** TDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM



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

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 9720 East Avenue G10	Company NAIC Number				
CITY Lancaster		STATE	ZIP COD 93535	DE	
PROPERTY DESCRIPTION (Lot and Bloc East 1/2 of Southwest 1/4 of Northeast 1/4			83333		
BUILDING USE (e.g., Residential, Non-res	<u> </u>		ecessary)		
Residential					
LATITUDE/LONGITUDE (OPTIONAL)			OURCE: GPS (Type		
(##°-##'-##.##" or ##.####")	[_] NAD 192/	☐ NAD 1983	USGS Qua	ad Map Other:	
	SECTION B - FLOOD	NSURANCE RATE MAP (FIRM) INFO	ORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NU	IMBER B	. COUNTY NAME	l B3	3. STATE	
Los Angeles County 065043		incorporated Area LA (COUNTY O		
B4. MAP AND PANEL B5. SUFFIX		B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)	
NUMBER	B6. FIRM INDEX DATE	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	(Zone AO, use depth of flooding)	
065043 0125 B	12/2/80	12/2/80	Α	N/A	
B10. Indicate the source of the Base Flood Elevi					
☐ FIS Profile ☐ FIRM		nined See 139 1 Other (Descri	<u></u>		
B11. Indicate the elevation datum used for the B			Other (Describe):	Designation D-t-	
B12. Is the building located in a Coastal Barrier I				Designation Date	
		LEVATION INFORMATION (SURVE		· · · · · · · · · · · · · · · · · · ·	
C1. Building elevations are based on: Const	_		Finished Construction		
*A new Elevation Certificate will be required					
C2. Building Diagram Number (Select the build		the building for which this certificate is t	eing completed - see page	es 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 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			auon. Ose une space provi	ded of the Continents area of	
Section D or Section G, as appropriate, to d Datum Conversion/Comments		UII.			
	s the elevation reference ma	k used appear on the FIRM? Yes			
a) Top of bottom floor (including baseme	i i	ft.(m)	_		
Di b) Top of next higher floor	an or enacoure;	tt.(m)	bossed Seal		
C) Bottom of lowest horizontal structural	member (V zones only)	ft.(m)	8 8		
☐ d) Attached garage (top of slab)	indinoi (1 zonos ony)	ft.(m)	d Date		
e) Lowest elevation of machinery and/or	equipment		end .	!	
servicing the building (Describe in a C		ft.(m)	License Number, Signature,		
f) Lowest adjacent (finished) grade (LAG)		ft.(m)	P S S		
g) Highest adjacent (finished) grade (HA	•	ft.(m)	88		
h) No. of permanent openings (flood ver	•		.8		
i) Total area of all permanent openings (flood vents) in C3.h <u>2016</u> sq.	in. (sq. cm)			
And the second s	SECTION D - SURVEYO	R, ENGINEER, OR ARCHITECT CEI	RTIFICATION		
This certification is to be signed and sealer				mation.	
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	оо ринонала ву нна от н	· ·	LICENSE NUMBER		
TITLE .		COMPANY NAME	<u> </u>		
ADDRESS		CITY	STATE	ZIP CODE	
SIGNATURE		DATE	TELEPHO		
			· · · · · · · · · · · · · · · · · · ·		

