EDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

	For Insurance Company Use:				
BUILDING OWNER'S NAME				Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit 40914 163rd Street East	Company NAIC Number				
CITY Lancaster	·	STATE CA	ZIP CODE 93535		
PROPERTY DESCRIPTION (Lot and Block Number Lot 66, Block 2, APN 3070-015-007	rs, Tax Parcel Numbe			<u>-</u>	
BUILDING USE (e.g., Residential, Non-residential, A	Addition, Accessory, e	tc. Use a Comments area, if ne	cessary.)		
LATITUDE/LONGITUDE (OPTIONAL) (##f-##-##.##" or ##.####")	HORIZONTAL NAD 1927		URCE: GPS (Type): USGS Quad		
SECT	10N B - FLOOD INSUI	RANCE RATE MAP (FIRM) INFO	RMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Los Angeles County 065043		INTY NAME oorated Area	B3.: CA	STATE	
B4. MAP AND PANEL B5. SUFFIX NUMBER 065043 0300 B	RM INDEX DATE 12/2/80	B7. FIRM PANEL EFFECTIVE/REVISED DATE 12/2/80	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) N/A	
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)? 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 _ (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 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 usedDoes the eleva a) Top of bottom floor (including basement or endout b) Top of next higher floor c) c) Bottom of lowest horizontal structural member (\u00fc d) Attached garage (top of slab) e) Lowest elevation of machinery and/or equipmen servicing the building (Describe in a Comments f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG) h) No. of permanent openings (flood vents) within the interest of the permanent openings (flood vents) i) Total area of all permanent openings (flood vents)	sure) / zones only) t area) ft. above adjacent grac	ft(m)ft(m)ft(m)ft(m)ft(m)ft(m)ft(m)	License Number, Embossed Seal, Signature, and Date		
SECTION	ON D - SURVEYOR, EN	NGINEER, OR ARCHITECT CERT	TIFICATION		
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					
TITLE		COMPANY NAME			
ADDRESS		СПҮ	STATE	ZIP CODE	
SIGNATURE		DATE	TELEPHON	#E	

The State And State of the Stat

IMPORTANT: in these spaces, copy the o	correspor information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., U	nit, Suite, anovor Bldg. No.) OR P.O. ROUTE AND BOX N	VO.		Policy Number
40914 163rd Street East		· · · · · · · · · · · · · · · · · · ·	70.007	10
CITY Lancaster	STATE CA		ZIP CODE 93535	Company NAIC Number
SE	CTION D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATIO	ON (CONTINUED)	
Copy both sides of this Elevation Certificate for	or (1) community official, (2) insurance agent/comp	pany, and (3) building o	owner.	
COMMENTS				
				Check here if attachment
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT R	EQUIRED) FOR ZON	IE AO AND ZONE A	(WITHOUT BFE)
	plete Items E1 through E4. If the Elevation Certifica	ite is intended for use a	as supporting informa	ation for a LOMA or LOMR-F,
Section C must be completed.				
	ilding diagram most similar to the building for which	n this certificate is being	g completed – see pa	ages 6 and 7. If no diagram accurately
represents the building, provide a sketch of F2. The top of the bottom floor (including base)	or pnotograpn.) ment or enclosure) of the building is 0 ft.(m) <u>5</u> in.(d	m) Mahawa ar 🖂 (ma	halaw (check one) th	na hinhaet arlianant marka (l. lea
natural grade, if available).		any Est above or L.J	balow (Gleck Gle) u	ie riigiliest aujauerit grauet (USE
• • • • • • • • • • • • • • • • • • • •	see page 7), the next higher floor or elevated floor	(elevation b) of the buil	lding isft.(m)	in.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on i	front of form.			
	er is available, is the top of the bottom floor elevate		he community's flood	lplain management ordinance?
	cal official must certify this information in Section G			
——————————————————————————————————————	CTION F - PROPERTY OWNER (OR OWNER'S			***
	presentative who completes Sections A, B, C (Item e statements in Sections A, B, C, and E are correc			ithout a FEMA-issued or community-
PROPERTY OWNER'S OR OWNER'S AUTHOR		a to the best of thy Kho	wieuge.	
ADDRESS	C	ΠY	STAT	E ZIP CODE
SIGNATURE	D.	ATE	TELE	PHONE
COMMENTS				
				Check here if attachment
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL	-)	
	dinance to administer the community's floodplain n	nanagement ordinano	e can complete Secti	ons A, B, C (or E), and G of this Eleva
Certificate. Complete the applicable item(s) an	•			!
	n from other documentation that has been signed a formation. (Indicate the source and date of the ele	•		ineer, or architect who is authorized by
	n E for a building located in Zone A (without a FEN			ne AO.
	9) is provided for community floodplain manageme		•	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE (CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
	<u> </u>		·	
G7. This permit has been issued for: New	···································		• 4 •	- .
G8. Elevation of as-built lowest floor (including to G9. REE or (in Zone AO) death of floorling at the	, ·	-	ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at th	ic building site is.	<u>-</u>	ft.(m)	Datum:
LOCAL OFFICIAL'S NAME Rod Kubomoto		TITLE Assistant (Deputy Director	
COMMUNITY NAME Los Angeles County		TELEPHONE (62	26) 458-4300	
SIGNATURE /Cod /Co	ulu S	DATE /	120/02	
COMMENTS Section E was completed by referring	ng to attached survey documentation signed and stamped	d by a California licensed	surveyor.	
	-		-	
				Check here if attachment

