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

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

National Flood Insurance Program Important: Read the instructions on pages 1-8.

			ON A - PR	OPERTY IN	ORM	ATION	For Insurance Company Use:
A1. Building Owner's Nan	Policy Number						
A2. Building Street Address 805 Buck Point Street	Company NAIC Number						
City Central Point S							
A3. Property Description ( Lot 100 of Jackson Oaks P	Lot and Block Number hase V	ers, Tax Parcel Nu	mber, Legal I	Description, e	:c.)		
<ul> <li>A4. Building Use (e.g., Re</li> <li>A5. Latitude/Longitude: La</li> <li>A6. Attach at least 2 photo</li> <li>A7. Building Diagram Num</li> <li>A8. For a building with a c</li> <li>a) Square footage of</li> <li>b) No. of permanent tenclosure(s) walls</li> <li>c) Total net area of file</li> </ul>	t. 42°22'38.62511" N graphs of the buildin ber 2 rawl space or enclosi crawl space or enclosi lood openings in the within 1.0 foot above bood openings in A8.b	Long. 122°56'00 g if the Certificate in ure(s), provide sure(s) crawl space or adjacent grade	.95887" W is being used 2123sq ft 22 2849 sq i	to obtain floo A9.	For a b a) Squ o) No. wal c) Tota	ance.  puilding with an attach  pare footage of attach  of permanent flood of  ls within 1.0 foot abor  al net area of flood of	ned garage <u>765</u> sq ft openings in the attached garage
	SECTIO	NB-FLOOD IN	SURANCE	RATE MAP	(FIRM	(i) INFORMATION	
B1. NFIP Community Name Jackson County 415589	& Community Numb		2. County Na ackson	me			3. State R
B4. Map/Panel Number 415589-0402	B5. Suffix I	B6. FIRM Index Date 9-27-1991		FIRM Panel e/Revised Da 4-01-02	te	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1256.0
B11. Indicate elevation datul B12. Is the building located i Designation Date N/A	n a Coastal Barrier F	esources System	(CBRS) area ☐ CBRS <b>EVATION I</b>	□ OPA NFORMATIO	Protec	URVEY REQUIRE	□Yes ⊠No
C1. Building elevations are b *A new Elevation Certific C2. Elevations – Zones A1-A below according to the b Benchmark Utilized RM- Conversion/Comments	ate will be required v 30, AE, AH, A (with i uilding diagram spec 1 Vertical Datum 19	BFE), VE, V1-V30, ified in Item A7.	of the building	is complete.			☑ Finished Construction  AR/AO. Complete Items C2.a-g
					CI	heck the measureme	nt used.
a) Top of bottom floor (inclub) Top of the next high c) Bottom of the lowes d) Attached garage (to e) Lowest elevation of (Describe type of eq f) Lowest adjacent (fing)	er floor : horizontal structural o of slab) machinery or equipm uipment in Comment shed) grade (LAG)	member (V Zones	only)	1260.2 N/A. 1259.2 1259.3 1258.3	⊠ feet □ feet ⊠ feet ⊠ feet ⊠ feet	meters (Puerto meters	Rico only) Rico only) Rico only) Rico only) Rico only)
	SECTION D	- SURVEYOR, I	ENGINEER	OR ARCH	TECT	CERTIFICATION	
This certification is to be sign information. I certify that the I understand that any false si  Check here if comments	information on this C atement may be pun are provided on back	Pertificate represen Pishable by fine or i	ts my best ei mprisonmeni	forts to interpi under 18 U.S	ret the d Code	data available. e, Section 1001.	PROFESSIONAL LAND SURVEYOR
Certifier's Name Herbert A.	+arber			License Num	per LS	2189	Db 17 2
Title President  Address 431 Oak Street		Company Name  City Central Point			IP Coo	de 97502	OREGON
Signature 7/1	// Date			(541) 664-5			HERBERT A. FARDER
	****						RENEWAL DATE 12-31-07

