RECEIVED
MAY 28 2004
City of Roseburg
Community Development Dept

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 OWNER INFORMATION

For Insurance Company Use:
Policy Number
Company NAIC Number

BUILDING OWNER'S NAME: RUSSELL WILSON

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: ~~0 NW KEASY~~ 1345 NW ALMIRA

CITY: ROSEBURG STATE: OR. ZIP CODE: 97470

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): T27S R6W SEC14BD TL200 R13345

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.): NO BLDG @ THIS TIME

LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ##.##" or ##.#####°) HORIZONTAL DATUM: |__| NAD 1927 |__| NAD 1983 SOURCE: |__| GPS (Type): ____ |__| USGS Quad Map |__| Other ____

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER | B2. COUNTY NAME | B3. STATE |
|---|---|---|
| CITY OF ROSEBURG 410067 | DOUGLAS | OREGON |

| 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) |
|---|---|---|---|---|---|
| 410067 0005 | E | 4-21-99 | 5-12-2003 | AE | 433.0 |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
|__| FIS Profile |X| FIRM |__| Community Determined |__| Other (Describe): ____

B11. Indicate the elevation datum used for the BFE in B9: |X| 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 |X| No
Designation Date: ____

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: |X| 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: E MON DOMENICO / PER PLAT Does the elevation reference mark used appear on the FIRM? |__| Yes |X| 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) 427 . 9 ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 428 . 0 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)

License Number, Embossed Seal, Signature, and Date

REGISTERED PROFESSIONAL LAND SURVEYOR
OREGON JANUARY 12, 1992 F. NEIL HIBBS 52989
Expires 6/30/2005

PRE-CONSTRUCTION

## 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: F. NEIL HIBBS LICENSE NUMBER: 52989
TITLE: LICENSED SURVEYOR COMPANY NAME: NEIL HIBBS LAND SURVEYING
ADDRESS: 4739 LOOKINGGLASS RD. CITY: ROSEBURG STATE: OR. ZIP CODE: 97470
SIGNATURE: ____ DATE: 3-30-2004 TELEPHONE: (541) 957-9303

| 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. 0 NW KEASY | Policy Number |
| CITY ROSEBURG STATE OR. ZIP CODE 97470 | 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 BARE LAND

|__| 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 _____ (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 |__|__| ft. (m) |__|__| 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 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.

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 |
|---|---|---|
| | | |

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

# FLOODPLAIN BUILDING SITE DIAGRAM

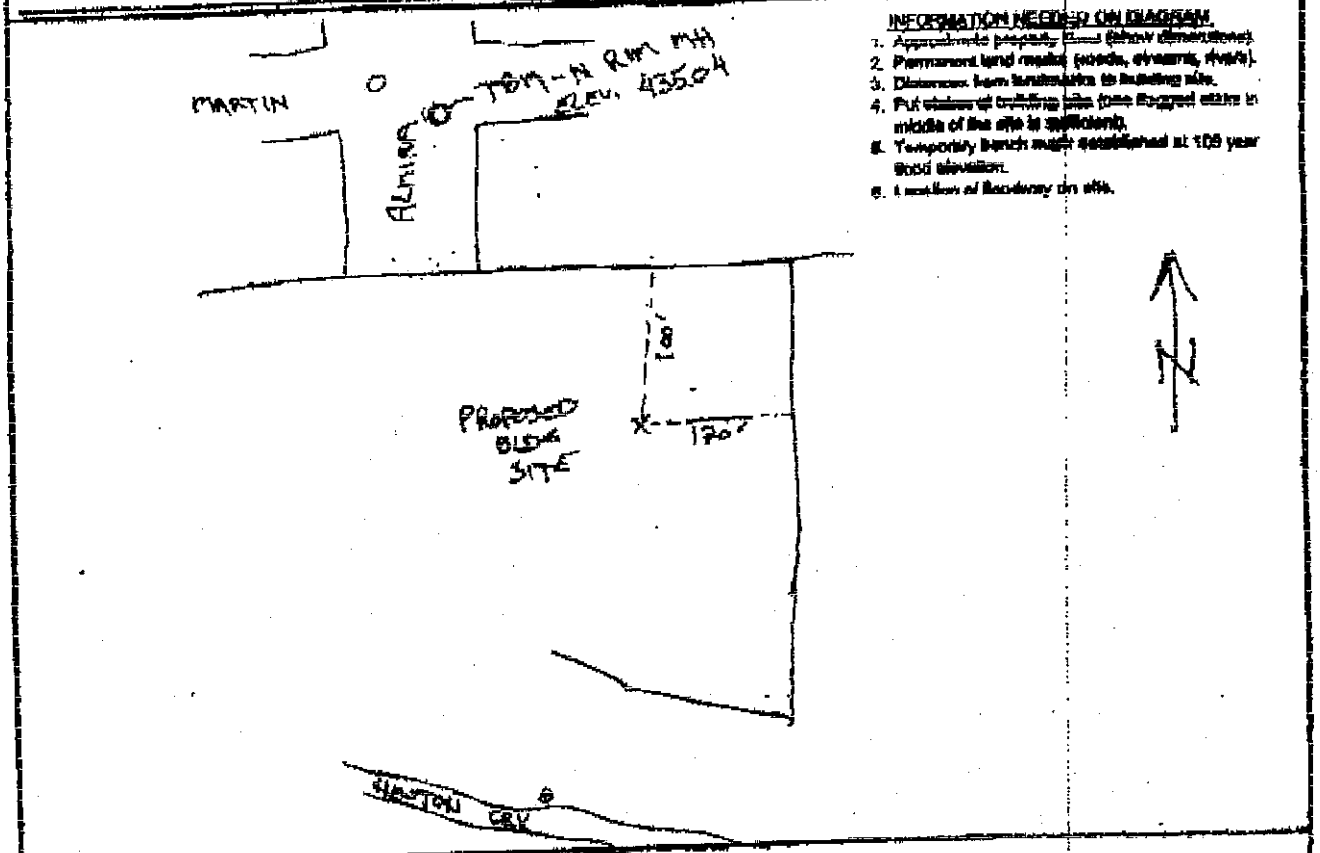
(To be completed by an Oregon Licensed Surveyor or Engineer)

