U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

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

ELEVATION CERTIFICATEImportant: 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	ANCE COMPANY USE	
A1. Building Owner's Name VISION HOMES INC					Policy Numb	er:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.1734 RIVER RUN STREET						Company NA	AIC Number:
City CENTRAL POI	NT	State Oregon					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 112 THE NORTH VILLAGE AT TWIN CREEKS, PHASE V; ASSESSOR'S MAP NO 372W03BB-3609							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longit	ude: Lat. 42	.387136	Long1	22.933461	Horizontal I	Datum: NAD 19	927 🔀 NAD 1983
A6. Attach at least	2 photograpi	ns of the building if the	Certifica	ate is being us	sed to obtain flood	insurance.	
A7. Building Diagra	m Number	9					3
A8. For a building v	vith a crawls	pace or enclosure(s):					
a) Square foot	age of crawls	space or enclosure(s)		2	023 sq ft		
b) Number of p	ermanent flo	od openings in the cra	awlspace	e or enclosure	(s) within 1.0 foot a	above adjacent gra	de <u>58</u>
c) Total net are	ea of flood or	enings in A8.b	2	233 sq in			
d) Engineered	flood openin	gs? 🗌 Yes 🗵 N	lo				
A9. For a building w	vith an attach	ed garage:					
a) Square footage of attached garagesq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
·	,						
a) Engineered	d) Engineered flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number CITY OF CENTRAL POINT 410092				B2. County JACKSON	Name	B3. State Oregon	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
41029C1768	F	01-19-2018	09-14-2		AE	1238.4	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile 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 I				☐ OPA			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, \$ 1734 RIVER RUN STREET	Policy Number:		
City CENTRAL POINT	State ZIP C Oregon 9750		Company NAIC Number
SECTION C - BU	ILDING ELEVATION INFORMATI	ON (SURVEY RE	QUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be requ C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below accordin Benchmark Utilized: P-549 Indicate elevation datum used for the ele NGVD 1929 NAVD 1988 Datum used for building elevations must a) Top of bottom floor (including basem b) Top of the next higher floor c) Bottom of the lowest horizontal struct d) Attached garage (top of slab) e) Lowest elevation of machinery or eq (Describe type of equipment and loc f) Lowest adjacent (finished) grade ne	Construction Drawings*	ing Under Construction of the Construction of	ction*
 g) Highest adjacent (finished) grade ne h) Lowest adjacent grade at lowest ele 			
structural support			240.2 A feet meters
This certification is to be signed and sealed I certify that the information on this Certificat statement may be punishable by fine or imp Were latitude and longitude in Section A pro	te represents my best efforts to inter- risonment under 18 U.S. Code, Sectionided by a licensed land surveyor?	nitect authorized by oret the data availation 1001.	law to certify elevation information.
Certifier's Name FRED A FRANTZ Title SURVEOR Company Name TERRASURVEY INC Address 274 4TH STREET City ASHLAND Signature Copy all pages of this Elevation Certificate and Comments (including type of equipment and C2e lowest equipment is a heat pump		ZIP Code 97502 Telephone (541) 482-6474 ficial, (2) insurance	REGISTERED PROFESSIONAL LAND SURVEYOR OREGON JULY 12, 2005 FRED A. FRANTZ No. 50077 Renewal 12-31-21 Ext. agent/company, and (3) building owner.

ELEVATION CERTIFICATE

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

MPORTANT: In these spaces, copy the corresponding	ng information from Sec	tion A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/ 1734 RIVER RUN STREET	or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:			
•	tate ZIP regon 9750	Code 02	Company NAIC Number			
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATIO AO AND ZONE A (WIT		REQUIRED)			
For Zones AO and A (without BFE), complete Items E1-complete Sections A, B,and C. For Items E1–E4, use na enter meters.	-E5. If the Certificate is in tural grade, if available. (tended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,			
E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement,	check the appropriate box djacent grade (LAG).	es to show whethe	r the elevation is above or below			
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		☐ feet ☐ meter				
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in	penings provided in Section	on A Items 8 and/or				
the diagrams) of the building is E3. Attached garage (top of slab) is		☐ feet ☐ meter				
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter				
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bottom No Unknown. The	floor elevated in ac				
SECTION F - PROPERTY OWN	IER (OR OWNER'S REP	RESENTATIVE) C	ERTIFICATION			
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. The statements in Sections A, B, and E are correct to the best of my knowledge.						
Property Owner or Owner's Authorized Representative's Name						
Address	City	S	tate ZIP Code			
Signature	Date	To	elephone			
Comments						
			Check here if attachments.			

ELEVATION CERTIFICATE

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

IMPORTANT. II. 4E.					210. 110.00		
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Su 1734 RIVER RUN STREET	o.) or P.O. Route and Box	No.	Policy Numl	oer:			
City	State	ZIP Code		Company N	AIC Number		
CENTRAL POINT	Oregon	97502					
SECTIO	N G - COMMUNIT	TY INFORMATION (OPTIC	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 Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.							
G3. X The following information (Items G4–G10) is provided for community floodplain management purposes.							
G4. Permit Number	G5. Date Permit	Issued		ate Certificat	te of occupancy Issued		
175-20-000603-DWL	02/18/202	?1		T.B.D.	, ,		
G7. This permit has been issued for:] New Construction	n 🗌 Substantial Improven	nent				
G8. Elevation of as-built lowest floor (including of the building:	basement)	1240.9	X feet	meters	Datum NAVD 88		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	1238.4	X feet	meters	Datum NAVD 88		
G10. Community's design flood elevation:		1239.4		meters	Datum NAVD 88		
Local Official's Name		Title					
Justin Gindlesperger, CFM		Community Planner II					
Community Name	Telephone						
City of Central Point		541.664.3321, x 245					
Signature	Date						
11/16		09/29/2021					
Comments (including type of equipment and loc	cation, per C2(e), if	f applicable)					
The structure complies with the requirements of CPMC 8.24 - Flood Damage Prevention.							
, the state of the							
☐ Check here if attachments.							

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt. 1734 RIVER RUN STREET	, Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
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 09-24-2021

Clear Photo One



Photo Two

Photo Two Caption Right side 09-24-2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Api 1734 RIVER RUN STREET	t., 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 Back 09-24-2021

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

Clear Photo Four