#### 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						RANCE COMPANY USE	
A1. Building Owner's Name					Policy Num	ber:	
Stephen Godshall							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  1609 River Run Street					Company N	AIC Number:	
City							
					97502		
	on (Lot and Block Numbers, Ta ge at Twincreeks, Phase V; 3			gal Description, et	c.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) residential							
A5. Latitude/Longitude:	Lat. 42.386169	Long	122.933984	Horizonta	l Datum: 🔲 NAD 1	927 × NAD 1983	
A6. Attach at least 2 ph	notographs of the building if th	e Certific	cate is being u	sed to obtain floo	d insurance.		
A7. Building Diagram N	umber 9						
A8. For a building with a	a crawlspace or enclosure(s):						
a) Square footage	of crawlspace or enclosure(s)	)	2	2224 sq ft			
b) Number of perma	anent flood openings in the cr	awlspac	e or enclosure	 e(s) within 1.0 foot	above adjacent gra	ade 18	
c) Total net area of	flood openings in A8.b	2	2224 sq ir	1		-	
d) Engineered flood	d openings? Yes 🗵	No					
A9. For a building with a	in attached garage:						
a) Square footage of			677 sq ft				
_	-	tached c	arage within	1.0 foot above adi	acent grade 0		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade   c) Total net area of flood openings in A9.b  0 sq in							
	-	No.					
d) Engineered flood openings? ☐ Yes ☒ No							
	SECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION		
B1. NFIP Community Name & Community Number			B2. County			B3. State	
City of Central Point Jackson Oregon					Oregon		
B4. Map/Panel B5. Number	Suffix B6. FIRM Index Date	Eff	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)	
41029C1768 F	01-19-2018	09-14-2		AE	1238.6		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
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	OPA			,	

OMB No. 1660-0008 Expiration Date: November 30, 2022 **ELEVATION CERTIFICATE** IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, 1609 River Run Street	Policy Number:					
City Central Point	State Oregon	ZIP Code 97502	Company NAIC Number			
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. 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 in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source:  Datum used for building elevations must be the same as that used for the BFE.  Check the measurement used.  a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  1239.6  X feet  meters  h) Top of the next higher floor						
c) Bottom of the lowest horizontal stru	ctural member (V Zones only	/) >	N/A X feet meters			
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or end (Describe type of equipment and long)</li> <li>f) Lowest adjacent (finished) grade not good (finished)</li> <li>h) Lowest adjacent grade at lowest elevatructural support</li> </ul>	cation in Comments) ext to building (LAG) ext to building (HAG)		1241.1       ⋈ feet       meters         1242.2       ⋈ feet       meters         1240.9       ⋈ feet       meters         1241.2       ⋈ feet       meters         1241.7       ⋈ feet       meters			
	SURVEYOR, ENGINEER, (	OR ARCHITECT CERTI	IFICATION			
This certification is to be signed and sealed I certify that the information on this Certifica statement may be punishable by fine or imp.  Were latitude and longitude in Section A pro- Certifier's Name Fred A Frantz  Title	by a land surveyor, enginee te represents my best efforts prisonment under 18 U.S. Co	r, or architect authorized s to interpret the data ava de, Section 1001.  rveyor? XYes No	by law to certify elevation information. illable. I understand that any false			
Surveyor			LAND SURVEYOR			
Company Name Terrasurvey Inc Address 274 4th Street			JULY 12, 2005 FRED A. FRANTZ No. 50077			
City Ashland	State Oregon	ZIP Code 97520	Renewal 12-31-21			
Signature Zul A Zul	Date 03-23-2021	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, per C2(e), if applicable) C2e Heat pump						

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/ 1609 River Run Street	or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:			
I		Code	Company NAIC Number			
	regon 9750		DEOLUBED)			
SECTION E – BUILDING ELE FOR ZONE	AO AND ZONE A (WIT	HOUT 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		feet meter	rs 🗌 above or 📋 below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter	rs 🔲 above or 🔲 below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Section	on A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the next higher floor (elevation C2.b in the diagrams) of the building is		feet meter	rs  above or below the HAG.			
E3. Attached garage (top of slab) is	·	feet meter	rs 🔲 above or 🗌 below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		feet meter	rs 🔲 above or 🗌 below the HAG.			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.			
SECTION F – PROPERTY OWN	ER (OR OWNER'S REPI	RESENTATIVE) CI	ERTIFICATION			
The property owner or owner's authorized representative	e who completes Sections	s A, B, and E for Zo	one A (without a FEMA-issued or			
community-issued BFE) or Zone AO must sign here. The		A, B, and E are cor	rect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's	Name					
Address	City	St	ate ZIP Code			
Signature	Date	Te	elephone			
Comments						
			Check here if attachments.			

# **ELEVATION CERTIFICATE**

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

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 No. 1609 River Run Street			No.	Policy Numb	per:	
City Central Point	State Oregon	ZIP Code 97502		Company N	AIC Number	
SECTIO	N G - COMMUNITY	INFORMATION (OPTION	ONAL)			
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 Secti or Zone AO.	on E for a building loc	ated in Zone A (without	a FEMA	A-issued or co	ommunity-issued BFE)	
G3. X The following information (Items G4-	G10) is provided for c	community floodplain ma	anageme	ent purposes.		
G4. Permit Number	G5. Date Permit Iss	sued		Date Certificate of Compliance/Occupancy Issued		
175-20-000284-DWL	08/24/2020			T.B.D.		
G7. This permit has been issued for:	New Construction	Substantial Improven	nent			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	1242.3	X feet	meters	Datum NAVD 88	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	1238.6	X feet	meters	Datum NAVD 88	
G10. Community's design flood elevation:	-	1239.6	X feet	meters	Datum NAVD 88	
Local Official's Name		Title				
Justin Gindlesperger, CFM		Community Plan	nner II			
Community Name		Telephone				
City of Central Point		541.664.3321 e	xt 245			
Signature		Date				
South CCC.		03/25/2021				
Comments (including type of equipment and loc	cation, per C2(e), if ap	plicable)				
The structure complies with CPMC 8.24 - Flood Damage Prevention requirements.						
Check here if attachments.						

#### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
Central Point	Oregon	97502	

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

Photo One Caption FRONT 03-23-2021

Clear Photo One



Photo Two

Photo Two Caption BACK 03-23-2021

Clear Photo Two

## **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1609 River Run Street			Policy Number:
City	State	ZIP Code	Company NAIC Number
Central Point	Oregon	97502	

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 RIGHT SIDE 03-23-2021

Clear Photo Three



Photo Four

Photo Four Caption LEFT SIDE 03-23-2021

Clear Photo Four