# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

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 INFORMAT	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name	Policy Number:					
Twin Creeks Development Co., LLC						
A2. Building Street Address (including Apt., Unit, Suite, and/or Blo Box No.	g. No.) or P.O. Route and Company NAIC Number:					
1602 River Run Street						
	State ZIP Code Oregon 97502					
A3. Property Description (Lot and Block Numbers, Tax Parcel Nu						
Lot 96, The North Village at Twin Creeks, Phase V; 372W3BB-362						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Acc	essory, etc.) Residential					
A5. Latitude/Longitude: Lat. <u>42.386173</u> Long. <u>-122.9</u>	33396 Horizontal Datum: ☐ NAD 1927 ☑ NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate	s being used to obtain flood insurance.					
A7. Building Diagram Number9						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s)	1715 sq ft					
b) Number of permanent flood openings in the crawlspace or	enclosure(s) within 1.0 foot above adjacent grade 17					
c) Total net area of flood openings in A8.b2261	sq in					
d) Engineered flood openings?   Yes   No						
A9. For a building with an attached garage:						
a) Square footage of attached garage 494 sq ft						
b) Number of permanent flood openings in the attached garas	e 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? Yes 🔀 No						
-, -ng						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
	County Name B3. State					
City of Central Point 410092 Jackson Oregon						
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F	e/ Zone(s) (Zone AO, use Base Flood Depth)					
Revise 41029C1768 F 01-19-2018 09-14-2016	The state of the s					
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
FIS Profile						
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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IMPO	RTANT: In these spaces, copy the corresponding i	FOR INSURANCE COMPANY USE					
				Policy Number:			
City State ZIP Code Co		Company NAIC Number					
Central Point Oregon		on 9750	2				
	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1.	C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction						
	*A new Elevation Certificate will be required when cor						
C2.	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 ite	ms a) through h) below	٧.				
	☐ NGVD 1929  ☐ NAVD 1988  ☐ Other/So						
	Datum used for building elevations must be the same	as that used for the B	FE.	Check the measurement used.			
	a) Top of bottom floor (including basement, crawlspa	ce, or enclosure floor)	1	239.9 🔀 feet 🗌 meters			
	b) Top of the next higher floor			242.8 🔀 feet 🗌 meters			
	c) Bottom of the lowest horizontal structural member	(V Zones only)	_	N/A			
	d) Attached garage (top of slab)	(V Zorios oriiy)	1	241.6 🛭 feet 🗌 meters			
	Lowest elevation of machinery or equipment servi     (Describe type of equipment and location in Comm	cing the building	1	241.7 🔀 feet 🗌 meters			
	f) Lowest adjacent (finished) grade next to building (		1	241.2 🔀 feet 🗌 meters			
			1	241.4 🔀 feet 🗌 meters			
	h) Lowest adjacent grade at lowest elevation of deck			241.6			
	structural support						
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 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?							
	ifier's Name	License Number					
	p J Drossos	90718		REGISTERED			
Title				PROFESSIONAL LAND SURVEYOR			
Sur	/eyor			LAND SORVETOR			
10.300000000000000000000000000000000000	npany Name			130			
	asurvey Inc.			OREGON JULY 12, 2016			
TOTAL ACTION	ress 4th Street			PHILIP J. DROSSOS No. 90718			
City Ash	land	State Oregon	ZIP Code 97502	Renewal12-31-23_			
Sigi	nature	Date 07-15-2022	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.							
	nments (including type of equipment and location, per Lowest equipment is a heat pump	C2(e), if applicable)					

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IMPORTANT: In these spaces, copy the correspondir	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/ 1602 River Run Street	Policy Number:					
		Code 502	Company NAIC Number			
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
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,	***************************************	feet meter	s above or below the HAG.			
crawlspace, or enclosure) is		feet meter				
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Sect	feet  meter				
E3. Attached garage (top of slab) is		☐ feet ☐ meter	s 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	, is the top of the botton No ☐ Unknown. Th	n floor elevated in ac ne local official must	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWN	ER (OR OWNER'S RE	PRESENTATIVE) CE	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		ate ZIP Code			
Signature	Date	Te	elephone			
Comments						
			Check here if attachments.			

## **ELEVATION CERTIFICATE**

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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. 1602 River Run Street					per:	
City Central Point	ZIP Code 97502	(	Company NA	AIC Number		
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. 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 Zone AO.	on E for a building lo	ocated in Zone A (without	t a FEMA-i	ssued or co	ommunity-issued BFE)	
G3. X The following information (Items G4–	G10) is provided for	community floodplain ma	anagemen	t purposes.		
G4. Permit Number	G5. Date Permit Is	ssued		te Certificate mpliance/O	e of ccupancy Issued	
175-22-000068-DWL	02/17/2022	2	T.	B.D.		
G7. This permit has been issued for:	New Construction	☐ Substantial Improver	ment			
G8. Elevation of as-built lowest floor (including of the building:	g basement) —	1242.8	x feet [	meters	Datum NAVD 88	
G9. BFE or (in Zone AO) depth of flooding at	the building site:	1238.7	x feet [	meters	Datum NAVD 88	
G10. Community's design flood elevation:		1239.7	k 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, x	245			
Signature Questin P Kindle	Date					
Signature Justin P Gindlesperger		07/20/2022				
Comments (including type of equipment and lo			ge Prever	ntion.		
				☐ Ch	eck here if attachments.	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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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-RIGHT SIDE 07-15-2022

Clear Photo One



Photo Two

Photo Two Caption BACK 07-15-2022

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

**Continuation Page** 

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IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 1602 River Run Street	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 07-15-2022

Clear Photo Three

Photo Four

Photo Four Caption

Clear Photo Four