# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

# ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSUR	RANCE COMPANY USE	
A1. Building Owner's Name  W L MOORE CONSTRUCTION  Policy Number:						per:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Comparation SAND POINTE DRIVE						Company N	AIC Number:
City CENTRAL POI		State Oregon				ZIP Code 97502	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 372W03BB-3612; THE NORTH VILLAGE AT TWIN CREEKS, PHASE V							
A4. Building Use (	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longit	ude: Lat. 42	2.387157 N	Long. 12	22.932361 W	Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain floor	d insurance.	
A7. Building Diagra	m Number	9					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foot	age of crawl	space or enclosure(s)		1	244 sq ft		
b) Number of p	ermanent flo	ood openings in the cra	awlspace	or enclosure	e(s) within 1.0 foot	above adjacent gra	de 11
c) Total net are	ea of flood op	penings in A8.b	1	463 sq in			·
d) Engineered	flood openin	ngs? 🗌 Yes 🗵 N	lo				
A9. For a building with an attached garage:							
a) Square footage of attached garage522_sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A9.b 0 sq in							
d) Engineered flood openings?							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
							B3. State
CITY OF CENTRAL	-	-		JACKSON			Oregon
B4, Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	l levation(s) e Base Flood Depth)
41029C1768	F	01-19-2018	09-14-2	vised Date 2016	AE	1238.5	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes  No							
Designation Date: CBRS DPA							

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			FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, ar No. 401 SAND POINTE DRIVE	Policy Number:					
City CENTRAL POINT	State ZIP 0 Oregon 9750	Code 02	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: Constr	uction Drawings*	ding Under Constru	ction*			
*A new Elevation Certificate will be required who	en construction of the buildir	ng is complete.				
C2. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: P-549 Vertical Datum: NAVD 1988						
Indicate elevation datum used for the elevations		v.				
☐ NGVD 1929 ☑ NAVD 1988 ☐ Oth  Datum used for building elevations must be the		SE	<del></del>			
Datum used for building elevations must be the	same as that used for the D		Check the measurement used.			
<ul> <li>a) Top of bottom floor (including basement, cra</li> </ul>	wispace, or enclosure floor)		237.6 🛛 feet 🗌 meters			
b) Top of the next higher floor		1	240.4 X feet  meters			
c) Bottom of the lowest horizontal structural me	mber (V Zones only)	·	N/A ✓ feet ☐ meters			
d) Attached garage (top of slab)			240.1 🔀 feet 🗌 meters			
<ul> <li>e) Lowest elevation of machinery or equipment (Describe type of equipment and location in</li> </ul>	servicing the building Comments)	1	240.1 🔀 feet 🗌 meters			
f) Lowest adjacent (finished) grade next to buil	ding (LAG)	1:	239.6 🗵 feet 🗌 meters			
g) Highest adjacent (finished) grade next to bui	lding (HAG)	1	239.7 X feet  meters			
<ul> <li>h) Lowest adjacent grade at lowest elevation of structural support</li> </ul>	f deck or stairs, including	1.	240.3 🔀 feet 🗌 meters			
SECTION D - SURVEY	OR, ENGINEER, OR ARC	HITECT CERTIFI	CATION			
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 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.						
Were latitude and longitude in Section A provided by	a licensed land surveyor?	⊠Yes □No	Check here if attachments.			
Certifier's Name FRED A FRANTZ	License Number 50077		REGISTERED			
Title			PROFESSIONAL			
SURVEYOR			LAND SURVEYOR			
Company Name		,	TAMA TO			
TERRASURVEY INC			OREGON JULY 12, 2005			
Address 274 FOURTH STREET			FRED A. FRANTZ No. 50077			
City ASHLAND	State Oregon	ZIP Code 97520	Renewal 12-31-21			
Signature Zud A 7-	Date 06-04-2020	Telephone (541) 482-6474	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location C2e IS A HEAT PUMP	, per C2(e), if applicable)					

# **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY U						
Building Street Address (including Apt., Unit, Suite, and No. 401 SAND POINTE DRIVE			Policy Number:			
		Code 502	Company NAIC Number			
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATION AO AND ZONE A (WI	ON (SURVEY NOT THOUT BFE)	REQUIRED)			
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
<ul><li>E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).</li><li>a) Top of bottom floor (including basement,</li></ul>						
crawlspace, or enclosure) is  b) Top of bottom floor (including basement, crawlspace, or enclosure) is	<del>21-12-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1</del>	☐ feet ☐ meter				
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in	enings provided in Secti					
the diagrams) of the building is		☐ feet ☐ meter				
E3. Attached garage (top of slab) is  E4. Top of platform of machinery and/or equipment		feet meter	s  above or below the HAG.			
servicing the building is	is the ten of the house	feet meter				
	No Unknown. Th	e local official must o	certify this information in Section G.			
SECTION F - PROPERTY OWN	ER (OR OWNER'S REF	PRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	ns A, B, and E for Zo s A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's	Name					
Address	City		ate ZIP Code			
Signature	Date	Тє	elephone			
Comments						
			Check here if attachments.			

# **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					ANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box					per:		
No. 401 SAND POINTE DRIVE							
City CENTRAL POINT	State Oregon	ZIP Code 97502		Company N	AIC Number		
		TY INFORMATION (OPT	IONAL				
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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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. K. The following information (Items G4–	G10) is provided for	or community floodplain m	nanageme	ent purposes.			
G4. Permit Number	G5. Date Permit	Issued		ate Certifica			
175-19-000434-DWL	11/25/20	019		B.D.	ccupancy Issued		
G7. This permit has been issued for:	New Construction	n 🗍 Substantial Improve	ement				
G8. Elevation of as-built lowest floor (including of the building:	g basement)	1240.4	<b>X</b> feet	meters	Datum NAVD 88		
G9. BFE or (in Zone AO) depth of flooding at	the building site:	1238.5	[A] feet	meters	Datum NAVD 88		
G10. Community's design flood elevation:		1239.5	(A) feet	meters	Datum NAVD 88		
Local Official's Name		Title					
Justin Gindlesperger, CFM		Community Planner II					
Community Name City of Central Point		Telephone 541.664.3321	l, ext 2	45			
Signature	>	Date					
06/08/2020							
Comments (including type of equipment and lo	cation, per C2(e), i	if applicable)					
The structure complies with the r	requirements	in CPMC 8.24 - Flo	ood Da	mage Pre	vention.		
1							
				☐ CI	neck here if attachments.		

### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City CENTRAL POINT	State Oregon	ZIP Code 97502	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

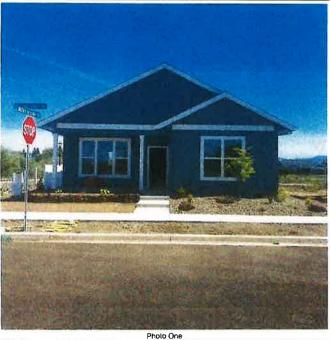


Photo One Caption FRONT 06/03/2020 Clear Photo Qne



Photo Two

Photo Two Caption BACK 09/03/2020 Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

**Continuation Page** 

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IMPORTANT: In these spaces, copy ti	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 401 SAND POINTE DRIVE	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City CENTRAL POINT	State Oregon	ZIP Code 97502	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption LEFT SIDE 03/03/2020

**Glear Photo Three** 



Photo Four Caption RIGHT SIDE 06/03/2020

Clear Photo Four