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 INSUF	RANCE COMPANY USE	
A1. Building Owner's Name Twin Creeks Development Co LLC Policy Number:								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 426 Castle Rock Drive Company NAIC Number:							AIC Number:	
City State ZIP Code Central Point Oregon 97502								
1 ' '		nd Block Numbers, Ta 22; Assessor's Map N			gal Descri _l	otion, etc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Re	esidential		
A5. Latitude/Longit	tude: Lat. 4	2.386326	Long1	22.933107	Н	orizontal Datu	m:	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to ob	tain flood insu	rance.	
A7. Building Diagra	am Number	9						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of crawl	space or enclosure(s))	1	1174 s	q ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within	1.0 foot above	e adjacent gra	ide 9
c) Total net are	ea of flood o	penings in A8.b	1	197 sq ir	1			
d) Engineered	flood openir	ngs?	No					
A9. For a building v	vith an attach	ned garage:						
a) Square foot	a) Square footage of attached garage 524 sq ft							
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net are	c) Total net area of flood openings in A9.b 0 sq in							
d) Engineered	flood openin	ags? □Yes ☒ N	No.	·				
	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 Name Jackson B3. State Oregon								
B4. Map/Panel Number B5. Suffix Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)								
410291768 F 01-16-2018 09-14-2016 AE 1238.7								
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: 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 OPA							

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 426 Castle Rock Drive	Policy Number:				
City Central Point	State ZIP (Oregon 9750	Code 02	Company NAIC Number		
SECTION C - BUI	ILDING ELEVATION INFORMAT	ION (SURVEY RE	QUIRED)		
C1. Building elevations are based on: *A new Elevation Certificate will be requi C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according 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 basement) 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 equipment and local	Construction Drawings* Build Build When construction of the building (with BFE), VE, V1–V30, V (with BF g to the building diagram specified in Vertical Datum: Devaltions in items a) through h) below Other/Source: to be the same as that used for the Billiant, crawlspace, or enclosure floor) tural member (V Zones only) uipment servicing the building ation in Comments)	ding Under Construing is complete. FE), AR, AR/A, AR/A In Item A7. In Puerto NAVD 1988 N. FE. 1 1:	Check the measurement used. 239.8 feet meters 242.4 feet meters 242.1 feet meters 241.8 feet meters		
f) Lowest adjacent (finished) grade nexg) Highest adjacent (finished) grade nex			240.7 ⋈ feet meters 241.1 ⋈ feet meters		
h) Lowest adjacent grade at lowest elev structural support	/ation of deck or stairs, including	1:	242.4 X feet meters		
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?					
Certifier's Name	License Number	***************************************			
Philip J Drossos Title Surveyor Company Name Terrasurvey Inc Address 274 4th Street City Ashland	90718 State Oregon	ZIP Code 97502	PROFESSIONAL LAND SURVEYOR OREGON JULY 12, 2016 PHILIP J. DROSSOS No. 90718 Renewal 12-31-23		
Signature	Date 01-11-2023	Telephone (541) 482-6474	Ext.		
Copy all pages of this Elevation Certificate and			agent/company, and (3) building owner.		
Comments (including type of equipment and I C2e is a heat pump					

ELEVATION CERTIFICATE

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

MP	ORTANT: In these spaces, copy the corres	ponding information	from Section A.	FOR INSUR	ANCE COMPANY USE
	ilding Street Address (including Apt., Unit, Suite 6 Castle Rock Drive	o. Policy Numb	er:		
City Cer	y ntral Point	State Oregon	ZIP Code 97502	Company NA	AIC Number
	SECTION E – BUILDIN FOR		ORMATION (SURVEY NE A (WITHOUT BFE)		
con	Zones AO and A (without BFE), complete Iter mplete Sections A, B,and C. For Items E1–E4, er meters.				
E1.	Provide elevation information for the following the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement,			hether the elevation	is above or below
	crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	meters	or
	crawlspace, or enclosure) is		feet _	meters	or
E2.	For Building Diagrams 6–9 with permanent fluithe next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provide		and/or 9 (see pages meters above	
E3.	Attached garage (top of slab) is		feet	meters	or
E4.	. Top of platform of machinery and/or equipme servicing the building is	ent 	feet	meters above	or below the HAG.
E5.	Zone AO only: If no flood depth number is av floodplain management ordinance?		ne bottom floor elevated own. The local official		
	SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIN	/E) CERTIFICATIO	N
The	e property owner or owner's authorized represe nmunity-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	es Sections A, B, and E Sections A, B, and E a	for Zone A (without re correct to the bes	a FEMA-issued or st of my knowledge.
Pro	pperty Owner or Owner's Authorized Represent	tative's Name			
Add	dress		City	State	ZIP Code
Sig	gnature		Date	Telephone	
Cor	mments				
				☐ Chec	ck here if attachments.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Su	Policy Number:						
426 Castle Rock Drive	State						
City	ZIP Code		Company NAIC Number		r		
Central Point	97502						
SECTIO	N G – COMMUN	ITY 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 or Zone AO.	on E for a building	g located in Zone A (without	a FEMA	a-issued or co	ommunity-is	sued BFE)	
G3. X The following information (Items G4–	G10) is provided f	for community floodplain ma	anageme	ent purposes.			
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued			
175-22-000308-DWL	06/30/20	22		T.B.D.			
G7. This permit has been issued for:	New Construction	on Substantial Improvem	nent				
G8. Elevation of as-built lowest floor (including of the building:	basement)	1242.4	X feet	meters	Datum	NAVD 88	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	1238.7	X feet	meters	Datum	NAVD 88	
G10. Community's design flood elevation:		1239.7	X feet	meters	Datum	NAVD 88	
Local Official's Name		Title					
Justin Gindlesperger, CFM		Community Plan	Community Planner II				
Community Name City of Central Point		Telephone 541.664.3321, x	245				
Signature O D H d da .	4 - 04 -	Date					
Signature Justin P Gindles	perger	01/18/2023					
Comments (including type of equipment and location, per C2(e), if applicable)							
The structure complies with the requirements of CPMC 8.24 - Flood Damage Prevention.							
				Che	eck here if a	ittachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 426 Castle Rock Drive	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 01-11-2023

Clear Photo One



Photo Two

Photo Two Caption back 01-11-2023

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 426 Castle Rock Drive	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 01-11-2023

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption Clear Photo Four