

## FEDERAL EMERGENCY MANAGEMENT AGENCY NAT NAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after

September 30, 1982; 3)	Post-FIRM c	onstruction; and	d, 4) Other b	uildings rated as F	ost-FIRM rules.	
UILDING OWNER'S				ADDRESS		
IAME 1761	721 n	contra	~ R/1		U C10	4701
PROPERTY LOCATION	1 / LH	C /2 / C   103	DK U		LL CAL 9	7321
	•				(1073	PM May
S824 KOLS	ERIS /	contiticate repr	C/ON/	AL 93510	oret the date available	I understand that any false
tatement may be puni	shable by find	or imprisonme	ent under 18	U.S. code, Section	1001.	
ECTION I ELIGIBIL	ITY CERTIFI		pleted by Loc lect, or Surve		rmit Official or a Regis	tered Professional Engineer,
COMMUNITY NO PANEL !	O SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV.	BUILDING IS
4, - 4 2 4 2 2	4 77	10 7 20	A 0	1007	(In AO Zone, use depth)	☐ New/Emergency ☐ Pre-FIRM Reg.
065043 039	0 3	12-2-80	40	1987		ズ Post-FIRM Reg.
□ □ ordinance.	The certifier ft, NGVE	may rely on cor	mmunity reconstruct the bu	ords. The lowest fl uilding at this elev		community's flood plain ent) will be at an elevation uilding in violation of
					h the community's flo	and plain management
YES NO The buildir ☐ ordinance	ig described based on elev	above nas been vation data and	visual inspec	tion or other reas	onable means.	od plain management
If NO is ch	ecked, attach	copy of varian	ce issued by	the community.		
YES NO The mobile	home locate	d at the addres	s described a	above has been tie	d down (anchored) in	compliance with the
					h the NFIP Specificat	
MOBILE HOME N	IAKE	MODEL	YH.	OF MANUFACTU	HE SEHIAL I	IO. DIMENSIONS
(Community Permit O	fficial or Reg	stered Professi	onal Enginee	er, Architect, or Su	rveyor)	1 60, 1
NAME DENVI	15 H	WITER		ADDRESS 23	3757 1/a/	encia Blud
Regiona!	Flood	RCE 36	624,	1		0.120
TITLE CONTrol	Engin	er gith	Valer	ncia Co	STATE	ZIP 91.33
		di	-10	1 21	2-87 PHONE 80	15-253-1718
SIGNATURE	enne	you	nuce			
SECTION II ELEVA	TION CERTI		tified by a Lo nitect, or Sur		ermit Official or a Reg	istered Professional Engineer,
	at an elevation an elevation  V30: I certify at an e	that the buildin	feet, NGVD	overty location desc	ribed above has the bo	est floor (including basement) prade at the building site is at entire of the lowest floor beam age grade at the building site
FIRM ZONES A, A99,	AH and EMER	GENCY PROGR	AM: I certify	et, NGVD.  that the building a ghest adjacent grade	t the property location next to the building is	described above has the lowest
EIDM ZONE AO: Lee	tifu that the h	uilding at the pro	nerty location	described above ha	s the lowest floor eleva	A-4 A-4
feet, NGVD. The eleva	tion of the high	nest adjacent grad	le next to the	building is 213	<u> 6・5</u> feet, NGVD.	
SECTION III FLOO	DPROOFING	CERTIFICATIO	ON (Certifica	ation by a Register	ed Professional Engir	eer or Architect)
I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures velocities, impact and uplift forces associated with the base flood.  YES   NO   In the event of flooding, will this degree of floodproofing be achieved with human intervention? (Human intervention means that water will enter the building when floods up to the base flood level oc-						
	cur unless doors and	measures are ta	sken prior to	the flood to preve	nt entry of water (e.g.	, bolting metal shields over
YES   NO   If the answer to both completed and certifi	questions is	ilding be occup YES, the floodp omplete both th	roofina cann	ot be credited for	rating purposes and t certificates.	he actual lowest floor must be
FIRM ZONES A, A1-	<u> </u>				Floodproofed Elevation	on isfeet, (NGVD).
THIS CERTIFICATIO	N IS FOR 19	SECTION II	□ BOTH SE	CTIONS II AND I	II (Check One)	
CERTIFIER'S NAME			COMPAN	Y NAME		LICENSE NO. (or Affix Seal)
DENNIS	S. SPE	res	SPEA	RS +O'CON	UELL	15 5056
TITLE			ADDRES	S <sub>.</sub>	0	LS 5056 ZIP DAE CA 93551
PARTHER	<u>.</u>		845 W	! PALMDALE	BUD PALMI	NE CA 93551
SIGNATURE	11	DATE	CI		STATE	PHONE 805-273-4444
Henry	. S. Lye	au 8/3	58/		45	
The insurance the	agent shoul second copy	should be supp	Hied to the p	olicynolaer and w	e mua coby recemen	nce policy application, by the agent
		INSURA	NCE AGENT	S MAY ORDER TO	NIS FURM	