

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name [REDACTED]

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
43717 Lake Hughes Road

Company NAIC Number:

City Lake Hughes

State ca

ZIP Code 93532

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
SW 1/4 of SE 1/4 of Section 22 T7N R15W APN 3242-005-027

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Agricultural

A5. Latitude/Longitude: Lat. 34.281272 Long. 118.393457 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 1A

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 1650 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 24
c) Total net area of flood openings in A8.b 2419 sq in
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
c) Total net area of flood openings in A9.b N/A sq in
d) Engineered flood openings? ☐ Yes ☒ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
065043 Los Angeles County

B2. County Name
Los Angeles

B3. State
CA

B4. Map/Panel Number
06037C0365F

B5. Suffix
F

B6. FIRM Index Date
9/26/08

B7. FIRM Panel
Effective/Revised Date
9/26/08

B8. Flood
Zone(s)
AO

B9. Base Flood Elevation(s) (Zone
AO, use base flood depth)
1 ft

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/Source: _____

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date: N/A ☐ CBRS ☐ OPA

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. 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 C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: LA CO BM#5591

Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | | |
|---|----------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>3333.02</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>N/A</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>3332.97</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>3333.23</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |

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 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No
☐ Check here if attachments.

Certifier's Name Kacie A Plouff

License Number 9013 (exp 1/17)

Title Land Surveyor

Company Name Christensen & Plouff Land Surveying

Address 27821 Fremont Court #6

City Valencia

State CA

ZIP Code 91355

Signature Kacie A Plouff

Date 4/11/16

Telephone 661-645-9320




ELEVATION CERTIFICATE, page 2

| | | | | |
|---|--|----------|---------------------------|--|
| IMPORTANT: 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. Route and Box No. 43717 Lake Hughes Road | | | Policy Number: | |
| City Lake Hughes | | State CA | ZIP Code 93532 | |
| | | | Company NAIC Number: | |

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The subject two buildings for this certificate are horse stables. The floor is dirt surrounded by a concrete block stem wall foundation. The lowest floor elevation listed is for the dirt floor of the building. Vents listed in Section A8 are located approx. 9" above top of stem wall.

| | | |
|-----------|---|--------------|
| Signature |  | Date 4/11/16 |
|-----------|---|--------------|

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is 0.11 ☒ feet ☐ meters ☐ above or ☒ below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is 0.26 ☒ feet ☐ meters ☒ above or ☐ below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is N/A. ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E3. Attached garage (top of slab) is N/A. ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is N/A. ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community’s floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G. N/A

SECTION F – PROPERTY OWNER (OR OWNER’S REPRESENTATIVE) CERTIFICATION

The property owner or owner’s authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner’s or Owner’s Authorized Representative’s Name _____

| | | | |
|-----------|------|-----------|----------|
| Address | City | State | ZIP Code |
| Signature | Date | Telephone | |

Comments _____

☐ Check here if attachments.

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community’s floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

| | | |
|-------------------|------------------------|---|
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certificate Of Compliance/Occupancy Issued |
|-------------------|------------------------|---|

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____. ☐ feet ☐ meters Datum ____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____. ☐ feet ☐ meters Datum ____

G10. Community’s design flood elevation: _____. ☐ feet ☐ meters Datum ____

| | |
|-----------------------|-----------|
| Local Official’s Name | Title |
| Community Name | Telephone |
| Signature | Date |

Comments _____

☐ Check here if attachments.

Building Photographs

See Instructions for Item A6.

| | |
|--|---|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 43717 Lake Hughes Rd | For Insurance Company Use: Policy Number |
| City Lake Hughes State CA ZIP Code 93532 | Company NAIC Number |
| <p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p> | |



Front View (2/12/16)



Side View (2/12/16)

Building Photographs

Continuation Page

| | |
|---|----------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 43717 Lake Hughes Rd | For Insurance Company Use: |
| | Policy Number |
| City Lake Hughes State CA ZIP Code 93532 | Company NAIC Number |

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."



Side View (2/12/16)



Rear View (2/12/16)