

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.

SEC	CTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or 9833 East Avenue D-4	Bidg. No.) or P.O. Route and Box No.	Company NAIC Number
City State ZIP Code Lancaster CA 93535		
A3. Property Description (Lot and Block Numbers, Tax Parcel AIN 3306-006-135	Number, Lagal Description, etc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.) Garage	
A5. Latitude/Longitude: Lat LongLat 34° 46'	30.35" Long 117° 57' 09.80" Horizontal Datu	m: 🔲 NAD 1927 🖾 NAD 1983
A6. Attach at least 2 photographs of the building if the Certifica A7. Building Diagram Number	ite is being used to obtain flood insurance.	
A8. For a building with a crawl space or enclosure(s), provide	A9. For a building with an atl	ached garage, provide:
a) Square footage of crawl space or enclosure(s)	sq ft a) Square footage of at	
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 		od openings in the attached garage above adjacent grade
c) Total net area of flood openings in A8.b	aq in c) Total net area of floo	, ,
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INFORMATION	ON
B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Los Angeles County 065043		<u> </u>
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date July 6, 1998	B7. FIRM Panel B8. Flood Effective/Revised Date 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) date	or base flood depth entered in Item 89.	
☐ FIS Profile ☐ FIRM ☐ Community Del	ermined Other (Describe) N/A	
	NGVD 1929 NAVD 1988 Other (Descri	
B12. Is the building located in a Coastal Barrier Resources Syst Designation Date	om (CBRS) area or Otherwise Protected Area (OPA)?	TYes ⊠No
SECTION C - BUILDING	ELEVATION INFORMATION (SURVEY REQU	RED)
C1. Building elevations are based on: Construction D		☐ Finished Construction
*A new Elevation Certificate will be required when construct C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-	- •	AU AR/AO Complete Home C2 a a
below according to the building diagram specified in item A		Art, Arano. Complete Itelia Cz.a-y
Benchmark Utilized Vertical Deturn		
Conversion/Comments		
COMMENTS: Disregard section C. For section F, see	section D.	
Section E. E5 is not applicable.		
Date of Review 7/29/10	Men	Esonge de la O
Date of Review: 7/6//10	Community Official:	— torge sela U

