

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 5.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME [REDACTED]		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 4554 QUARTZ HILL RD.		Policy Number	
CITY QUARTZ HILL,	STATE CA	ZIP CODE 93536	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TPN 3101-020-019			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use comments section if necessary.) RESIDENTIAL (MOBILE HOME TRAILER)			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER UNINCORPORATED AREA		B2. COUNTY NAME LOS ANGELES		B3. STATE CA	
B4. MAP AND PANEL NUMBER 065043 0230	B5. SUFFIX b	B6. FIRM INDEX DATE 11/15/85	B7. FIRM PANEL EFFECTIVE/REVISED DATE 12/2/80	B8. FLOOD ZONE(S) AO	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 2

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: LOCAL DATUM)

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)

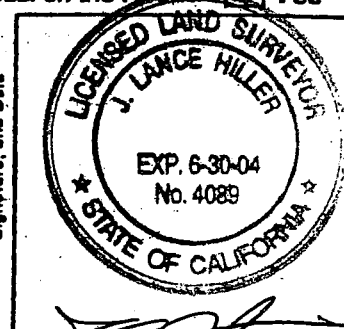
C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. 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 LOCAL Conversion/Comments PER DIRECTION OF L.A. CO. DRAINAGE AND GRADING ENGINEER
Elevation reference mark used 100.00 Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>97.0</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>N/A</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>97.0</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>94.2</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>94.5</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1.0 ft. of LAG	<u>N/A</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>N/A</u> sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



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 J. LANCE HILLER		LICENSE NUMBER LS 4089	
TITLE OWNER/SURVEYOR	COMPANY NAME SITE SURVEYING		
ADDRESS 42919 CHICORY AVE.	CITY LANCASTER	STATE CA	ZIP CODE 93534
SIGNATURE 	DATE 6/25/2003	TELEPHONE (661) 948-2428	

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt, Suite, and/or Bldg. No.) OR P.O. ROUTE AND F NO.
4554 QUARTZ HILL RD.

CITY
QUARTZ HILL

STATE
CA

ZIP CODE
93536

For Insurance Company Use:

Policy Number

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

C3e: EQUIPMENT IS WATER HEATER

☐ Check here if attachment

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONES AO and A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is 0.2 ft(m) 0.6 in.(cm) ☒ above or ☐ below (check one) the highest adjacent grade.

E3. For 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.

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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

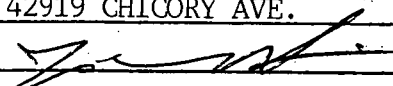
J. LANCE MILLER

ADDRESS
42919 CHICORY AVE.

CITY
LANCASTER

STATE
CA

ZIP CODE
93534

SIGNATURE


DATE
6/25/2003

TELEPHONE
(661) 948-2428

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. Check the applicable box(es) and sign below.

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

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

☐ The following information (Items G1-G6) is provided for community floodplain management purposes.

G1. PERMIT NUMBER

G2. DATE PERMIT ISSUED

G3. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G4. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G5. Elevation of as-built lowest floor (including basement) of the building is:

ft(m) Datum:

G6. BFE or (in Zone AO) depth of flooding at the building site is:

ft(m) Datum:

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

☐ Check here if attachments



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

OMB 3067-0077
Expires: July 1984

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 construction; and, 4) Other buildings rated as Post-FIRM rules.

BUILDING OWNER'S NAME Jack Hammond ADDRESS 11958 Tulsa St Northridge Ca.
PROPERTY LOCATION (Lot and Block numbers and address if available) 4554 Quartz Hill Road Tr. 11899 Lots 384 QUARTZ HILL, CA. 93536

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.

SECTION I ELIGIBILITY CERTIFICATION (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV. (In AO Zone, use depth)	BUILDING IS
065043	0230	B	11-15-85	AO	1986	2	<input type="checkbox"/> New/Emergency <input type="checkbox"/> Pre-FIRM Reg. <input checked="" type="checkbox"/> Post-FIRM Reg.

YES ☒ NO ☐ It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of 95.60 ft. NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES ☐ NO ☐ The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means. If NO is checked, attach copy of variance issued by the community.

YES ☐ NO ☐ The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR. OF MANUFACTURE	SERIAL NO.	DIMENSIONS

(Community Permit Official or Registered Professional Engineer, Architect, or Surveyor)

NAME Barry Toler ADDRESS 1110 W Ave J
TITLE Civil Engineer CITY Lancaster STATE Ca. ZIP 93550
SIGNATURE Barry Toler DATE 11/7/87 PHONE 805-945-6417

SECTION II ELEVATION CERTIFICATION (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor.)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet, NGVD (mean sea level) and the average grade at the building site is at an elevation of _____ feet, NGVD.

FIRM ZONES V, V1-V30: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of _____ feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of _____ feet, NGVD.

X FIRM ZONES A, A99, AO, AH, and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of 95.60 feet, NGVD. The elevation of the highest adjacent grade next to the building is 94.6 feet, NGVD. Elevation based on datum per the approved Drainage Plan for this development by the FH the Lancaster District Office.

SECTION III FLOODPROOFING CERTIFICATION (Certification by a Registered Professional Engineer 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 occur unless measures are taken prior to the flood to prevent entry of water (e.g., bolting metal shields over doors and windows).)

YES ☐ NO ☐ Will the building be occupied as a residence?

If the answer to both questions is YES, the floodproofing cannot be credited for rating purposes and the actual lowest floor must be completed and certified instead. Complete both the elevation and floodproofing certificates.

FIRM ZONES A, A1-A30, V1-V30, AO and AH: Certified Floodproofed Elevation is _____ feet, (NGVD).

THIS CERTIFICATION IS FOR ☒ SECTION II ☐ BOTH SECTIONS II AND III (Check One)

CERTIFIER'S NAME FRED W. PORTER COMPANY NAME DEWALT-PORTER ENGR., R.C.E 33448 LICENSE NO. (or Affix Seal)
TITLE PRINCIPLE ADDRESS 936 W. AVE J-4, LANCASTER CA 93534 ZIP 93534
SIGNATURE Fred W. Porter DATE 12-29-86 CITY LANCASTER STATE CA. PHONE 805-942-7000

The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the agent.

