



FEDERAL 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

BUILDING OWNER'S NAME: Dr. David Sutton, D.D.S.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 1729 W. Harvard Avenue

CITY: Roseburg STATE: OR ZIP CODE: 97470

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): TL 2200 TAX ACCOUNT NO.: 9197.13

BUILDING USE (e.g., Residential, Non-Residential, Addition, Accessory, etc. Use Comments section if necessary.):

LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.##" or ##.####°): HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: Roseburg 410067 B2. COUNTY NAME: Douglas B3. STATE: OR

B4. MAP AND PANEL NUMBER: 0005	B5. SUFFIX: E	B6. FIRM INDEX DATE: 06-07-1974	B7. FIRM PANEL EFFECTIVE/REVISED DATE: 04-21-1999	B8. FLOOD ZONE(S): AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): 438
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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.

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.)
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 _____ 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 _____ ft.(m)

f) Lowest adjacent grade (LAG) _____ ft.(m)

g) Highest adjacent 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 C3h _____ sq. in. (sq. cm)

REGISTERED PROFESSIONAL LAND SURVEYOR

Herman A. Pieske

OREGON
JULY 14, 1978
HERMAN A. PIESKE
1651

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: Herman A. Pieske LICENSE NUMBER: _____

TITLE: PLS COMPANY NAME: AA Surveying & Engineering, Inc.

ADDRESS: 3076 NE Diamond Lake Blvd. CITY: Roseburg STATE: OR ZIP CODE: 97470

SIGNATURE: _____ DATE: _____ TELEPHONE: 541-672-2096

FLOODPLAIN BUILDING SITE DIAGRAM

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

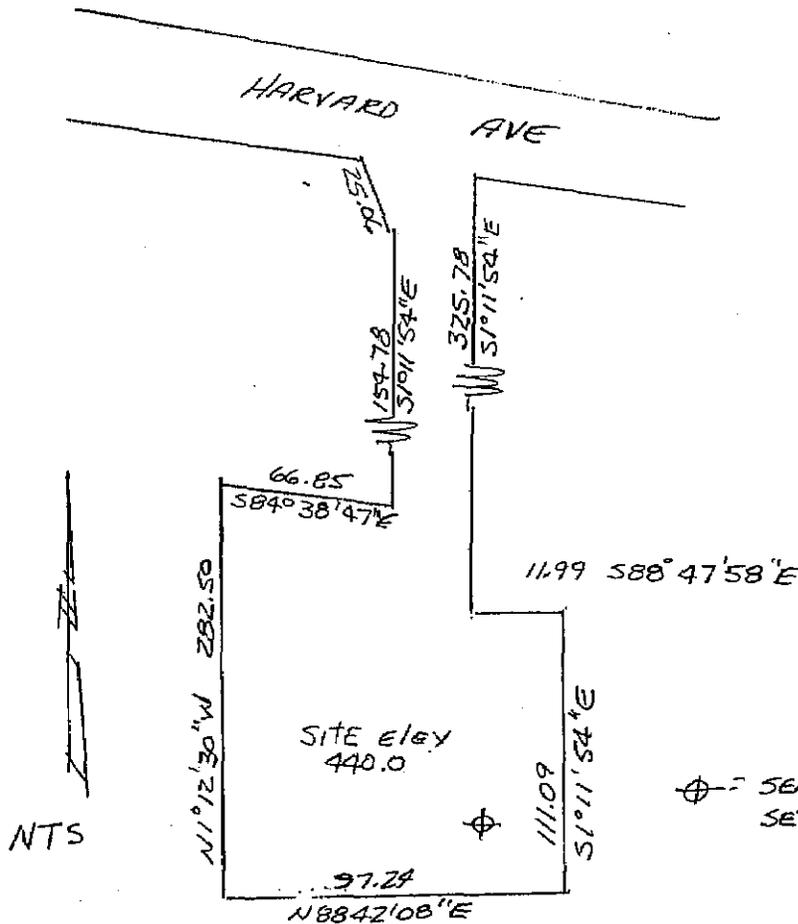
WORK SHEET NO. _____

TAX ACCT. NO. _____ TAX LOT NO. 2200 SEC. 23 SUB SEC. AA TOWNSHIP 27S RANGE 6W

DIRECTIONS TO AND DESCRIPTION OF SITE: + 400' from Harvard Ave. & 200' E. of Keady Ct.

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 RM₃ ELEVATION 439.74 LOCATION _____ 100 YEAR FLOOD ELEVATION 438.00
 (NOTE: Elevation datum MSL) TBM ELEVATION 441.0 TBM LOCATION On Site TBM DESCRIPTION Set in Service Pole
 [FEDERAL 100 YEAR - YES NO] [FEDERAL FLOODWAY - YES NO] [MEAN FLOODWAY VELOCITY N/A]
 EXTREME HAZARD HIGH HAZARD **LOW HAZARD** BUILDING SITE ELEVATION 440.0
 FLOODWAY MAP X ORTHO PHOTO _____ MINIMUM REQUIRED FLOOR HEIGHT ABOVE GROUND 0

PART TWO POST-CONSTRUCTION

The building at the property location described above has the lowest floor (including basement) at an elevation of 441.87 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 4-11-01 SIGNATURE [Signature] PLS 1651