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



FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

		SECTION	A - PROPERTY OW	IER INFORMAT	TON	For Insurance Compa	any Use:
BUILDING OWNER'S NA	ME				•	Policy Number	
DI W DINO COTTO	DE00 (1 : "						12.77
BUILDING STREET ADD 9833 E. AVENUE D-4	RESS (Including /	Apt., Unit, Suite, and/	· · · · · · · · · · · · · · · · · · ·			Company NAIC I	Number
CITY Lancaster			ST/ CA	TE	ZIP C 9353		
PROPERTY DESCRIPTION 3306-006-135	ON (Lot and Block	Numbers, Tax Parce	el Number, Legal Desc	ription, etc.)			· · · · · · · · · · · · · · · · · · ·
BUILDING USE (e.g., Res		dential, Addition, Acc	essory, etc. Use a Co	nments area, if n	ecessary.)		
Single Familey Residential							
LATITUDE/LONGITUDE: ((##°-##'-##.##" or ##.			ONTAL DATUM: 027	SC	OURCE: GPS (T USGS)		Other:
	S	ECTION B - FLOOI	INSURANCE RATE	MAP (FIRM) IN	FORMATION		· · · · · · · · · · · · · · · · · · ·
B1. NFIP COMMUNITY NAME (& COMMUNITY NUM	BER	B2. COUNTY NAME			B3. STATE	
La County / 125			Los Angeles	·		CA	
B4. MAP AND PANEL NUMBER 065043 125	B5. SUFFIX B	B6. FIRM INDEX DAT	B7. FIRM E EFFECTIVE/R 12-02	EVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD EL (Zone AO, use depth	
B10. Indicate the source of the	Base Flood Elevat	ion (BFE) data or base	flood depth entered in B	9.		·	
	☐ FIRM	Community De		Other (Descrit			
B11. Indicate the elevation date					Other (Describe):		
B12 is the building located in a						Designation Date	-
	SEC	TION C - BUILDING	ELEVATION INFO	MATION (SUR)	/EY REQUIRED)		
C1. Building elevations are bas	sed on: 🔲 Constru	ction Drawings*	Building Under Con	struction*	Finished Construction		
*A new Elevation Certificat	te will be required w	when construction of the	building is complete.				
C2. Building Diagram Number	_ (Select the building	ng diagram most simila	rto the building for which	this certificate is b	eing completed - see p	ages 6 and 7. If no diagra	am
accurately represents the	building, provide as	sketch or photograph.)					
C3. Elevations - Zones A1-A3	O, AE, AH, A (with E	BFE), VE, V1-V30, V (w	ith BFE), AR, AR/A, AR	AE, AR/A1-A30, A	R/AH, AR/AO		
Complete Items C3a-i be						m the datum used for the	BFE in
Section B, convert the date	um to that used for	the BFE. Show field me	easurements and datum	conversion calcula	tion. Use the space p	ovided or the Comments	area of
Section D or Section G, as					•		
Datum Conversion		_					
Elevation reference mark	used Does t	he elevation reference i	mark used appear on the	FIRM? Yes	☐ No		1
o a) Top of bottom floor (i			• • • • • • • • • • • • • • • • • • • •	fL(m)			
o b) Top of next higher flo	•	,			Š		ŀ
o c) Bottom of lowest hori	izontal structural me	ember (V zones only)			ossed Seal, Date		İ
o d) Attached garage (top		`	ft.(n)			
o e) Lowest elevation of n	-	quipment			ر م و رو		İ
servicing the buildin	g (Describe in a Co	omments area)		fL(m)	nbe	÷	
o f) Lowest adjacent (finis	hed) grade (LAG)	•	ft_(m		License Number, Emt Signature, and		
o g) Highest adjacent (fini	ished) grade (HAG))		ft(m)	nse S	•	
o h) No. of permanent op	enings (flood vents) within 1 ft. above adja			. <u></u>		
o i) Total area of all perma					_		····
	SF	CTION D. SURVEY	OR, ENGINEER, OF	ARCHITECT C	ERTIFICATION		
This certification is to be s						formation	
I certify that the information							
I understand that any false						o .	
CERTIFIER'S NAME A. Ya		<u></u>	<u></u>		LICENSE NUMBER	534971	
TITLE Engineer			СО	MPANY NAME JT	Engineering		-
ADDRESS			CIT	(STAT	E ZIP CC	DDE
33336 Agua Dulce, Cyn Rd,				a Dukce	CA CA	91390	
SIGNATURE)	DA*		TELE	PHONE	
			5-1		(661)		

	by the corresponding information from			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt. 9833 E. Avenue D-4	, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND	BOXNO.		Policy Number
СПҮ	STAT	Ē	ZIP CODE	Company NAIC Number
Lancaster	CA TION D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIF	93535 ICATION (CONTINUE)	0)
* 	te for (1) community official, (2) insurance agent			
COMMENTS	(1) Continuinty Offices, (2) # Solicino agoni	company, and (o) band		
The attached 2 car garge is 528 S.F. with	slab on grade construction			
				☐ Check here if attachmen
SECTION E - BUILDING I	ELEVATION INFORMATION (SURVEY N	IOT REQUIRED) FO	OR ZONE AO AND ZO	NE A (WITHOUT BFE)
•	mplete Items E1 through E4. If the Elevation Co	ertificate is intended for	use as supporting informa	tion 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 pa	ges 6 and 7. If no diagram accurate
represents the building, provide a sketo		mar and coranda o	bong completed too pa	900 0 21.2 11 11 11 0 0 0 0 9 0 11 11 11 11 11
E2. The top of the bottom floor (including ba	esement or enclosure) of the building isft.(n	n) 💪 in.(cm) 🔀 above	or 🔲 below (check one)	the highest adjacent grade. (Use
natural grade, if available).		floor (algustion b) of the	huilding is \$ (m) 1 in	(cm) above the highest adjacent
is. For Building Diagrams 6-8 with opening grade. Complete items C3.h and C3.i	ps (see page 7), the next higher floor or elevated on front of form.	HOUR (CREVATION D) OF THE		(um) above the mynest aujacent
· ·	d/or equipment servicing the building is $\underline{2}$ ft.(m)	in.(cm) 🖾 above o	r 🔲 below (check one) t	he highest adjacent grade. (Use
natural grade, if available).				
	mber is available, is the top of the bottom floor e e local official must certify this information in Sect		with the community's flood	plain management ordinance?
	TION F - PROPERTY OWNER (OR OWN		ATIVE) CERTIFICATIO	N .
	representative who completes Sections A, B, C			
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		СПҮ	STAT	E ZIP CODE
9833 E Avenue D-4		Lancaster	CA	93535
SIGNATURE		DATE		PHONE 946-2830
COMMENTS			(00.)	040 2000
	·	· · · · · · · · · · · · · · · · · · ·		
		· ·		Check here if attachmer
	SECTION G - COMMUNITY II	NEORMATION (OPT	TONAL)	Creck fiele ii attacriinei
The local official who is authorized by law o	r ordinance to administer the community's flood			ons A, B, C (or E), and G of this Elev
Certificate. Complete the applicable item(s)		ŭ	•	
	aken from other documentation that has been si			neer, or architect who is authorized l
	rmation. (Indicate the source and date of the election E for a building located in Zone A (without :			ne AO
	4-G9) is provided for community floodplain mana			, o / to .
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. D/	ATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
, , , , , , , , , , , , , , , , , , ,				
· · · · · · · · · · · · · · · · · · ·	ew Construction Substantial Improvement		# ()	Det
G8. Elevation of as-built lowest floor (including)	·=		ft.(m) ft.(m)	Datum: Datum:
G9. BFE or (in Zone AO) depth of flooding	ature buttuing site is.	THE P	i.(iii)	Datum
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPHO	NE .	
SIGNATURE		DATE		
COMMENTS				
	·			
				Check here if attachmer



