## U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

National Flood Insurance Pri	Jyi at 11			istructions on p			
				PERTY INFOR	MATION		Company Use:
A1. Building Owner's Name DONALD and CHERYL HARRINGTON						Policy Number	• 
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.0809 BUCK POINT STREET				O. Route and Box	No.	Company NAI	C Number
City CENTRAL POIN	T State OF	R ZIP Code 97502	-				
A3. Property Description ( LOT 101 OF JACKSON OA				escription, etc.)			
<ul> <li>A4. Building Use (e.g., Red)</li> <li>A5. Latitude/Longitude: Late</li> <li>A6. Attach at least 2 photo</li> <li>A7. Building Diagram Num</li> <li>A8. For a building with a can</li> <li>Square footage of</li> <li>b) No. of permanent tenclosure(s) walls</li> <li>c) Total net area of file</li> </ul>	t. 42°22'39 7204' graphs of the buber 2 1 rawl space or encrawl space or e lood openings in within 1.0 foot al	6 N Long. 122°56'0' illding if the Certificate closure(s), provide enclosure(s) at the crawl space or bove adjacent grade	1.31185 W	to obtain flood ins A9. For a a) S b) N w		ached garage, prov ached garage d openings in the bove adjacent grad	<u>450</u> sq.ft attached garage le <u>N/A</u>
c) Total fiet area of the		TION B - FLOOD I					<u>Ivim</u> sq iti
B1. NFIP Community Name			B2. County Na	<u> </u>		B3. State	
CENTRAL POINT 410092	: & Community N	ATHING!	JACKSON			OREGON	
B4. Map/Panel Number 415589-0402	B5. Suffix B	B6. FIRM Index Date 5-15-2002	Effectiv	FIRM Panel e/Revised Date 4-01-82	B8. Flood Zone(s) A	AO, use t	od Elevation(s) (Zone base flood depth) 1255.5
<ol> <li>Indicate elevation datu</li> <li>Is the building located Designation Date N/A</li> </ol>	in a Coastal Barr			☐ NAVD 1988 or Otherwise Prot ☐ OPA	☐ Other (Describ ected Area (OPA)?	e)	⊠No
	SECTIO	N C - BUILDING E	LEVATION I	NFORMATION	SURVEY REQUII	RED)	
C1. Building elevations are tach *A new Elevation Certific C2. Elevations — Zones A1-4 below according to the tach Benchmark Utilized RM Conversion/Comments	cate will be required.  A30, AE, AH, A (vertility)  A30, AE, AH, A (vertility)  A30, AE, AH, A (vertility)  A30, AE, AH, AE, AE, AE, AE, AE, AE, AE, AE, AE, AE	with BFE), VE, V1-V3 specified in Item A7.	n of the building		E, AR/A1-A30, AR/A	·	
					Check the measure		
d) Attached garage (to	ner floor of horizontal struc op of slab) machinery or eq quipment in Com	ctural member (V Zor guipment servicing the ments)	nes only)	N/A.	meters (Pue	rto Rico only) rto Rico only) rto Rico only) rto Rico only)	
g) Highest adjacent (fi	, •	•			eet 🔲 meters (Pue	• •	
	SECTIO	ON D - SURVEYOR	R, ENGINEER	, OR ARCHITE	CT CERTIFICATION	ON	
This certification is to be sig information. I certify that the	ned and sealed be information on t	by a land surveyor, e	ngineer, or arch	nitect authorized by fforts to interpret ti	y law to certify elevat ne data available.		
I understand that any false s  Check here if comments	-	,	ы ітрпsonmen		Section 1001.	PRO LAND	cistered Fessional Surveyor
Certifier's Name Herbert A. Farber				License Number 2189			File Innove
Title President		Company Nam	ie Farber & Si	ons Inc		- A potential	1 II Sommer
Address 431 Oak Street		City Central P			Code 97502		Oregon Pay 14, 1965 ERT A. FARBER
Signature	1 6	Date 02/05/07	Telephon	e 541-664-5599			734

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. 809 BUCK POINT STREET	Policy Number
City CENTRAL POINT State OR ZIP Code 97502	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (C	CONTINUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building	owner.
Comments NOTE: THIS IS A CERTIFICATE TO INCLUDE THE NEW GARAGE ADDITION.  C2a) = IS THE SLAB ELEVATION FOR THE GARAGE / WORKSHOP ADDITION WHICH IS UNDER CONSTRUCT  C2e) = IS THE ELEVATION OF THE PAD FOR THE HEAT PUMPS	TION.
Signature Date 02/05/07	
Date 02/00/07	☐ Check here if attachment
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AC	O 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 LOMI and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter reference in the control of the following and check the appropriate boxes to show whether the elevation in grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters b) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters b) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters cleavation C2.b in the diagrams) of the building is feet meters above or below the LAG.  E3. Attached garage (top of slab) is feet meters above or below the HAG.  E4. Top of platform of machinery and/or equipment servicing the building is feet meters above or below the HAG.  E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with tordinance? Yes No Unknown. The local official must certify this information in Section G.	neters.  s above or below the highest adjacent  above or below the HAG.  above or below the LAG.  of Instructions), the next higher floor  he HAG.
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CER'	TIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a F or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.  Property Owner's or Owner's Authorized Representative's Name	EMA-issued or community-issued BFE)
Address City State	ZIP Code
Signature Date Telepi	hone
Comments	
	Check here if attachment
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
he local official who is authorized by law or ordinance to administer the community's floodplain management ordinance and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in It	ems G8. and G9.
1. The information in Section C was taken from other documentation that has been signed and sealed by a licen is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the	Comments area below.)
2. 🔲 – A community official completed Section E for a building located in Zone A (without a FEMA-issued or commur	ity-issued BFE) or Zone AO.
3. The following information (Items G4G9.) is provided for community floodplain management purposes.	
G5. Date Permit Issued G6. Date Certificate Of Cor	npliance/Occupancy Issued
7. This permit has been issued for: New Construction Substantial Improvement	
3. Elevation of as-built lowest floor (including basement) of the building: <u>[258.                                    </u>	
ocal Official's Name Standardia Woolet Title Floodistain	Spanistist
Community Name City of Central Point Telephone 541 000	7/200 Ext DAA
ignature Stromnic (1 molt) Date 2/27/2007	, LAIL
The addition is slab on grade construction	
V	
	Check here if attachments

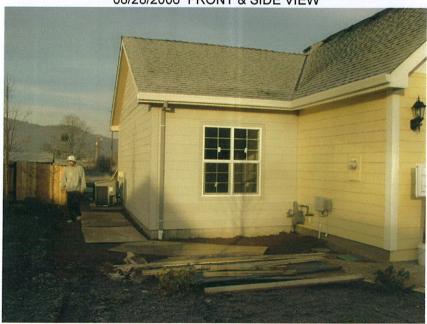
## Building Photographs See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number	
809 BUCK POINT STREET		
City CENTRAL POINT State OR ZIP Code 97502	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.



08/28/2006 FRONT & SIDE VIEW



02/02/07 SOUTH SIDE OF GARAGE WITH ADDITION

## 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. 809 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."



08/28/2006 REAR VIEW



02/02/07 REAR VIEW WITH ADDITION