LEVEL DATE

INDEX NUMBER:

PAGE:

4/4/00

Los Angeles County Department of Public Works **Survey Division**

JOB #:

E0491411

DATUM:

LLANO 1981 QUAD (FEET)

BENCH:

DESCRIPTION:

ELEVATION:

NFIP

HSE #41054 163RD ST E

2609,430 **FINISH FLOOR** 2609.400 HIGHEST ADJACENT GRADE 2608,300 LOWEST ADJACENT GRADE

HSE #40914 163RD ST E

2617.220 **FINISH FLOOR** 2616,800 HIGHEST ADJACENT GRADE 2615,500 LOWEST ADJACENT GRADE



FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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O.M.B. No. 3067-0077 Expires July 31, 2002

important. Read the instructions on p				
SECTION A - PROPERTY OWNER INFORI	MATION	For Insurance Company Use:		
BUILDING OWNER'S NAME		Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND A CONTROL STE	ID BOX NO.	Company NAIC Number		
CITY COCOSTER	7	ZIP CODE 93535		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments sections	ion if necessary.)			
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE:	GPS (Type):			
(##° - ##' - ##.##" or ##.#####") NAD 1927 NAD 1983	USGS Quad Ma	p Other:		
LOS ANGÉLES COUNTY SECTION B-FLOOD INSURANCE RATE MAP (FI	RM) INFORMATIO	N		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME		B3. STATE		
206.5043 0300 EA. LOS NO	veeles	<u>Ca</u>		
84. MAP AND PANEL BS. SUFFIX B6. FIRM INDEX DATE DATE SFECTIVE/REVISED DATE SEFECTIVE/REVISED DATE DESCRIPTION OF SEPTEMBER DATE DATE DATE DATE DATE DATE DATE DATE	B8. FLOOD ZONE(S)	89. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth en				
FIS Profile FIRM Community Determined Officer (Describe):	Name and the Name		
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD	1988 [_] Other (C	Describe):		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Othe Designation Date:	erwise Protected Al	rea (UPA) / L Yes SKNO		
SECTION C - BUILDING ELEVATION INFORMATION	(SURVEY REQUI	RED)		
	der Construction*	AFinished Construction		
*A new Elevation Certificate will be required when construction of the building is con		OK 3		
(C2. Building Diagram Number 4 (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 of	or photograph.)			
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, A	AR/A, AR/AE, AR/A	1-A30, AR/AH, AR /AO		
Complete Items C3a-i below according to the building diagram specified in Item C2	. State the datum u	sed. If the datum is different from		
the datum used for the BFE in Section B, convert the datum to that used for the BF	E. Show field meas	urements and datum conversion		
calculation. Use the space provided or the Comments area of Section D or Section	ان, as appropriate,	to document the datum conversion.		
DatumConversion/Comments	00 mark wood as = =	es en the EIDMA I I Ves Manie		
Elevation reference mark used Does the elevation referen		ear on the FIRM? Yes Yes No		
2 2) 10p 01 00 110 110 1	s			
 b) Top of next higher floor c) Bottom of lowest horizontal structural member (V zones only) 	ft.(m) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
d) Attached garage (top of slab)	ft.(m) pessog pue			
a) Attached galage (top of state) b) Lowest elevation of machinery and/or equipment				
servicing the building	ft.(m) 결류			
① f) Lowest adjacent grade (LAG)	50 ft.(m) 2 5			
g) Highest adjacent grade (HAG)	- 20 4 (-) 30			
h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	- 20 ir(iii) = 3	1		
	1. in. (sq. cm)			
SECTION D - SURVEYOR, ENGINEER, OR ARCHIT				
This certification is to be signed and sealed by a land surveyor, engineer, or architect	authorized by law t	o 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 MANE				
OID!	CTATE	7IB CODE		
ADDRESS	STATE	ZIP CODE		
SIGNATURE	TELEP	HONE		

△PORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:	
BUILDING STREET ADDRESS	(Including Apt., Unit, Suite, and/or Bldg	. No.) OR P.O. ROUT	E AND BOX NO.	Policy Number
CITY Lancuster	STA	ATE A	ZIP CODE 93535	Company NAIC Number
	CTION D - SURVEYOR, ENGINEER			ITINUED)
Copy both sides of this Eleva	ation Certificate for (1) community o	fficial, (2) insurance	e agent/company, and (3	3) building owner.
COMMENTS				
$\overline{}$				
				Check here if attachments
	ELEVATION INFORMATION (SU			
	thout BFE), complete Items E1. thro		ation Certificate is inten	ded for use as supporting
	OMR-F, Section C must be completed or (Select the building diagran		e building for which this	certificate is being completed -
soo pages 6 and 7 If no	diagram accurately represents the	building provide a	sketch or photograph \	_
E2. The top of the bottom floo	or (including basement or enclosure) of the building is	$O + \frac{4 2 }{ 4 2 }$ ft.(m) $ 4 3 $ in	n.(cm) above or below
(check one) the highest a	adjacent grade. (Use natural grade, 8 with openings (see page 7), the n	, if available.)		
_ _ ft.(m) _ _ lin.(cr	m) above the highest adjacent grad	e. Complete Items	C3.h and C3.i on front o	of form.
E4. For Zone AO only: If no fi	lood depth number is available, is th	he top of the bottom	n floor elevated in accord	lance with the community's
floodplain management o				s information in Section G.
	CTION F - PROPERTY OWNER (Or's authorized representative who c			
(without a FEMA-issued or c	rs authorized representative who community-issued BEE) or Zone AO	ompletes Sections T_{ij}	he statements in Section	es A, B, C, and E are correct to
the best of my knowledge.				· · · · · · · · · · · · · · · · · · ·
PROPERTY OWNER'S OR OW	NER'S AUTHORIZED REPRESENTAT	IVE'S NAME		
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE		DATE	TELEPH	ONE
COMMENT8				
				L. I Chack hard if attachments
	SECTION G - COMMU	INITY INFORMATI	ON (OPTIONAL)	Check here if attachments
The local official who is author	rized by law or ordinance to adminis			nt ordinance can complete
Sections A, B, C (or E), and G	of this Elevation Certificate. Comp	olete the applicable	item(s) and sign below.	,
G1. The information in Se	ction C was taken from other docur	nentation that has t	peen signed and emboss	sed by a licensed surveyor,
	t who is authorized by state or local	law to certify eleva	ition information. (Indica	ite the source and date of the
	Comments area below.) completed Section E for a building le	ocated in Zone A (v	vithout a FEMA-issued o	r community-issued BFE) or
Zone AO.				
- o - ' - '	ition (Items G4-G9) is provided for o	_	1	
G4 PERMIT NUMBER	G5. DATE PERMIT ISSUED		i. DATE CERTIFICATE OF BUED	COMPLIANCE/OCCUPANCY
G7) This permit has been issu	ued for: New Construction	Substantial Im	provement	
	st floor (including basement) of the I	1	2617 2	2 ft.(m) Datum: NAV1 1188
G9. BFE or (in Zone AO) dept	th of flooding at the building site is:			ft.(m) Datum:
LOCAL OFFICIAL'S NAME R	HK	TITLE	Assistant ba	puty birector
	MUGELES COUNTY	TELEPH	IONE (626) 458-	puty binetor 4300
SIGNATURE		DATE		
COMMENTS				
				Check here if attachments