(REVISED 10/99)

FLOODPLAIN BUILDING SITE DIAGRAM

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

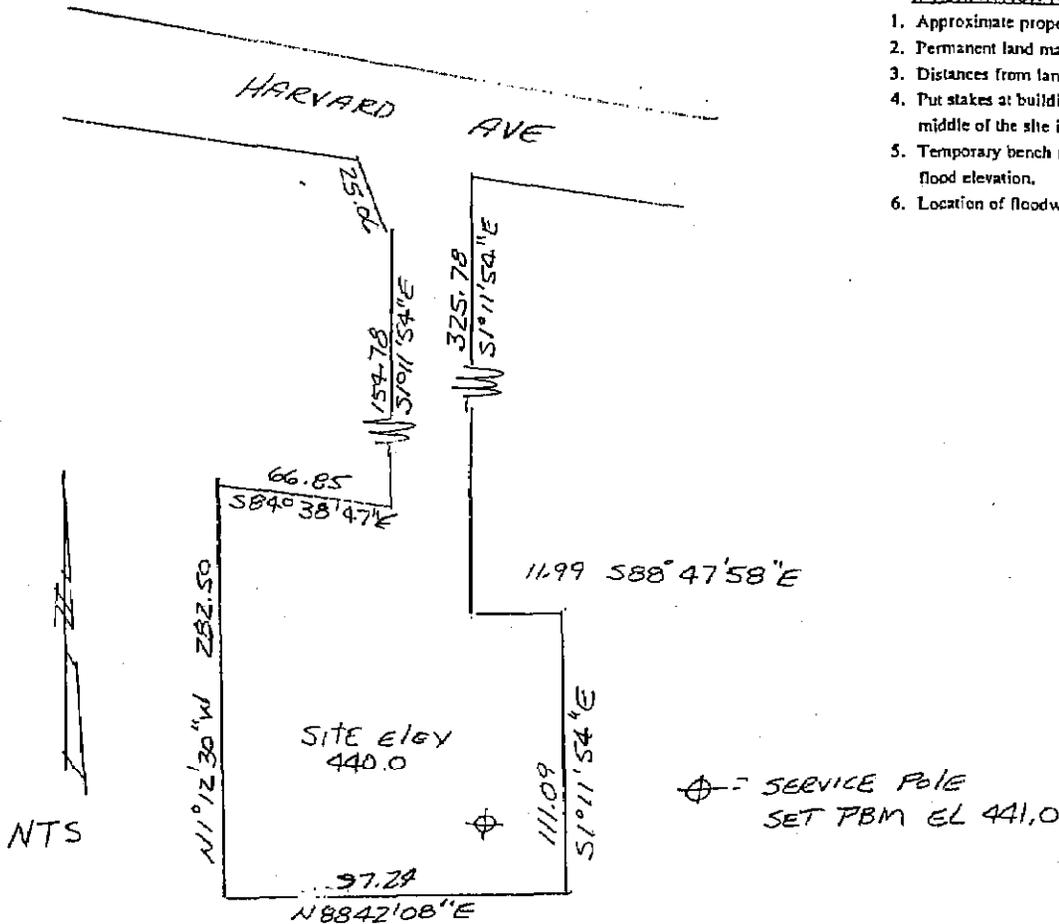
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(REVISED 10/99)

FEDERAL EMERGENCY MANAGEMENT AGENCY
COMMUNITY ACKNOWLEDGMENT
OF REQUESTS INVOLVING FILL

O.M.B. Burden No. 3067-0147
Expires May 31, 2001

PUBLIC BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average .88 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, S.W., Washington, DC 20472; and to the Office of Management and Budget, Paperwork Reduction Project (3067-0148), Washington, DC 20503.

You are not required to respond to this collection of information unless a valid OMB Control Number is displayed in the upper right corner of this form.

Community Name: Roseburg 410067

Property Name or Address: 1729 W. Harvard Ave, Roseburg, OR

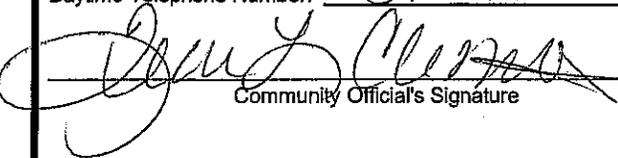
We hereby acknowledge receipt and review of this Letter of Map Revision (Based on Fill) request and have found that the completed or proposed project meets or is designed to meet all of the community's applicable floodplain management regulations, including the requirement that no fill be placed in the regulatory floodway. We understand that this request is being forwarded to FEMA for a possible map revision. For proposed projects, we understand that FEMA is being asked to provide comments on the potential effects of this project on the flood hazards of our community.

Community comments on the proposed project:

Community Official's Name (please print or type): TERESA L. CLEMONS

Address (please print or type): CITY OF ROSEBURG 900 SE DAUGLAS AVE.
ROSEBURG, OR 97470

Daytime Telephone Number: 541-440-1177


Community Official's Signature

4-11-2002
Date

PLEASE REFER TO THE INSTRUCTIONS FOR THE APPROPRIATE MAILING ADDRESS