



COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6736 West Avenue A-14		Company NAIC Number
City Lancaster	State CA	ZIP Code 93536
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) AIN: 3260-009-022		

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

A5. Latitude/Longitude: Lat. _____ Long. _____ Lat 34° 48' 25.4" Long 118° 15' 08.7" 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 1

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s)	_____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	_____ sq in
c) Total net area of flood openings in A8.b	_____ sq in

A9. For a building with an attached garage, provide:

a) Square footage of attached garage	_____ sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	<u>10</u>
c) Total net area of flood openings in A9.b	<u>840</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Los Angeles County 065043		B2. County Name		B3. State	
B4. Map/Panel Number 065043 0080	B5. Suffix	B6. FIRM Index Date July 6, 1998	B7. FIRM Panel Effective/Revised Date December 2, 1980	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) N/A

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 (Describe) By Hydrology Study (Flood Depth 2.79 Feet)

B11. Indicate elevation datum used for BFE in Item 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 _____ ☐ 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, ARIA, ARIAE, ARIA1-A30, ARIA/1-A30, ARIA/1-A30, ARIA/1-A30, ARIA/1-A30. Complete Items C2.a-g below according to the building diagram specified in Item A7.
Benchmark Utilized _____ Vertical Datum _____
Conversion/Comments _____

COMMENTS:

Project started when form was valid. Completed when form expired.

Date of Review: 7/29/10 Community Official: [Signature] for George De La O

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

SUPPLEMENTAL INFORMATION FOR SECTION E

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. 6736 West Avenue A-14			Policy Number	
City Lancaster, CA 93536	State	ZIP Code	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

Signature _____ Date _____ ☐ Check here if attachments

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 _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ 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 _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is 0.5 ☒ 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 and G9.

- 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-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- 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 (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site _____ ☐ feet ☐ meters (PR) Datum _____
- G10. Community's design flood elevation _____ ☐ feet ☐ meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

☐ Check here if attachments

ELEVATION CERTIFICATE

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 ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Company NAIC Number
CITY	STATE	ZIP CODE
County of Los Angeles	CA	93566
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
BPR: 3260-009-022		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)		
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		B2. COUNTY NAME		B3. STATE	
Antelope Acres 065043		Los Angeles		CA	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
065043-080	B	Dec 2, 1989	80	A	2395.79

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): By Hydrology Study (See attached)

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 C3.a-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 used Does the elevation reference mark used appear on the FIRM? ☐ Yes ☐ No

☐ a) Top of bottom floor (including basement or enclosure) ft.(m)

☐ b) Top of next higher floor ft.(m)

☐ c) Bottom of lowest horizontal structural member (V zones only) ft.(m)

☐ d) Attached garage (top of slab) ft.(m)

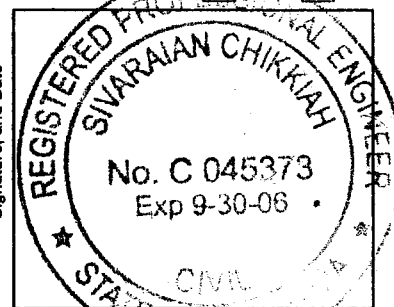
☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) ft.(m)

☐ f) Lowest adjacent (finished) grade (LAG) ft.(m)

☐ g) Highest adjacent (finished) grade (HAG) ft.(m)

☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade

☐ i) Total area of all permanent openings (flood vents) in C3.h 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	LICENSE NUMBER
SIVARAIAN CHIKRIAH	CA 5373
TITLE	COMPANY NAME
PO Box 3037	CA
ADDRESS	CITY
	STATE
SIGNATURE	ZIP CODE
	TELEPHONE

IMPORTANT: In these spaces, copy 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. 6736 West Avenue B-14		Policy Number	
CITY Los Angeles County	STATE CA	ZIP CODE	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

Garage is below the flood level. VENTS as noted below are installed in the wall with in 12' of existing ground level to drain the water. 6 vents of 6" x 14" on west side wall 3 vents of 6" x 14" on North side wall and 1 vent - 6" x 14" vent on East side wall along with garage door.

☐ Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1. through E5. 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 1 (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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is 0 3 ft. (m) 10 in. (cm) ☒ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ft. (m) in. (cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ft. (m) in. (cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

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

ADDRESS PO Box 3037 CITY QUARTZ HILL STATE CA ZIP CODE 93531
SIGNATURE [Signature] DATE 4/17/06 TELEPHONE 661-722-0382

COMMENTS The height of building pad is based on the hydrology study 97-2751-H dt 7-25-2005
By AZ Geotechnical Inc.

☐ 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.

- G1. ☐ 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.)
- 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-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft. (m) Datum: _____

G9. 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