

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 5.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME [REDACTED]		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 49721 Gorman School Rd.		Company NAIC Number
CITY Gorman	STATE CA	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 3251-14-43-and 44		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use comments section if necessary.) Non-Residential		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.### or ##.####)	HORIZONTAL DATUM <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type: _____) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER LA COUNTY 065043		B2. COUNTY NAME LOS ANGELES		B3. STATE CALIFORNIA	
B4. MAP AND PANEL NUMBER 0005	B5. SUFFIX B	B6. FIRM INDEX DATE 12/2/80	B7. FIRM PANEL EFFECTIVE/REVISED DATE 11/15/85	B8. FLOOD ZONE(S) AO	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 1 FT.

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.

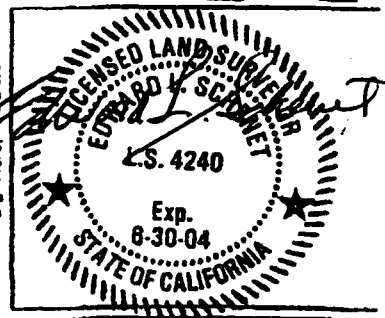
C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. If no diagram accurately represents the building, provide a sketch or photograph.)

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 _____	Conversion/Comments _____
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Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes NO

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	FF 3803	0	R.(m)
<input type="checkbox"/> b) Top of next higher floor	_____	_____	R.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	_____	R.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____	_____	R.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	FF 3803	_____	R.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	3800	_____	R.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	380T	5	R.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1.0 ft. of LAG	_____	_____	_____
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____	_____	sq. in. (sq. cm)



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 Edward L. Schenet	LICENSE NUMBER PLS 4240
TITLE Principal	COMPANY NAME CALVADA Surveying, Inc
ADDRESS 108 Business Center Dr.	CITY Corona
SIGNATURE <i>Edward J. Schenet</i>	STATE CA
	DATE 6/15/00
	TELEPHONE (909) 280-9960
	ZIP CODE 92880

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

BUILDING STREET ADDRESS (including Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE A NO. CITY STATE ZIP CODE
49721 Gorman School Rd. Los Angeles County California

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 NONE

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 (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 ft.(m) 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
ADDRESS CITY STATE ZIP CODE
SIGNATURE DATE TELEPHONE
COMMENTS

Check here if attachment

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 attachment