IMPORTANT: In these spaces, cop			7	For Insurance Company Use:
BUILDING STREET ADDRESS (Including	g Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	IOX NO.	· · · · · · · · · · · · · · · · · · ·	Policy Number
9720 East Avenue G10		•	710.0000	0
Lancaster	STATE CA	=	ZIP CODE 93535	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR AF	RCHITECT CERTIFICATIO	ON (CONTINUED)	
Copy both sides of this Elevation Cer	rificate for (1) community official, (2) insurance agent/c	company, and (3) building o	owner.	
COMMENTS		. , , , , , , , , , , , , , , , , , , ,		
				Check here if attachments
SECTION E - BU	UILDING ELEVATION INFORMATION (SURVEY NO	OT REQUIRED) FOR ZON	NE AO AND ZONE A	
	E), complete Items E1 through E4. If the Elevation Cer			
Section C must be completed.				
	ct the building diagram most similar to the building for v	which this certificate is being	g completed – see pa	ages 6 and 7. If no diagram accurately
represents the building, provide as		· · · · · · · · · · · · · · · · · · ·	7 6-1	distriction of the second
 I ne top of the bottom floor (includin natural grade, if available). 	ng basement or enclosure) of the building isft.(m) Āur(cu) Kiāponē or ⊠	71 below (check one)	rne nignest adjacent grade. (Use
	enings (see page 7), the next higher floor or elevated f	loor (elevation b) of the buil	lding is ft.(m) 9 in	.(cm) above the highest adjacent
grade. Complete items C3.h and (C3.i on front of form.	•		
	th number is available, is the top of the bottom floor ele		he community's flood	plain management ordinance?
	The local official must certify this information in Section			·
The manager and a second of the	SECTION F - PROPERTY OWNER (OR OWNE			41 4 7774 4 4 4
	rized representative who completes Sections A, B, C nere. The statements in Sections A, B, C, and E are o			thout a FEMA-issued or community-
	AUTHORIZED REPRESENTATIVE'S NAME	Unious to trie book Of Hily KNO	miouyo.	
·				
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
·				
· · · · · · · · · · · · · · · · · · ·				Check here if attachments
	SECTION G - COMMUNITY IN	FORMATION (OPTIONAL	.)	
	aw or ordinance to administer the community's floodpl	ain management ordinanc	e can complete Secti	ons A, B, C (or E), and G of this Elevatic
Certificate. Complete the applicable ite				
	vas taken from other documentation that has been sign vation information. (Indicate the source and date of the			ineer, or architect who is authorized by
	valion miormation. (molcate the source and date of the d Section E for a building located in Zone A (without a			ne AO.
	ns G4-G9) is provided for community floodplain manage		.,	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
:				
	☐ New Construction ☐ Substantial Improvement			
G8. Elevation of as-built lowest floor (in	- · · · · · · · · · · · · · · · · · · ·	-	ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flood	<u> </u>		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME Rod Kulborno	oto	TITLE Assistant I	Deputy Director	
COMMUNITY NAME Los Angeles Coun	ity	TELEPHONE (62	26) 458-4300	
SIGNATURE //	1/1	DATE //	21/02 -	
190	by referring to attached survey documentation signed and sta	•	0/0	
CONTRICTIO COMOTE WAS COMPERED D	by releasing to allocation survey occurring flation signed and size	impounty a California licensed		
				Check here if attachments
				KA CHOOK HOLD II GILGONIHOONS

LEVEL DATE 4/4/00

INDEX NUMBER:

PAGE:

Los Angeles County
Department of Public Works
Survey Division

JOB #:

E0491411

DATUM:

LANCASTER 1981 QUAD (FEET)

BENCH:

DESCRIPTION:

ELEVATION:

NFIP

HSE #9720 AVE G-10

FINISH FLOOR HIGHEST ADJACENT GRADE LOWEST ADJACENT GRADE 2387.121 2386.300

2385.500

CENSED LAND SUBJECTION POLICE TO CALIFORNIA W. Joslin 12/19/01

Page 1 of 3

FEDERAL 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 - PI	ROPERTY C	WNER INFORMA	TION	For Insurance Company Use:	
BLUI DING OWNER'S NAME					Policy Number	
BUILDING STREET ADDRESS (Including A	at Unit Suite and/or	Olde Ne VO	D.D.O. DOUTE AND	207.110		
9720 E. AVE	GIO	вюд. No.) O	R P.O. ROUTE AND	BOX NO.	Company NAIC Number	
Lancaster			STATE		ZIP CODE 93535	
PROPERTY DESCRIPTION (Lot and Block	Numbers, Tax Parcel	Number, Lega	al Description, etc.)	3374-	005-021	
BUILDING USE (e.g., Residential, Non-residential, Non-residential)				if necessary.)		
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL	DATUM:	SOURCE:	GPS (Type):		
(##° - ##' - ##.##" or ##.####")	NAD 1927	NAD 1983		USGS Quad Ma	Other:	
LOS ANGELES COUNTY SEC	TION B - FLOOD IN	SURANCE	RATE MAP (FIRM) INFORMATION	1	
B1. NFIP COMMUNITY NAME & COMMUN	ITY NUMBER B	2. COUNTY			B3. STATE	
065043 0425		Z	LOS ANG	eles	Ca	
B4. MAP AND PANEL B5. SUFFIX	B6. FIRM INDEX		IRM PANEL	88. FLOOD	89. BASE FLOOD ELEVATION(S)	
065043 0125 B	12-2-80	EFFECTIV	E/REVISED DATE	ZONE(S)	(Zone AO, use depth of flooding)	
B10. Indicate the source of the Base Flo		data or base	flood depth entere	d in 89.	70.7	
FIS Profile FIRM			_ Lother (Des			
B11. Indicate the elevation datum used f			, <u> </u>		escribe):	
B12. Is the building located in a Coastal	Barrier Resources S	System (CBF	RS) area or Otherwi	ise Protected Are	ea (OPA)? Yes No	
Designation Date:						
SECTIO	N C - BUILDING EL	EVATION I	NFORMATION (SI	JRVEY REQUIR	ED)	
C1. Building elevations are based on:			Building Under		⊠ Finished Construction	
*A new Elevation Certificate will be					sired Consadication	
(C2) Building Diagram Number 8 (Se	elect the building dia	gram most :	similar to the buildir	ng for which this	certificate is being completed - see	
pages 6 and 7. If no diagram accura	ately represents the	building, pro	vide a sketch or ph	notograph.)		
C3. Elevations - Zones A1-A30, AE, AH	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 Secti	on B, convert the da	tum to that (used for the BFE. S	how field measu	rements and datum conversion	
calculation. Use the space provided		area of Section	on D or Section G,	as appropriate, t	o document the datum conversion.	
	Comments					
Elevation reference mark used		Does the ei	evation reference n	nark used appea	ron the FIRM? Yes Who	
a) Top of bottom floor (including l	basement or enclosi	ure)	201			
b) Top of next higher floor			 ·.	ft.(m) g		
c) Bottom of lowest horizontal str	uctural member (V 2	zones only)	··	ft.(m) 👸 🚡		
d) Attached garage (top of slab)e) Lowest elevation of machinery	and/or oquinment		 ·.	ft.(m) ^ ^ 문 달		
servicing the building	androi equipment		•	200		
① f) Lowest adjacent grade (LAG)			2205	fL(m) 4 =		
g) Highest adjacent grade (HAG)	1		03/6	20 (tr(m) 2 is		
No. of permanent openings (fle		t. above adia	scent grade	22 ((11)		
Total area of all permanent ope				(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						
TITLE		co	MPANY NAME		<u></u>	
ADDRESS		CIT	Υ	STATE	ZIP CODE	
SIGNATURE			TE	TELEPHO		
0,01111				CLEPHO	MAC.	

PORTANT: In th	ese spaces, copy	the corresponding information	n from Section A.	For Insurance Company Use:
BUILDING STREET A	DDRESS (Including A	Apt., Unit, Suite, and/or Bldg. No.) Of $G-10$	R P.O. ROUTE AND BOX NO.	Policy Number
CITY Lancus		STATE	$q_i^{z_i}$	P CODE Company NAIC Number
	SECTION D -	SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATION	ON (CONTINUED)
Copy both sides of t	his Elevation Certif	icate for (1) community official, (2) insurance agent/compar	y, and (3) building owner.
COMMENTS				
				Check here if attachments
SECTION E - B	UILDING ELEVATI	ON INFORMATION (SURVEY	NOT REQUIRED) FOR ZOI	NE AO AND ZONE A (WITHOUT BFE)
information for a LONE Building Diagram see pages 6 and E2. The top of the bo (check one) the lE3 For Building Diagram ft.(m)	MA or LOMR-F, See Number 6 (S) 7. If no diagram actiom floor (including highest adjacent grams 6-8 with oper 1 [in.(cm) above the second secon	ction C must be completed. elect the building diagram most ccurately represents the building g basement or enclosure) of the ade. (Use natural grade, if avail nings (see page 7), the next high ne highest adjacent grade. Con	similar to the building for who, provide a sketch or photo building is _ ft.(m) able.) ner floor or elevated floor (enplete Items C3.h and C3.i.e.	$ $
floodplain manag	gement ordinance?	_ Yes _ No _ Unkno	wn. The local official must o	certify this information in Section G.
		PROPERTY OWNER (OR OWN		CERTIFICATION C3.h and C3.i only), and E for Zone A
(without a FEMA-iss the best of my know PROPERTY OWNER	ued or community-	issued BFE) or Zone AO must s - HORIZED REPRESENTATIVE'S N	ign here. The statements in	n Sections A, B, C, and E are correct to
ADDRESS		C	ÍΤΥ	STATE ZIP CODE
SIGNATURE		D	ATE	TELEPHONE
COMMENTS				
				Check here if attachments
		SECTION G - COMMUNITY I	NFORMATION (OPTIONAL	
Sections A, B, C (or E G1. The informat engineer, or elevation da G2. \sumeq A community Zone AO.	 e), and G of this Ele ion in Section C wa architect who is au ta in the Comments official completed 	vation Certificate. Complete the s taken from other documentation thorized by state or local law to area below.)	e applicable item(s) and sig on that has been signed and certify elevation information in Zone A (without a FEMA- nity floodplain management	d embossed by a licensed surveyor, i. (Indicate the source and date of the issued or community-issued BFE) or purposes.
G4. PERMIT NUMBER	G5	DATE PERMIT ISSUED	G6. DATE CERTIFI	CATE OF COMPLIANCE/OCCUPANCY
	uilt lowest floor (inc	New Construction Suluding basement) of the building at the building site is:	N/A	. 12 ft.(m)Datum: NAVD 1988
LOCAL OFFICIAL'S N	AME RHK		TITLE Assistan	t Deputy Director
COMMUNITY NAME		ES COUNTY	TELEPHONE (626)	458 - 4300
SIGNATURE			DATE	· · · · · · · · · · · · · · · · · · ·
COMMENTS		-		
				Check here if attachments