FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

			d the instructions on pages 1		
		SECTION A-I	PROPERTY OWNER INFORMA	ITION	For Insurance Company Use:
BUILDING OWNER'S NAME Dennis and Melanie Ele					Policy Number
		kpt., Unit, Suite, and/or Bl	dg. No.) OR P.O. ROUTE AND B	OX NO.	Company NAIC Number
CITY Central Point			STATE OR	ZIP C 9750:	
PROPERTY DESCRIPTION		Numbers, Tax Parcel Nu	ımber, Legal Description, etc.)		
T37S, R2W, Section 10AB, BUILDING USE (e.g., Reside Residential	ntial, Non-resid	fential, Addition, Accesso	ry, etc. Use a Comments area, if	necessary.)	
LATITUDE/LONGITUDE (OF (##°-##'-##.##' or ##.##	TIONAL) ###°)		TAL DATUM: S NAD 1983	SOURCE: GPS (T USGS (ype): Quad Map
	S	ECTION B - FLOOD IN	SURANCE RATE MAP (FIRM) I	NFORMATION	
B1. NFIP COMMUNITY NAME & CO City of Cental Point	00092		COUNTY NAME ASSOT		B3. STATE OR
B4. MAP AND PANEL NUMBER 410092 0001	85. SUFFIX	B6, FIRM INDEX DATE 1-19-1982	B7. FIRM PANEL EFFECTIVE/REVISED DATE 1-19-1982	88. FLOOD ZONE(S) A8	BB, BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 1288.8
B11. Indicate the elevation datum	FIRM used for the BFE	☐ Community Determ Ein B9: ☑ NGVD 1929	Nned ☐ Other (Desc ☐ NAVD 1988	Other (Describe):	
B12. Is the building located in a Co			rea or Otherwise Protected Area (OP		Designation Date
			EVATION INFORMATION (SUF		
C1. Building elevations are based	on: 🔲 Constru	ction Drawings* 🔲 🛚	Buliding Under Construction* 🛚 🗵	Traished Construction	
*A new Elevation Certificate w					
C2. Building Diagram Number 2 (6 accurately represents the built			ne building for which this certificate is	being completed - see p	ages 6 and 7. If no diagram
			IFE), AR, AR/A, AR/AE, AR/A1-A30,	ADIAH ADIAC	
Complete them C2 a before	C, AN, A (ME) D	RTE), VE, VI-VOU, V (MICHE) Shuilding diagram exerting	in them C2. State the datum used. If	the datum is different for	on the district used for the REF In
Continue to active	accosong to un	po DEEL Crampany abaciliar	rements and datum conversion calcu	letion. I lea tha enace n	milded or the Comments area of
				resont. Use the space pr	Office of the Bollandia and the
Section D or Section G, as ap			лі.		
Datum NGVD29/56 Convers			used appear on the FIRM? 🛭 Yes	∏ No.	
					BEGISTERED
o a) Top of bottom floor (incl.	iding basement	ok eudosnie)	<u>1265</u> . <u>6</u> ft.(m)	8	PROFESSIONAL
o b) Top of next higher floor			1268 . 2 ft.(m)	Embossed Seal, and Date	LAND SURVEYOR
o c) Bottom of lowest horizon		mber (v zones only)	<u>n/a</u> ft(m)	\$ C.	
o d) Attached garage (top of			<u>1266</u> . <u>4</u> ft.(m)	ËË	Short to E
o e) Lowest elevation of mad			1286 - 8-ft-(m)	ਬਾ ≌ .∠	
servicing the building (C		1270 110 0700)	1266, 3 ft (m)	Num ber	OREGON ALLY 3A, \$PES
 o f) Lowest adjacent (finished o g) Highest adjacent (finished 			1266. 4 fl.(m)	License Numb Signal	Mederi a farber
 o g) nignest adjacent (illimine o h) No, of permanent openir 		udthin 1 & phous adjacent		· 👼 🔻	
o i) Total area of all permane	- 1	•	=		RENEWAL DATE 12-31-0
On tolor order or an permane					
The second secon			ENGINEER, OR ARCHITECT		formetion
I certify that the Information in	Sections A, B,	and C on this certificate	eer, or architect authorized by law represents my best efforts to inte	rpret the data available	р . Э.
CERTIFIER'S NAME Herbert A	rement mey be Farber	e pariisri uale ay tine at in	nprisonment under 18 U.S. Code,	LICENSE NUMBER	S 2189
TITLE President			COMPANY NAME F	arber & Son's, INC.	
ADDRESS	~~~	450	CITY Central Point	STAT OR	E ZIP CODE 97502
431 Oak Street			DATE		PHONE
SIGNATURE 762	-Ja-		2-28-06		664-6599

