



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 - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME: JIM REMLEY
 BUILDING STREET ADDRESS (Including Apt., Unit, Suite (and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.): 1924 SE DOUGLAS AVE.
 CITY: ROSEBURG STATE: OR ZIP CODE: 97470
 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): T275, ROSW SEC 19A4, TAX LOT 4700 TAX ACCOUNT NO.: R 40460
 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL
 LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ##.####): 43°-12'-39" N, 123°-19'-43" W HORIZONTAL DATUM: NAD 1927 NAD 1983
 SOURCE: GPS (Type): MAG. MAP 730 USGS Quad Map Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

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

B4. MAP AND PANEL NUMBER <u>410067005</u>	B5. SUFFIX <u>E</u>	B6. FIRM INDEX DATE <u>4-21-99</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>4-21-99</u>	B8. FLOOD ZONE(S) <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>454.9</u>
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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. *PRE CONSTRUCTION - NO PLANS A.

* C2. Building Diagram Number N/A (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 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 NGVD 1929 Conversion/Comments ELEV. BM 56.1 IS 469.35'
 Elevation reference mark used 56-1 Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>NA</u>	ft(m)
<input type="checkbox"/> b) Top of next higher floor	<u>NA</u>	ft(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>NA</u>	ft(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>NA</u>	ft(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>NA</u>	ft(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG) <u>ground level</u>	<u>456</u>	<u>5</u> ft(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG) <u>ground level</u>	<u>459</u>	<u>3</u> ft(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>NA</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>NA</u>	sq. in. (sq. cm)

REGISTERED PROFESSIONAL LAND SURVEYOR

David J. Beedle

OREGON
JAN. 21, 1997
DAVID J. BEEDLE
#2795
EXPIRES 12-31-02

License Number, Embossed Seal, Signature, and Date

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: DAVID J. BEEDLE LICENSE NUMBER: LS 2798
 TITLE: SURVEYOR COMPANY NAME: BEEDLE LAND SURVEYING
 ADDRESS: 163 TRAYLOR ROAD CITY: RIDDLE STATE: OR ZIP CODE: 97469
 SIGNATURE: David J. Beedle DATE: 1-14-02 TELEPHONE: 541-874-3250

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. 1924 SE DOUGLAS AVE.			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 *THIS CERTIFICATION IS FOR ELEVATIONS OF AN EMPTY LOT FOR FUTURE CONSTRUCTION. ALL OF THE GROUND AREA CONSIDERED FOR A BUILDING SITE CONSTRUCTION IS ABOVE THE 100 YEAR FLOOD ELEV. OF 454.9. THE L.A.G. ALONG THE HIGH BANK OF DEER CREEK IS 456.5

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 E4. 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.
- 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.
- E4. 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 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

FLOODPLAIN BUILDING SITE DIAGRAM

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

WORK SHEET NO. _____

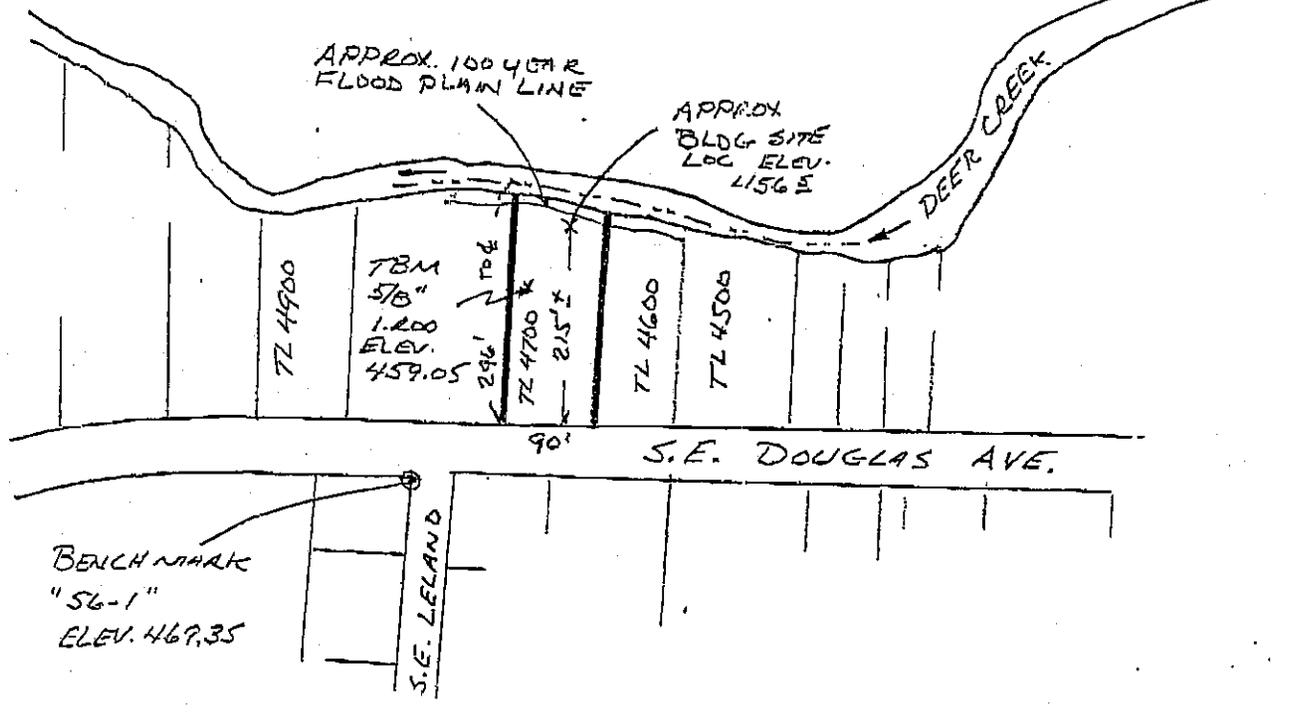
AX ACCT. NO. R40460 TAX LOT NO. 4700 SEC. 19 SUB SEC. AA TOWNSHIP 27S RANGE 5W

DIRECTIONS TO AND DESCRIPTION OF SITE: ALONG S.E. DOUGLAS AVE TO 1924 SE DOUGLAS AVE
VACANT LOT BEHIND IS THE BUILDING SITE.



SCALE
1" = 200'

- 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 56-1 ELEVATION 469.35 LOCATION SEE ABOVE 100 YEAR FLOOD ELEVATION 454.9
 (NOTE: Elevation datum MSL) TBM ELEVATION 459.05 TBM LOCATION SEE ABOVE TBM DESCRIPTION 5/8" x 30" ROD
 [FEDERAL 100 YEAR YES] [FEDERAL FLOODWAY - YES NO] [MEAN FLOODWAY VELOCITY N/A]
 EXTREME HAZARD HIGH HAZARD **LOW HAZARD** BUILDING SITE ELEVATION 456.5
 FLOODWAY MAP CITY ORTHO PHOTO - MINIMUM REQUIRED FLOOR HEIGHT ABOVE GROUND 455.9

THE SELECTED SITE IS ON THE BORDER OF THE 100 YEAR FLOOD PLAIN OVERLAY.

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.

DATE _____ SIGNATURE _____

(REVISED 10/99)