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A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or 9833 East Avenue D-4	Bidg. No.) or P.O. Route and Box No.	Company NAIC Number
City State ZIP Code Lancaster CA 93535		
A3. Property Description (Lot and Block Numbers, Tax Parcel AIN 3306-006-135	Number, Legal Description, etc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.) Manufactured Home	
A5. Latitude/Longitude: Lat LongLat 34° 46'	30.35"Long 117° 57' 09.80" Horizontal Dat	um: 🔲 NAD 1927 🖾 NAD 1983
A8. Attach at least 2 photographs of the building if the Certifica A7. Building Diagram Number	its is being used to obtain flood insurance.	
A8. For a building with a crawl space or enclosure(s), provide	A9. For a building with an a	ttached garage, provide:
square footage of crawl space or enclosure(s)	sq ft s) Square footage of s	ttached garage sq ft
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 		ood openings in the attached garage above adjacent grade
c) Total net area of flood openings in A8.b	sq in c) Total net area of flo	· · · —
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INFORMAT	ON
B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Los Angeles County 065043		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date July 6, 1998	87. FIRM Panel B8. Flood Effective/Revised Date 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) date	or base flood depth entered in Item 89.	
FIS Profile FIRM Community Det	ermined Other (Describe) N/A	
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B12. Is the building located in a Coastal Barrier Resources Syst Designation Date	em (CBRS) area or Otherwise Protected Area (OPA) CBRS OPA	? ☐Yes ⊠No
SECTION C - BUILDING	ELEVATION INFORMATION (SURVEY REQU	IRED)
C1. Building elevations are based on: Construction Dr		Finished Construction
*A new Elevation Certificate will be required when construct C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-\	• ,	VALL AB/AC Complete Home C3 a.a.
below according to the building diagram specified in item A7		VALT, ARVAC. Complete matte C2.8-9
Benchmark Utilized Vertical Detum		
Conversion/Comments		
COMMENTS: Disregard section C. For section F, see	section D.	
Section E. E5 is not applicable.		
Date of Baylow 7/29/10	fle a	Corne de la O
Date of Review: 7/0//	Community Official:	corge se un v

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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

