# \*DERAL 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.

SECTION A - PROPERTY OWNER INFORMATION					For Insurance Company Use:	
BUILDING OWNER'S NAME					Policy Number	
BUILDING STREET ADD 41054 163rd Street East	Company NAIC Number					
CITY Lancaster			STATE CA	ZIP CO 93535	DE	
PROPERTY DESCRIPTION Lot 54, Block 2, APN 3070		Numbers, Tax Parcel N	lumber, Legal Description, etc.)			
		dential, Addition, Access	ory, etc. Use a Comments area, if	necessary.)		
LATITUDE/LONGITUDE ( ##° - ##' - ##.##" or ##			ITAL DATUM: S ☐ NAD 1983	SOURCE: GPS (Typ USGS Qu		
		SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INF	FORMATION		
B1. NFIP COMMUNITY NAME. Los Angeles County 065043	R COMMUNITY NUM		2. COUNTY NAME nincorporated Area		33. STATE CA	
B4, MAP AND PANEL NUMBER 065043 0300	B5. SUFFIX B	B6, FIRM 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 (SURV	EY REQUIRED)		
C1. Building elevations are bar	sed on: Constru	ction Drawings*	Building Under Construction*	Finished Construction		
*A new Elevation Certifica	te will be required w	then construction of the bu	ilding is complete.			
C2. Building Diagram Number	_(Select the building	ng diagram most similar to	the building for which this certificate is	being completed - see pag	ges 6 and 7. If no diagram	
accurately represents the	building, provide a s	sketch or photograph.)				
			BFE), AR, AR/A, AR/AE, AR/A1-A30,	AR/AH, AR/AO		
Complete Items C3a-i be	low according to th	e building diagram specifie	d in Item C2. State the datum used. If	the datum is different from	the datum used for the BFE in	
			urements and datum conversion calcu			
Section D or Section G, a	appropriate, to do	cument the datum convers	ion.			
Datum Conversion						
		he elevation reference ma	rk used appear on the FIRM? 🔲 Ye	s □ No □		
a) Top of bottom floor			ft.(m)	_		
□ b) Top of next higher fi	_		ft.(m)	ossed Seal		
c) Bottom of lowest ho		ember (V zones only)	ft.(m)	ossed Date	:	
d) Attached garage (to		Citibol (V Zolioc Gray)	t.(m)	9 P		
e) Lowest elevation of		quinment		Emp		
servicing the buildir	•	• •	ft.(m)	ture		
☐ f) Lowest adjacent (fini	• .	•	ft.(m)	License Number, Signature,		
g) Highest adjacent (fir			ft.(m)	8 0		
☐ h) No. of permanent of	, <del>-</del> ,	•		<u>8</u>		
•	• '	ood vents) in C3.hsc	<del>-</del>	_ L		
				DTICLOATION		
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						
TITLE			COMPANY NAME			
ADDRESS			CITY	STATE	ZIP CODE	
SIGNATURE		<u> </u>	DATE	TELEPH	ONE	