WORK SHEET NO. _____

PROPERTY I.D. NO. R 13345 TOWNSHIP 27S RANGE 6W

SEC. 14 SUB SEC. 8D TAX LOT NO. 200

DIRECTIONS TO AND DESCRIPTION OF SITE: _____




INFORMATION NEEDED ON DIAGRAM

1. Approximate property lines (show dimensions).
2. Permanent land marks (roads, streams, rivers).
3. Distances from landmarks to building site.
4. Put stakes at building site (one flagged stake in middle of the site is sufficient).
5. Temporary bench mark established at 100 year flood elevation.
6. Location of floodway on site.

## PART ONE PRE-CONSTRUCTION

BM: NO CL MON PER NOTE PETY ELEVATION 431.09 LOCATION T27S R6W SEC FLOOD 100 YEAR FLOOD ELEVATION 433.0

(NOTE: Elevation datum MSL) TBM ELEVATION 435.04 TBM LOCATION SEE SKETCH TBM DESCRIPTION SEE SKETCH

(FEDERAL 100 YEAR YES NO) [ FEDERAL FLOODWAY YES NO ] [ MEAN FLOODWAY VELOCITY _____ ]

EXTREME HAZARD HIGH HAZARD LOW HAZARD BUILDING SITE ELEVATION 427.9

FLOODWAY MAP ____ ORTHO PHOTO ____ MINIMUM REQUIRED FLOOR HEIGHT ABOVE GROUND 5.1 TO 8' ABOVE 100YR.

## PART TWO POST-CONSTRUCTION

The building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet NGVD (Mean Sea Level) or has been floodproofed in accordance with the Floodplain Ordinance to an elevation of _____ feet NGVD. The reference level is based on actual construction. YES NO

I CERTIFY AS AN OREGON REGISTERED PROFESSIONAL ENGINEER/SURVEYOR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

SIGNATURE _____ DATE _____

RECEIVED
JAN 10 2005
City of Roseburg
Community Development Dept

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 OWNER INFORMATION

For Insurance Company Use:
Policy Number
Company NAIC Number

BUILDING OWNER'S NAME: RUSSELL WILSON

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 1345 NW ALMIRA

CITY: ROSEBURG STATE: OR. ZIP CODE: 97470

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): T27S R6W SEC. 14BD TL200 R13345

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ##.##" or ##.#####°) HORIZONTAL DATUM: |__| NAD 1927 |__| NAD 1983 SOURCE: |__| GPS (Type): ____ |__| USGS Quad Map |__| Other ____

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER | B2. COUNTY NAME | B3. STATE |
|---|---|---|
| CITY OF ROSEBURG 410067 | DOUGLAS | OREGON |

| 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) |
|---|---|---|---|---|---|
| 410067 0005 | E | 4-21-99 | 5-12-2003 | AE | 433.0 |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
|__| FIS Profile |X| FIRM |__| Community Determined |__| Other (Describe): ____

B11. Indicate the elevation datum used for the BFE in B9: |X| 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 |X| No
Designation Date: ____

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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