FEMA Form 81-31, JUL 00

SEE REVERSE SIDE FOR CONTINUATION

REPLACES ALL PREVIOUS EDITIONS

IMPORTANT: In these sp	For insurance Company Use:				
BUILDING STREET ADDRESS (140 Centennial Circle	Including Apt., Linit, Suite, and/or Bldg. No.) OR P.O. RO	OUTE AND BOX NO.		Policy Number	
CITY		STATE	ZIP CODE	Company NAIC Number	
Central Point	SECTION D - SURVEYOR, ENGINEE	OR ARCHITECT CERTII	97502 FICATION (CONTINUE	(D)	
Popus both oidos of this Etc. at	on Certificate for (1) community official, (2) insura			-1	
COMMENTS	Off Certificate for (1) Continuing officer, (2) fishing	ince agenticompany, and (5) box	ung onlice.		
Bottom floor per C-3a is a dirt o	crawl space, The next higher floor is the inhabite	d floor of the structure.			
Machinery per C-3e Is the hea	at pump servicing the structure.				
VOTE : This residence was $lpha$	onstructed in 1979, 3 years prior to the F.E.M.A. p	anel map/standards for this neig	ghborhood.		
				Check here if attachment	
SECTION E - B	UILDING ELEVATION INFORMATION (SL	JRVEY NOT REQUIRED) F	OR ZONE AO AND ZO	NE A (WITHOUT BFE)	
action C must be completed. I. Building Diagram Number _ represents the building, pro The top of the bottom floor (in atural grads, if available). For Building Diagrams 6-8 we grade. Complete Items C3.		oulding for which this certificate is ft.(m)in.(cm) above relevated floor (elevation b) of the	s being completed — see page or below (check one he building isft.(m)	ages 6 and 7. If no diagram accuratel) the highest adjacent grade. (Lise in.(cm) above the highest adjacent	
	ad depth number is available, is the top of the bott		with the community's floor	tolain management ordinance?	
LIYES LINO LIUN	cnown. The local official must certify this information. SECTION F • PROPERTY OWNER (Company)		ATIVE) CERTIFICATION	ON .	
he property owner or owner's	authorized representative who completes Section	A		***************************************	
ssued BFE) or Zone AO must	sign here. The statements in Sections A, B, C, a	and E are correct to the best of m			
PROPERTY OWNER'S OR C	DWNER'S AUTHORIZED REPRESENTATIVE'S	NAME			
ADDRESS		CITY	STA	STATE ZIP CODE	
SIGNATURE	***	DATE	TEU	TELEPHONE	
COMMENTS					
halace a large and				Check here if attachment	
· · · · · · · · · · · · · · · · · · ·	SECTION G - COMM	UNITY INFORMATION (OP	TIONAL)		
ertificate. Complete the applicate. Some information in Section in Section of the information in Section in S	on C was taken from other documentation that he lify elevation information. (Indicate the source an inpleted Section E for a building located in Zone A in (Items G4-G9) is provided for community floods	es been signed and embossed b d date of the elevation data in the <u>Liwithout a FEMA-Issued or com</u> dain management purposes.	oy a licensed surveyor, eng e Comments area below.) ornunity-igsued BFE) or Zo	ineer, or architect who is authorized b	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6, D	IATE CERTIFICATE OF COM	PLIANCEICCCUPANCT ISSUED	
8. Elevation of as-built lowest fi	I for: New Construction Substantial Imp oor (including basement) of the building is: of flooding at the building site is:	rovement 図エルちい	1265.6fl(m) 1265.8fl(m)	Datum: 15677	
OCAL OFFICIAL'S NAME	DAVE ARKENS	TITLE	FLOODF	PLAIN MANAGER	
COMMUNITY NAME		TELEPHO		4-3321 EXT. 244	
SIGNATURE	CITY OF CENTRAL POINT	DATE		2006	
COMMENTS	are we		<u> </u>		
	AND CONTRACTOR OF CONTRACTOR O			Check here if attachmen	
MA Form 81-31, JUL 00			REP	ACES ALL PREVIOUS EDITION	

Feb 28 2006 11:18 P.02