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IMPORTANT: In these spaces, copy to	he correspor information from Section A.		<del>-</del>	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apr 41054 163rd Street East	t, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX N	IO.		Policy Number
CITY Lancaster	STATE CA		ZIP CODE 93535	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION		
	ate for (1) community official, (2) insurance agent/comp		·	
COMMENTS	se or (1) with fullity official, (2) its draine age it with	ary, ard (5) building own	ю.	
				☐ Check here if attachments
SECTION E - BUILD	DING ELEVATION INFORMATION (SURVEY NOT R	REQUIRED) FOR ZONE	AO AND ZONE A	——————————————————————————————————————
	omplete Items E1 through E4. If the Elevation Certifica	<del></del>		<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>
Section C must be completed.				
E1. Building Diagram Number 1 (Select the	e building diagram most similar to the building for which	n this certificate is being or	ompleted - see pa	ages 6 and 7. If no diagram accurately
represents the building, provide a sket				
	asement or enclosure) of the building is $0$ ft.(m) $\underline{.4}$ in.(	cm) 🖾 above or 🗀 be	elow (check one) t	he highest adjacent grade. (Use
natural grade, if available).	gs (see page 7), the next higher floor or elevated floor (	(alayation h) of the buildin	naie ft/m\	in (cm) about the highest adjacent
grade. Complete items C3.h and C3.i		(Gevauori b) or tre bullouri	gisit(iii)	is:(GII) above the highest adjacent
	imber is available, is the top of the bottom floor elevate	d in accordance with the	community's flood	lplain management ordinance?
	e local official must certify this information in Section G			
	SECTION F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) C	ERTIFICATION	
· · ·	d representative who completes Sections A, B, C (Item The statements in Sections A, B, C, and E are correc	***	•	ithout a FEMA-issued or community-
PROPERTY OWNER'S OR OWNER'S AUTI-				
ADDRESS		ΠΥ	STAT	TE ZIP CODE
SIGNATURE	D <sub>i</sub>	ATE	TELE	EPHONE
COMMENTS				
<u> </u>			· · · · · · · · · · · · · · · · · · ·	
	OF STOLL OF STATE OF	MATION (OPTIONAL)		Check here if attachments
The level official relative to the desired by the state of the state o	SECTION G - COMMUNITY INFOR			inne A. D. O (co.E.), and O of this Elevent
The local official who is authorized by law of Certificate. Complete the applicable item(s	or ordinance to administer the community's floodplain n	nanagement ordinance c	an complete Secti	ions A, B, C (or E), and G or this Elevau
	aken from other documentation that has been signed a	and embossed by a licen	sed survevor, end	ineer, or architect who is authorized by
	on information. (Indicate the source and date of the ele	-		
	ection E for a building located in Zone A (without a FEN		issued BFE) or Zo	ne AO.
G3. [_] The following information (Items G	4-G9) is provided for community floodplain manageme	ent purposes.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CEF	RTIFICATE OF COM	APLIANCE/OCCUPANCY ISSUED
C7. This possess has been been been been been been been bee				
G7. This permit has been issued for: N G8. Elevation of as-built lowest floor (includ	lew Construction Substantial Improvement		ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding			tt.(\\') ft.(m)	Datum:
		TITLE Assistant Day		
LOCAL OFFICIAL'S NAME Rod Kubomoto		TITLE Assistant Dep	•	
COMMUNITY NAME Los Angeles County		TELEPHONE (626)	458-4300	
SIGNATURE ROOM	alia)	DATE //-	20/60	
COMMENTS Section F was completed by re	ferring to attached survey documentation signed and stamped	d by a California licensed exp	Newor	
	TOTAL STATE OF THE	a og a comorna nostood su		
				Check here if attachments

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

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

# **ELEVATION CERTIFICATE**

	ead the instructions on pages 1 - 7.	
	PROPERTY OWNER INFORMATION	For Insurance Company Use:
BLILL DING OWNER'S NAME		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and	or Bidg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number
ancaster	STATE	ZIP CODE 93535
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parc	el Number, Legal Description, etc.)	7000
BUILDING USE (e.g., Residential, Non-residential, Addition, Ac	cessory, etc. Use Comments section if necessary.)	
LATITUDE/LONGITUDE (OPTIONAL) HORIZONT	AL DATUM: SOURCE: GPS (Type):	
( ##° - ##' - ##.##" or ##.####") L NAD 1927	NAD 1983 USGS Quad Ma	p Other:
TOTAL CONTRACTOR OF STORY	MOUDANCE DATE MAD (FIRM INFORMATIO	
V (10000)	INSURANCE RATE MAP (FIRM) INFORMATIO	on
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 065043 0300	B2 COUNTY NAME  LOS ANGELES	B3. STATE
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX DATE DATE 12-2-86	EFFECTIVE/DEVICED DATE TONE/CY	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
$065043 \ 0300 \ \mathcal{B}$ $12-2-80$ B10. Indicate the source of the Base Flood Elevation (BF6)		NA
= · · · · · · · · · · · · · · · · · · ·	ty Determined \  \  \  \  \  \  \  \  \  \  \  \  \	
B11. Indicate the elevation datum used for the BFE in B9:		Jescribe):
B12. Is the building located in a Coastal Barrier Resource	- ·	
Designation Date:	,, , , , , , , , , , , , , , , , , , , ,	
SECTION C - BUILDING	ELEVATION INFORMATION (SURVEY REQUI	PEN)
		<del></del>
C1. Building elevations are based on:  Construction D  *A new Elevation Certificate will be required when co		Finished Construction
C2. Building Diagram Number (Select the building		andificate in bains completed.
pages 6 and 7. If no diagram accurately represents t		s certificate is being completed - see
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VI		ALASO ARIAH ARIAO
Complete Items C3a-i below according to the building		
the datum used for the BFE in Section B, convert the		
calculation. Use the space provided or the Comment		
Datum Conversion/Comments		
Elevation reference mark used	Does the elevation reference mark used appe	ear on the FIRM?   Yes ANO
a) Top of bottom floor (including basement or enci		
□ b) Top of next higher floor	ft.(m) $\frac{\ddot{N}}{N}$	
<ul> <li>c) Bottom of lowest horizontal structural member (</li> </ul>	V zones only) ft.(m) 🖇 🖁	
<ul><li>d) Attached garage (top of slab)</li></ul>	ft.(m) 흩딜	
<ul> <li>e) Lowest elevation of machinery and/or equipment</li> </ul>	nt - Li a	
servicing the building	2608.30 ft.(m) & state	
(LAG) Lowest adjacent grade (LAG)	2608.30 - ft.(m) 2.5	
☐ g) Highest adjacent grade (HAG)	2609.40ft.(m) &	
h) No. of permanent openings (flood vents) within		
<ul> <li>i) Total area of all permanent openings (flood vent</li> </ul>	s) in C3h sq. in. (sq. cm)	
SECTION D - SURVEY	OR, ENGINEER, OR ARCHITECT CERTIFICAT	ION
This certification is to be signed and sealed by a land su	rveyor, engineer, or architect authorized by law to	certify elevation information.
I certify that the information in Sections A. B. and C on t		
I understand that any false statement may be punishable		ection 1001.
CERTIFIER'S NAME	LICENSE NUMBER	
TITLE	COMPANY NAME	
ADDRESS	CITY STATE	ZIP CODE
SIGNATURE	DATE TELEPH	IONE

