Ser Elem
o c) Bottom of lowest hori.		mber (V zones only)	ft.(m)		ag te	
o d) Attached garage (top			ft.(m)		an Diag	C 53083 完
o e) Lowest elevation of n		•			F. S. H.	
servicing the buildin		nments area)	ft.(m)		agtin <b>//★</b>	Exp. 6-30-07 ★
o f) Lowest adjacent (finish			ft.(m)		License Number, Emi Signature, and	(A) 00.01
o g) Highest adjacent (finis			ft.(m)		ense	CIVIL
o h) No. of permanent ope					ig [	OF CALIFORN
o i) Total area of all perma	nent openings (floor	d vents) in C3.h	n. (sq. cm)			
-	SE	CTION D - SURVEY	OR, ENGINEER, OR ARCHIT	ECT CERTIFICAT	ION	
This certification is to be si	gned and sealed I	by a land surveyor, en	gineer, or architect authorized	by law to certify ele	evation inform	ation.
I certify that the information	n in Sections A, B,	, and C on this certifica	ate represents my best efforts i	o interpret the data	available.	anom.
<u>I understand that any false</u>	statement may be	e punishable by fine o	imprisonment under 18 U.S.	Code, Section 1001	1.	
CERTIFIER'S NAME			,	LICENSE N	UMBER	
	ORIK 13	EDASSIN				
TITLE	11111112		COMPANY NA			1. ( a
ADDRESS	YGINET,	/		O TECHN	1108 ,	INE
70011L00	713	ad -1	CITY	nnus."	STATE	ZIP CODE
SIGNATURE		9H J.	DATE	DATE	TELEPHO	
2/	Her 1	(5,2/-	- 12-26-	05		~3123
		- 46	الملك ما ا		///	(フノ かく)

INPORTAINT: In these shaces	, copy the corresponding information from Sec	ction A.	For Insurance Company Use:
	g Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BO		Policy Number
CITY	STATE	ZIP CO	DE Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR AR	CHITECT CERTIFICATION (CO	NTINUED)
	tificate for (1) community official, (2) insurance agent/com	<del></del>	
COMMENTS			/
Garage 1	sustation Grade is	olevated	
	a is not only	- f + 10.	duen in Par
Garag	e 13 May subje	er a grow	Check here if attachment
SECTION F - BUILD	DING ELEVATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO	
<del>' </del>	), complete Items E1 through E4. If the Elevation Certific	···	
Section C must be completed.	,,, son , prote no o _ , through n the _ or attent	is in the rest of the design of the same is the same in the same is the same in the same i	
E1. Building Diagram Number _(Selec	t the building diagram most similar to the building for whic	ch this certificate is being completed -	see pages 6 and 7. If no diagram accurately
represents the building, provide a s	, , ,		
	g basement or enclosure) of the building isft.(m)	_in.(cm)  above or  below (c	heck one) the highest adjacent grade. (Use
natural grade, if available). E3. For Building Diagrams 6-8 with one	nings (see page 7), the next higher floor or elevated floor	(elevation b) of the building is 1 # /	m) (ain (cm) above the highest adjacent
grade. Complete items C3.h and (		(elevation b) of the building is 1.(	m) Bir.(cm) above the highest adjacent
	y and/or equipment servicing the building isft.(m)	_in.(cm) 🔲 above or 📋 below (c	heck one) the highest adjacent grade. (Use
natural grade, if available).			
•	n number is available, is the top of the bottom floor elevat	•	's floodplain management ordinance?
	The local official must certify this information in Section	<del></del>	FIGATION
	SECTION F - PROPERTY OWNER (OR OWNE)	<del></del>	W
	ized representative who completes Sections A, B, C (Iter ere. The statements in Sections A, B, C, and E are corre		le A (without a FEMAISSUED or community-
·	R'S AUTHORIZED REPRESENTATIVE'S NAME	oct to the best of thy knowledge.	
	TO ACTIONIZED NEI NEGENTATIVE O NAIVE		
ADDRESS		CITY	STATE ZIP CODE
SIGNATURE		DATE	TELEPHONE
COMMENTS			
			Check here if attachment
	SECTION G - COMMUNITY INF	FORMATION (OPTIONAL)	Check here if attachment
COMMENTS	SECTION G - COMMUNITY INF	· · · · · · · · · · · · · · · · · · ·	
COMMENTS  The local official who is authorized by la Certificate. Complete the applicable ite	w or ordinance to administer the community's floodplain m(s) and sign below.	management ordinance can comple	e Sections A, B, C (or E), and G of this Elevation
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