		SECTION A	- PROPERTY OWNER	INFORMATI	ION	For Insurance Company Use:
BUILDING OWNER'S NAM	E	,				Policy Number
	7,					
BUILDING STREET ADDR 9833 E. AVENUE D-4	ESS (Including A	Apt., Unit, Suite, and/o		TE AND BO		Company NAIC Number
CITY Lancaster			STATE CA		ZIP CC 93535	DDE
PROPERTY DESCRIPTION 3306-006-135	N (Lot and Block	Numbers, Tax Parcel		n, etc.)		• .
BUILDING USE (e.g., Resid	ential Non-resid	lential Addition Acces	sory etc. Use a Comme	nts area if ne	cessary.)	
Single Familey Residential	orida, Horricon	ioriaa, radioori, raoo	, out y, out.	,		
LATITUDE/LONGITUDE (C (##° - ##' - ##.##" or ##.#			ONTAL DATUM: 27 □ NAD 1983	SO	OURCE: GPS (Ty USGS Q	
	S	ECTION B - FLOOD	INSURANCE RATE MA	P (FIRM) IN	FORMATION	
B1. NFIP COMMUNITY NAME &	COMMUNITY NUM	BER	B2. COUNTY NAME		t e e e e e e e e e e e e e e e e e e e	B3. STATE
La County / 125			Los Angeles			CA
B4. MAP AND PANEL NUMBER 065043 125	85. SUFFIX B	B6. FIRM INDEX DATE	B7. FIRM PAN EFFECTIVE/REVISE 12-02-1980	D DATE	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
B10. Indicate the source of the E		· '				
] FIRM	Community Del		Other (Describ		
B11. Indicate the elevation datur B12. Is the building located in a					Other (Describe):	Designation Date
biz is the bulloung located in a						Designation Date
			ELEVATION INFORMA			
C1. Building elevations are base		•	Building Under Construct	xou. ⊠i	Finished Construction	
*A new Elevation Certificate						0 - 17 K F
C2. Building Diagram Number_	•		to the building for which this	certificate is be	eing completed - see pa	ages 6 and 7. If no diagram
accurately represents the b	• •	. • .			D/411 4D/40	
C3. Elevations - Zones A1-A30,						with a distance would for the DET in
						m the datum used for the BFE in
				ersion carcula	uon. Use ine space pro	ovided or the Comments area of
Section D or Section G, as		cument the datum conv	asion.			
Datum Conversion		- La elevetica esterado e	and upod copeer on the EIO	M2 [] Voc		
Elevation reference mark us			nark used appear on the FIR		i	
o a) Top of bottom floor (in	-	or enclosure)	ft.(m	•	bossed Seal,	
o b) Top of next higher floo			ft.(m		P P	
o c) Bottom of lowest horiz		ember (v zones only)	ft.(m)	bosse	
o d) Attached garage (top			ft(m)		and	
o e) Lowest elevation of m	•	• •	e /		ver, ure,	
servicing the building	•	omments area)	ft.(m)	umt	
o f) Lowest adjacent (finish			ft.(m)		License Number, Signature,	
o g) Highest adjacent (finis			ft(m)	j je	
o h) No. of permanent ope	T .				ž (
o i) Total area of all perma						
			OR, ENGINEER, OR AR			
This certification is to be sig						
I certify that the information						9.
I understand that any false		be punishable by fine	or imprisonment under 18			F24074
CERTIFIER'S NAME A. Ya	(00)				LICENSE NUMBER	DARCE I
TITLE Engineer		·	COMPA	NY NAME JT	Engineering	
ADDRESS			CITY		STAT	E ZIP CODE
33336 Agua Dulce, Cyn Rd.			Agua Du	dce	CA	91390
SIGNATURE , /	$\overline{}$		DATE			PHONE
A. Y			5-11-05			268-8899