△PORTANT: In these spaces, copy the corresponding information from Section A.				For Insurance Company Use:
	(Including Apt., Unit, Suite, and/or Bldg	j. No.) OR P.O. ROL	JTE AND BOX NO.	Policy Number
CITY Lancaster	ST	ATE CA	ZIP CODE 93535	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEE			ITINUED)
	ition Certificate for (1) community of			
COMMENTS	<del></del>			
$\longrightarrow$				
				Check here if attachments
	ELEVATION INFORMATION (SL			
	nout BFE), complete Items E1. thr MR-F, Section C must be complet		evation Certificate is inten	ded for use as supporting
^ ~	· (Select the building diagra		he building for which this	certificate is being completed -
see pages 6 and 7. If no o	diagram accurately represents the	building, provide	a sketch or photograph.)	_
E2. The top of the bottom floor	r (including basement or enclosure	e) of the building is	01013   ft.(m)   494 i	n.(cm)     above or     below
	djacent grade. (Use natural grade 3 with openings (see page 7), the r		elevated floor (elevation	h) of the building is
	n) above the highest adjacent grad			
E4. For Zone AO only: If no flo	ood depth number is available, is t			
floodplain management or				is information in Section G.
	TION F - PROPERTY OWNER (C			
	's authorized representative who community-issued BFE) or Zone AC			
the best of my knowledge.				
PROPERTY OWNER'S OR OWN	NER'S AUTHORIZED REPRESENTA	TIVE'S NAME		
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE		DATE	TELEPH	ONE
COMMENTS				
				1. 1.01
<u> </u>	SECTION G - COMM	INITY INFORMAT	TION (ORTIONAL)	Check here if attachments
The level official who is outbori	ized by law or ordinance to admini			nt ordinance can complete
	of this Elevation Certificate. Com			
G1. [  The information in Sec	ction C was taken from other docu	mentation that has	been signed and embose	sed by a licensed surveyor,
	who is authorized by state or loca	I law to certify elev	ration information. (Indica	ite the source and date of the
	Comments area below.) ompleted Section E for a building	located in Zone A	(without a FFMA-issued o	or community-issued BFE) or
, Zone AO.	ompleted occitor 2 for a balloting	1000100 III 20110 7 1	(Milliout a F Elim t location of	, 00,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
G3. $ \underline{\checkmark} $ The following informat	ion (Items G4-G9) is provided for	community floodpl	ain management purpose	s.
G4 PERMIT NUMBER	G5. DATE PERMIT ISSUED		6. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY
G7) This permit has been issue	ed for:  _  New Construction	Substantial Ir	nprovement	
	t floor (including basement) of the	building is:		3 ft.(m) Datum: NA√D 1488
G9. BFE or (in Zone AO) depth	of flooding at the building site is:		N/k	ft.(m) Datum:
LOCAL OFFICIAL'S NAME	RHK	TITLE	Assistant De	puty Director
COMMUNITY NAME Los	ANGELES COUNTY	TELEP	HONE (626) 458-	•
SIGNATURE		DATE		
COMMENTS			,	
<u></u>				
				Check here if attachments