P.02

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

		Important: F	lead the instructions on	pages 1 - 7.					
	For Insulance Company Use:								
BUILDING OWNER'S NA W.L. Moore Constru			- PROPERTY OWNER I			Policy Number			
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.						Company NAIC Number			
653 Blue Moon Dr. CITY									
Central Point			STATE OR		ZIP CQ 97502	DE			
PROPERTY DESCRIPTI LOT 129 of Griffin Oaks U	ON (Lot and Block	k Numbers, Tax Parcel	Number, Legal Description	ı, etc.)	0) 002				
BUILDING USE (e.g., Re Residential	sidential, Non-resi	dential, Addition, Acces	sory, etc. Use a Commen	ls area, if nec	essary.)				
			HORIZONTAL DATUM: SOURCE: ☐ GPS (T NAD 1927 ☐ NAD 1983 ☐ USGS						
		SECTION B - FLOOD	NSURANCE RATE MAP	(FIRM) INFO	ORMATION				
B1. NFIP COMMUNITY NAME		74.	B2. COUNTY NAME			3. STATE			
Jackson County 415589			Jackson			R STATE			
B4. MAP AND PANEL NUMBER 415589-0402	85. SUFFIX	B6, FIRM INDEX DATE 4-1-1982	87, FIRM PANEI EFFECTIVE/REVISED 4-1-1982	I .	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 1257.0			
B10. Indicate the source of the		lon (BFE) data or base flo	1			300110			
☐ FIS Profile 【	X FIRM	Community Dete	rmined Ot	her (Describe):	·				
B11. Indicate the elevation date			□ W	AVD 1988 📋	Other (Describe):				
B12. Is the building located in a						Designation Date			
			LEVATION INFORMATI						
C1. Building elevations are bas			Building Under Construction	o* 🗵 Fin	fished Construction				
*A new Elevation Certificat									
C2. Building Diagram Number	Z (Select the buildin	ng diagram most similar to	o the building for which this ce	rtificate is bein	g completed - see pag	əs 6 and 7. If no diagram			
accurately represents the I			.DEC) AD ADU ADUE AC	VII. 400 101					
C3. 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 C3at below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of									
Section D or Section G, as	an to mai useu toi i annondate to doc	report the datum conver	suiements and oztum conver clos	sion calculation	i. Use the space provi	aed or the Comments area of			
Datum 1929 Conversion/		SHOULD BE GOTHING COLLAS	31U1 I.						
		elevation reference man	k used appear on the EIRM?	XI Yes	No.				
Elevation reference mark used RM1 Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 1254, 5 ft.(m) REGISTERED PROFESSION:									
o b) Top of next higher floor			1258 . 2 ft.(m)		seg.	PROFESSIONAL			
o c) Bottom of lowest horizontal structural member (V zones only)			1254. 5.ft.(m)		pa g	AND SURVEYOR			
o d) Attached garage (top	(1256. 2 ft.(m)		Embos	71 172				
o e) Lowest elevation of m	Janua 5								
servicing the building			1256 . 5 ft.(m)		g g	OREGON			
o f) Lowest edjacent (finish	red) grade (LAG)		<u>1255</u> <u>8</u> ft.(m)		N G	BREET A. FARBER			
o g) Highest adjacent (finis			<u>1256</u> . <u>0</u> ft.(m)		as as	ESCHOOL AL FARSON			
o h) No, of permanent openings (flood vents) within 1 ft, above adjacent grade 14									
 i) Total area of all perms 	nent openings (floo	od vents) în C3.h <u>1658</u> sq	in. (sq. cm)		REN	EWAL DATE 12-31-200			
	SEC	CTION D - SURVEYO	R, ENGINEER, OR ARCH	IITECT CER	TIFICATION				
This certification is to be sig						nation.			
I certify that the information	in Sections A, B,	and C on this certifica	te represents my best effor	ts to interpret	the data available,				
I understand that any false	statement may be	e punishable by fine or	imprisonment under 18 U.S						
CERTIFIER'S NAME Herber	t A Farber			LIC	ENSE NUMBER LS:	?189			
TITLE President	LE President COMPANY NAME Farber & Sons Inc								
ADDRESS		.₩1	CITY		STATE	ZIP CODE			
431 Oak Street			Central Poir	ıt	Or	97502			
SIGNATURE 7	171:	7_	DATE		TELEPHO	ONE			
202	- / 101	<u> </u>	08-17-05		541-664-	5599			

- IMPORTANT: In these spaces, co	ppy the corresponding information from S	ection A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Ap 653 Blue Moon Drive	ot, Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BO	OX NO.		Policy Number
CITY Central Point	STATE		ZIP CODE 97502	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER, OR AR	CHITECT CER		<u>)</u>
Copy both sides of this Elevation Certifica	ate for (1) community official, (2) insurance agent/co		Military	
COMMENTS				
C3a Bottom of Crawl Space C3B Finish Floor of first floor of living space	De .	<u> </u>		
C3e heat pump slab				
+ + conception order				
<u> </u>				Check here if attachments
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NO	T REQUIRED)	FOR ZONE AO AND ZON	E A (WITHOUT BFE)
For Zone AO and Zone A (without BFE), ∞	omplete Items E1 through E4. If the Elevation Certi	ficate is intended	for use as supporting information	on for a LOMA or LOMR-F,
Section C must be completed. E1. Building Diagram Number //Select the	huilding despen most similar to the building for the	sigh this seaton r	n in haina as a lasa t	0 (7); "
represents the building, provide a sketo	building dagram most similar to the building for which or photograph.)	*** I BILS CETHICS(6	ਤਾਨ ਸਵਾਜ਼ਿ completed see page	≈ o and /. If no diagram accurately
E2. The top of the bottom floor (including ba	asement or enclosure) of the building isft.(m)_	_in.(cm) 🔲 abo	ive or 🔲 below (check one) th	ne highest adjacent grade. (Use
natural grade, it available).				
E3. For Building Diagrams 6-8 with opening grade. Complete Items C3.h and C3.i.d	as (see page 7), the next higher floor or elevated floor on final of form	or (elevation b) of	t the building isft.(m)in.(om) above the highest adjacent
	on from or form. d/or equipment servicing the building isft.(m)_	in.(cm) 🗀 abo	We or Thelow lahedronal w	a hinhaet adiament amela. Il ten
natura grace, if available).				
E.5. For Zone AO only: If no flood depth nur	mber is available, is the top of the bottom floor eleva-	ated in accordance	e with the community's floodpla	in management ordinance?
Yes I No Unknown. The	local official must certify this information in Section	Ģ.		
The property rewner or reunade authorized	FION F - PROPERTY OWNER (OR OWNER representative who completes Sections A, B, C (flu	O KEPRESEN	NIATIVE) CERTIFICATION	vá a ECIJA t I
issued BFE) or Zone AO must sign here.	The statements in Sections A, B, C, and E are con	ect to the best of	a uniy), and ⊑ for ∠one A (witho my knowledge.	xa a r∈wa⊣ssuød or community-
PROPERTY OWNER'S OR OWNER'S A	AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	RESS			ZIP CODE
SIGNATURE		DATE		10NE
COMMENTS				
				
			<u> </u>	W \$2
				Check here if attachments
The level official who is puthed and built	SECTION G - COMMUNITY INFO			
The local official who is authorized by law or Certificate. Complete the applicable item(s) i	ordinance to administer the community's floodplain	management or	rdinance can complete Sections	A, B, C (or E), and G of this Elevation
G1, [] The information in Section C was tal	ken from other documentation that has been signer	d and embossed	by a licensed surveyor, enginee	er, or architect who is authorized by s
or local law to certify elevation inform	Mation. (Indicate the source and date of the elevati	on data in the Co	omments area below.)	
G2. ☐ A community official completed Sect	tion E for a building located in Zone A (without a FE -G9) is provided for community floodplain managen	MA-issued or co	mmunity-issued BFE) or Z one /	AO.
G4. PERMIT NUMBER			D. C.	
RV5-0183	GS. DATE PERMIT ISSUED 9/8/2005	G6.	DATE CERTIFICATE OF COMPLU	ANCE/OCCUPANCY ISSUED
37. This permit has been issued for: 🗵 Nev	w Construction		_/_/	
38. Elevation of as-built lowest floor (including	g basement) of the building is:		12 <u>58</u> ,2ft(m)	Datum: NGV D
39. BFE or (in Zone AO) depth of flooding at	the building site is:		1257.0 ft.(m)	Datum: WaV D
LOCAL OFFICIAL'S NAME	unia Mholat	TITLE	Floodplain 3)nocializ 1
COMMUNITY NAME	Cooked D1	TELEPHO		apecialist.
SIGNATURE SIGNATURE	central toint	DATE	<u>541. 6604.</u>	7602, Ext. 244
COMMENTS COMMENTS	eudaltt		46/07.	
- Commence of the commence of			P P	
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	13 2 			Check here if attachments
				PER ALMAN HOLD II MITTING HISCHIS