IMPORTANT: In these spaces, copy the correspond	ding information from Secti	on A	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bld		Policy Number	
805 Buck Point Street			
City Central Point State OR ZIP Code OR			Company NAIC Number
SECTION D - SURVEYOR, EN	IGINEER, OR ARCHITECT (	CERTIFICATION (CON	LITINUED)
Copy both sides of this Elevation Certificate for (1) community			·
Comments C.2.a Lowest floor is dirst crawl space			
C.2.b. Next highest floor is the finished floor C.2. e. Lowest Machinery is heat pump (see photo)			
1/m/at			
Signature	Date 04/24/2	2006	Chook has if attachments
SECTION E - BUILDING ELEVATION INFORMATI	ON (SURVEY NOT REQUIR	ED) FOR ZONE AO A	Check here if attachments  ND ZONE A (WITHOUT REF)
For Zones AO and A (without BFE), complete Items E1-E5. If and C. For Items E1-E4, use natural grade, if available. Chec E1. Provide elevation information for the following and check grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawl space, b) Top of bottom floor (including basement, crawl space, E2. For Building Diagrams 6-8 with permanent flood opening (elevation C2 b in the diagrams) of the building is	ck the measurement used. In Puck the appropriate boxes to show work enclosure) is	erto Rico only, enter mete whether the elevation is ab     feet    meters    a     feet    meters    a	bove or below the highest adjacent bove or  below the HAG, bove or  below the LAG.
(elevation C2.b in the diagrams) of the building is    E3. Attached garage (top of slab) is    E4. Top of platform of machinery and/or equipment servicing    E5. Zone AO only: If no flood depth number is available, is the ordinance?    Yes   No   Unknown. The local	t meters above or life the building is he top of the bottom floor elevate.	below the HAG. feet □ meters □ abov d in accordance with the c	re or ☐ below the HAG.
SECTION F - PROPERTY OW	NER (OR OWNER'S REPRE	SENTATIVE) CERTIFI	CATION
The property owner or owner's authorized representative who o			
or Zone AO must sign here. The statements in Sections A, B, a	and E are correct to the best of m	y knowledge.	
Property Owner's or Owner's Authorized Representative's Nam	ie		
Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments	540	- telephone	7
Outsileats			
			Check here if attachments
SECTION G - C	COMMUNITY INFORMATION	(OPTIONAL)	Check sele ii attachinent
he local official who is authorized by law or ordinance to adminis	ster the community's floodplain m	nanagement ordinance car	n complete Sections A, B, C (or E),
nd G of this Elevation Certificate. Complete the applicable item(s1.) The information in Section C was taken from other door is authorized by law to certify elevation information. (In A community official completed Section E for a building	umentation that has been signed edicate the source and date of the located in Zone A (without a FEI	and sealed by a licensed elevation data in the Cor MA-issued or community-i	surveyor, engineer, or architect who mments area below.)
3. 🔀 The following information (Items G4G9.) is provided for	or community floodplain manager	nent purposes.	
G4. Permit Number G5. Date Permit Issue	VA ESSA	ate Certificate Of Complia	ance/Occupancy Issued
7. This permit has been issued for: New Construction	☐ Substantial Improvemen	·	
Elevation of as-built lowest floor (including basement) of the b     BFE or (in Zone AO) depth of flooding at the building site:	ouilding: 1257 6 🗖 feet	☐ meters (PR) Datum	
Local Official's Name DAVE ARKENS	Title	FLOODPLAIN	MANAGER
Community Name CITY OF CENTRAL POINT	Telephone	<b>541-</b> 664-332	
Signature	Date	<i>c</i>	······································
Comments Wave Un bere		4-27-20	$\infty \varphi$
			Chook has if -tht
			Check here if attachments

## Building Photographs See Instructions for Item A6.

D-II N I
Policy Number
O NAME OF
Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT OF HOUSE (9-24-06)



(ATTACHED GARAGE (9-24-06)

## Building Photographs Continuation Page

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 805 Buck Point Street	Policy Number
City Central Point State OR 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."



(REAR OF HOUSE LOOKING FROM NORTHWEST)



(REAR OF HOUSE LOOKING FROM THE SOUTHEAST)