C2. Building Diagram Number 8 (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 NGVD 1929 Conversion/Comments N/A
Elevation reference mark used FIRM DOMESTIC / POST PLAT Does the elevation reference mark used appear on the FIRM? |__| Yes |X| No

| | | |
|---|---|---|
| ☐ a) Top of bottom floor (including basement or enclosure) | 433.8 | ft.(m) |
| ☐ b) Top of next higher floor | 436.9 | ft.(m) |
| ☐ c) Bottom of lowest horizontal structural member (V zones only) | N/A | ft.(m) |
| ☐ d) Attached garage (top of slab) | 434.2 | ft.(m) |
| ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | 435.8 | ft.(m) |
| ☐ f) Lowest adjacent (finished) grade (LAG) | 433.8 | ft.(m) |
| ☐ g) Highest adjacent (finished) grade (HAG) | 434.2 | ft.(m) |
| ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | 0 | |
| ☐ i) Total area of all permanent openings (flood vents) in C3.h | 0 | sq. in. (sq. cm) |

License Number, Embossed Seal, Signature, and Date
PROFESSIONAL LAND SURVEYOR
OREGON JANUARY 13, 1999 F. NEIL HIBBS 52989
Expires 6/30/05

## 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: F. NEIL HIBBS LICENSE NUMBER: 52989
TITLE: LICENSED SURVEYOR COMPANY NAME: NEIL HIBBS LAND SURVEYING
ADDRESS: 4739 LOOKINGGLASS RD. CITY: ROSEBURG STATE: OR. ZIP CODE: 97470
SIGNATURE: F. Neil Hibbs DATE: 1-06-05 TELEPHONE: (541) 957-9303

| 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. 1345 NW ALMIRA | Policy Number |
| CITY ROSEBURG STATE OR. ZIP CODE 97470 | 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 LOW GROUND IS 0.8' ABOVE 100 YR. FLOOD ELEV.
C3e.-WATER HEATER

|__| 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 _____ (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 |__|__| ft. (m) |__|__| 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 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.

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 |
|---|---|---|
| | | |

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

RECEIVED
MAR 11 2005
City of Roseburg
Community Development Dept

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 OWNER INFORMATION

For Insurance Company Use:
Policy Number
Company NAIC Number

BUILDING OWNER'S NAME RUSSELL WILSON

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1345 NW ALMIRA

CITY ROSEBURG STATE OR. ZIP CODE 97470

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) T275 R6W SEC 14BD TL200 R13345

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ##.##" or ##.#####°)

HORIZONTAL DATUM: |__| NAD 1927 |__| NAD 1983

SOURCE: |__| GPS (Type): ____ |__| USGS Quad Map |__| Other ____

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER | B2. COUNTY NAME | B3. STATE |
|---|---|---|
| CITY OF ROSEBURG 410067 | DOUGLAS | OR. |

| 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) |
|---|---|---|---|---|---|
| 410067 0005 | E | 4-21-99 | 5-12-2003 | AE | 433.0 |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
|__| FIS Profile |X| FIRM |__| Community Determined |__| Other (Describe): ____

B11. Indicate the elevation datum used for the BFE in B9: |X| 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 |X| No
Designation Date: ____

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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

C2. Building Diagram Number 8 (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 NGVD 1929 Conversion/Comments N/A
Elevation reference mark used Σ MON DOMENICO / PER PLAT Does the elevation reference mark used appear on the FIRM? |__| Yes |X| No

- ☐ a) Top of bottom floor (including basement or enclosure) 433.8 ft.(m)
- ☐ b) Top of next higher floor 436.9 ft.(m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- ☐ d) Attached garage (top of slab) 434.2 ft.(m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) 435.2 ft.(m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 433.8 ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 435.2 ft.(m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 14
- ☐ i) Total area of all permanent openings (flood vents) in C3.h 630 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

REGISTERED PROFESSIONAL LAND SURVEYOR
[signature]
OREGON
JANUARY 11, 1988
F. NEIL HIBBS
52989
Expires 6/30/2005

## 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 F. NEIL HIBBS LICENSE NUMBER 52989

TITLE LICENSED SURVEYOR COMPANY NAME NEIL HIBBS LAND SURVEYING

ADDRESS 4739 LOOKINGGLASS RD. CITY ROSEBURG STATE OR. ZIP CODE 97470

SIGNATURE [signature] DATE 2-23-2005 TELEPHONE (541) 957-9303

| 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. 1345 NW ALMIRA | Policy Number |
| CITY ROSEBURG STATE OR. ZIP CODE 97470 | 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 LOW GROUND IS 0.8 FT. ABOVE 100 YR. FLOOD ELEV.
C3e - HEAT PUMP COMPRESSOR

|__| 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 _____ (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 |__|__| ft. (m) |__|__| 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 | 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.

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 |
|---|---|---|
| | | |

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