DI III DING CTDEET ADDDCCC #		from Section A.		For Insurance Company Use:
9833 E. Avenue D-4	Unit, Suite, and/or Blog. No.) OR P.O. ROUT	E AND BOX NO.		Policy Number
ITY ancaster	 	STATE CA	ZIP CODE 93535	Company NAIC Numbers
	ON D - SURVEYOR, ENGINEER,		·	D)
opy both sides of this Elevation Certificate	for (1) community official, (2) insurance	agent/company, and (3) b	uilding owner.	tili ja mende kan tiga kendida dan dan dan dan dan dan dan dan dan d
OMMENTS he Main house is a manufatored home wit	th exterior skerting, 1716 S.F. with an a	tached garge		
				Check here if attachmen
SECTION E - BUILDING E	LEVATION INFORMATION (SUR	VEY NOT REQUIRED)	FOR ZONE AO AND ZO	NE A (WITHOUT BFE)
r Zone AO and Zone A (without BFE), com	plete Items E1 through E4. If the Eleva	tion Certificate is intended t	for use as supporting informa	tion for a LOMA or LOMR-F,
action C must be completed. I. Building Diagram Number (Select the bacterist of the building, provide a sketch of the top of the bottom floor (including base natural grade, if available). It for Building Diagrams 6.8 with appoints.	or photograph.) ement or enclosure) of the building is	g ft(m) ∠in.(cm) ⊠abo	ve or Delow (check one)	the highest adjacent grade. (Use
I. For Building Diagrams 6-8 with openings Complete items C3.h and C3.i on front of The top of the platform of machinery and/	form.			
natural grade, if available).	·			
5. For Zone AO only: If no flood depth numi			e with the community's flood	plain management ordinance?
Yes No Unknown. The k	ON F - PROPERTY OWNER (OR		ITATIVE) CERTIFICATIO	N
he property owner or owner's authorized re			 	
sued BFE) or Zone AO must sign here. T	he statements in Sections A, B, C, and	E are correct to the best of	my knowledge.	
ROPERTY OWNER'S OR OWNER'S AL	ITHORIZED REPRESENTATIVES N	AME	·	
DDRESS		CITY	STAT	E ZIP CODE
833 E Avenue D-4 IGNATURE		Lancaster DATE	CA	93535 PHONE
		UATE		946-2830
OMMENTS				
				Check here if attachmen
	SECTION G - COMMUN	ITY INFORMATION (O	PTIONAL)	
e local official who is authorized by law or o		floodplain management o	rdinance can complete Section	ns A, B, C (or E), and G of this Elev
ertificate. Complete the applicable item(s) a			A	
. The information in Section C was take	en nom other occurrentation that has b ration. (Indicate the source and date of	een signed and embossed the elevation data in the Co	by a icensed surveyor, engil omments area below.)	neer, or architect who is authorized t
or local law to certify elevation inform				e AO.
or local law to certify elevation inform 2. A community official completed Section				
or local law to certify elevation inform 2. A community official completed Section			,	
or local law to certify elevation inform 2. A community official completed Section 3. The following information (Items G4-C		n management purposes.		PLIANCE/OCCUPANCY ISSUED
or local law to certify elevation inform 2. A community official completed Section 3. The following information (Items G4-C64.) G4. PERMIT NUMBER	G9) is provided for community floodplair G5. DATE PERMIT ISSUED	n management purposes.		PLIANCE/OCCUPANCY ISSUED
or local law to certify elevation inform L	G9) is provided for community floodplain G5. DATE PERMIT ISSUED Construction Substantial Improve	n management purposes.	DATE CERTIFICATE OF COM	
or local law to certify elevation inform L	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	n management purposes.		PLIANCE/OCCUPANCY ISSUED Datum: Datum:
or local law to certify elevation inform C A community official completed Section The following information (Items G4-C4-PERMIT NUMBER This permit has been issued for: New Elevation of as-built lowest floor (including BFE or (in Zone AO) depth of flooding at its process.	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	n management purposes.	DATE CERTIFICATE OF COM	Datum:
or local law to certify elevation inform .	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	n management purposes. G6. ement	DATE CERTIFICATE OF COMI	Datum:
or local law to certify elevation inform .	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	G6. TITLE TELEPH	DATE CERTIFICATE OF COMI	Datum:
or local law to certify elevation inform 2.	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	G6. TITLE	DATE CERTIFICATE OF COMI	Datum:
or local law to certify elevation inform C A community official completed Section The following information (Items G4-C4. PERMIT NUMBER This permit has been issued for: New and the levation of as-built lowest floor (including at its OCAL OFFICIAL'S NAME COMMUNITY NAME	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	G6. TITLE TELEPH	DATE CERTIFICATE OF COMI	Datum:
or local law to certify elevation inform L A community official completed Section The following information (Items G4-C4. PERMIT NUMBER This permit has been issued for: New and the level of the lev	G9) is provided for community floodplair G5. DATE PERMIT ISSUED Construction Substantial Improve Up basement) of the building is:	G6. TITLE TELEPH	DATE CERTIFICATE OF COMI	Datum: