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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

| No. of permanent flood openings in the crawl space or enclosure(e) wallew thin 1.0 floot above adjacent grade 0 or total net area of flood openings in A8.b 0 sq in c.) Total net area of fl | National Flood Insurance Pro | gram | Important: R | Read the instruct | ions on pag | jes 1-8. | |
|--|--|--|---|--|---|---|---|
| A2. Building Streak Address (including Apt., Unit, Suite, endore Bidg, No.) or P.O. Route and Box No. City CENTRAL POINT State OR ZIP Code 97502 A3. Proparty Discription (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 37. 2W 19Ab TAX. COT 68th A5. Laubted (e.g., Residential, Non-Residential, Addision, Accessory, etc.) A6. Building Leg (e.g., Residential, Non-Residential, Non-Residential, Addision, Accessory, etc.) A6. Attach at least 22 photographs of the building if the certifical is being used to obtain flood insurance. A7. Building Daigram Number 1 A8. For a building Diagram Number 1 A8. For a building Diagram Number 1 A8. For a building Diagram Number 1 A9. For a building With en and space or enclosure(s), provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orand space or enclosure(s) provide a) Square footage of orang space or enclosure(s) provide a) Square footage of static-led garage provide: a) Square footage of square provi | | | SECTIO | N A - PROPERT | Y INFORMA | TION | |
| 113 GLENN WAY A3. Property Description (Lot and Block Numbers, Tax Percel Number, Legal Description, etc.) 37 2W 10A5 TAX LOT 8801 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Astatuted-tonglude: Let. 427218.8518EN Long, 1227818.87885W A6. Astatuted-tonglude: Let. 427218.8518EN Long, 1227818.8518W A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Building Use (e.g., Residential, Addition, Accessory, etc.) B1. NEP Community Number B1. NEP Community Number B2. Courty Name B2. Courty Name B3. State B2. Courty Name B4. State B4. State B5. State B6. State | A1. Building Owner's Name | Ciara Place LLC | | | | | Policy Number |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 37 2W 10A TAX LOT 8801 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) 8. Estimated congluder Left. 227218.85182M1 Long. 1227513.87885W A6. Astatuted-congluder Left. 227218.85182M1 Long. 1227513.87885W A6. For a building with an attached parager, provide: A6. For a building with an attached parager, provide: A6. For a building with an attached parager, provide: A6. For a building with an attached parager, provide: A6. For a building with an attached parager, provide: A6. For a building with an attached parager, provide: A7. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager, provide: A8. For a building with an attached parager of a conclusion with a provided parager (for a building basel parager (for a building within 1.0 foot above adjacent grade | 113 GLENN WAY | | | g. No.) or P.O. Rout | e and Box No. | | Company NAIC Number |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accossory, etc.) RESIDENTIAL A5. Latitude Longitude: Lat. 42*22*18.86*184*N Long. 122*25*518.87885*N A6. Attach at least 2 photographs of the building if the Cartificate is being used to obtain flood insurance. A7. Building Diagram Number 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 | • | | | | | | |
| A5. LathudelLongibude: Lat. 427218.851847 Long. 1227518.87865W A5. Attach at least 2 photographs of the building if the certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 | | | rs, Tax Parcel Nurr | nber, Legal Descript | ion, elc.) | | |
| B1. NFIP Community Name & Community Number B2. County Name B3. State CRESON | A5. Latitude/Longitude: Lat A6. Attach at least 2 photo A7. Building Diagram Numl A8. For a building with a cr a) Square footage of b) No. of permanent f enclosure(s) walls | . 42°22'18.85184"N graphs of the building per 1 SEE awl space or enclosurawl space or enclosurod openings in the within 1.0 foot above | Long. 122°55'13.6 g if the Certificate is ce communicates, provide sure(s), provide sure(s) crawl space or adjacent grade | 87885"W s being used to obta Na sq ft | in flood insura A9. For a bu a) Squ b) No. wall | ince. silding with an atta are footage of atta of permanent floo s within 1.0 foot a | ached garage, provide: ached garage <u>n/a</u> sq ft od openings in the attached garage above adjacent grade <u>0</u> |
| B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Elevation(s) (Zone(s) A0. use base flood depth) 1271.9 | | SECTIO | NB-FLOOD IN | SURANCE RATE | MAP (FIRM |) INFORMATIO | ON |
| ### ACT A | | & Community Numb | | | | | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIRM © Community Determined Other (Describe) | | | Date | Effective/Revi | sed Date | Zone(s) | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) Item B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? | B10. Indicate the source of | the Base Flood Eleva | ntion (BFE) data or | base flood depth e | ntered in Item | B9. | |
| C1. Building elevations are based on: | B12. Is the building located | in a Coastal Barrier F | Resources System | (CBRS) area or Otl | nerwise Protec] OPA | sted Area (OPA)? | □Yes ⊠No |
| Conversion/Comments N/A Top of bottom floor (including basement, crawl space, or enclosure floor). a) Top of the next higher floor b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG) 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. Centifier's Name Herbert A. Farber Title President Company Name Farber & Sons Inc. Address 431 Oak Street City Central Point State Or ZIP Code 97502 Check the measurement used. feet | *A new Elevation Certification Certification C2. Elevations – Zones A1- | based on: [] cale will be required a A30, AE, AH, A (with | Construction Drawi when construction BFE), VE, V1-V30 | ngs* DB of the building is co | uilding Under (mplete. | Construction* | ⊠ Finished Construction |
| Check the measurement used. a) Top of bottom floor (including basement, crawl space, or enclosure floor). 1273.3 | | | 1929 | | | | |
| b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG) 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. Certifier's Name Herbert A. Farber Title President Company Name Farber & Sons Inc. Address 431 Oak Street Title President City Central Point State Or ZIP Code 97502 MAA.N/A | Conversion/Comments | <u>N/A</u> | | | C | heck the measur | rement used. |
| 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. Certifier's Name Herbert A. Farber Certifier's Name Herbert A. Farber License Number L.S. 2189 Title President Company Name Farber & Sons Inc. Address 431 Oak Street City Central Point State Or ZIP Code 97502 HERBERT A FARBERT | b) Top of the next hig c) Bottom of the lowe d) Attached garage (t e) Lowest elevation o (Describe type of e f) Lowest adjacent (f | her floor st horizontal structura op of slab) f machinery or equip equipment in Comme inished) grade (LAG) | al member (V Zone ment servicing the nts) | N/A es only) N/A N/A building 127 | N/A ☐ fee N/A ☐ fee N/A ☐ fee 3.3 ☒ fee | meters (Puett meters (Puett | erto Rico only) |
| 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. Check here if comments are provided on back of form. Certifier's Name Herbert A. Farber License Number L.S. 2189 Title President Company Name Farber & Sons Inc. Address 431 Oak Street City Central Point State Or ZIP Code 97502 HERBERT A FARBER | g) mgneet adjacent (| | | | | , | |
| Address 431 Oak Street City Central Point State Or ZIP Code 97502 HERBERT A FARBER | information. I certify that the I understand that any false Check here if commen | gned and sealed by a le information on this statement may be po ls are provided on ba | a land surveyor, en Certificate represe unishable by fine o | gineer, or architect ents my best efforts r imprisonment und | authorized by to interpret the er 18 U.S. Coo | law to certify eleva e data available. de, Section 1001. | PEGISTERED PROFESSIONAL LANDLAGREVEYO |
| Address 431 Oak Street City Central Point State Or ZIP Code 97502 : 26 1995 HERBERT A FARBER | Title President | | Company Name | e Farber & Sons in | C. | | TON ON |
| Signature / Date 11/10/2006 Telephone (341) 604-3039 | | | • | | | ode 97502 | : 26 1985 HERBERT A FARBER |
| Petters. | Signature / | Tat D | ate 11/10/2008 | relepnone (54 | 11) 004-0099 | ······ | RENEWAL DATE 12-21-2 |

| DESCRIPTION OF THE PROPERTY. | | | |
|--|--|---|--|
| | aces, copy the corresponding information fi | | For Insurance Company Use: |
| Building Street Address (includi 113 GLENN WAY | ng Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route | and Box No. | Policy Number |
| City CENTRAL POINT State | OR ZIP Code 97502 | | Company NAIC Number |
| SEC | CTION D - SURVEYOR, ENGINEER, OR ARC | CHITECT CERTIFICATION (CO | ONTINUED) |
| Copy both sides of this Elevation | on Certificate for (1) community official, (2) insurance | agent/company, and (3) building of | owner. |
| B9 / B10= THE BASE FLOOD I | DE OF A TWO STORY STRUCTURE ELEVATION IS BASED ON THE CURRENT BEST A NISHED FLOOR. NISHED FLOOR WITH MULTIPLE TYPES OF EQUI | | CITY OF CENTRAL POINT |
| Signature 7 | 72 D | ate 11/10/2008 | ☐ Check here if attachments |
| | G ELEVATION INFORMATION (SURVEY NO | T REQUIRED) FOR ZONE AO | |
| and C. For Items E1-E4, use r E1. Provide elevation informa grade (HAG) and the low a) Top of bottom floor (inc b) Top of bottom floor (inc E2. For Building Diagrams 6- (elevation C2.b in the dia E3. Attached garage (top of s E4. Top of platform of machin E5. Zone AO only: If no floor ordinance? Yes [SE The property owner or owner's or Zone AO must sign here. The | nery and/or equipment servicing the building is depth number is available, is the top of the bottom No Unknown. The local official must certify CTION F - PROPERTY OWNER (OR OWNER authorized representative who completes Sections A be statements in Sections A, B, and E are correct to | used. In Puerto Rico only, enter mes to show whether the elevation is feet meters feet meters det meters show or below the bove or below the HAG feet meters a floor elevated in accordance with this information in Section G. R'S REPRESENTATIVE) CERTA, B, and E for Zone A (without a Figure 1) | eters. s above or below the highest adjacent above or below the HAG. above or below the LAG. f Instructions), the next higher floor he HAG. above or below the HAG. he community's floodplain management |
| Property Owner's or Owner's A | uthorized Representative's Name | | |
| Address | City | State | ZIP Code |
| Signature | Date | Telep | hone |
| Comments | | en Algeria (1977) y 1700 en | A., E.A. Albert A., Johanne J. A., A.A. A., A., A., A., A., A., A., A |
| | | 6397 mand. | ☐ Check here if attachment |
| beau | SECTION G - COMMUNITY INF | ORMATION (OPTIONAL) | |
| and G of this Elevation Certificat G1. The information in Sec is authorized by law to G2. A community official co | ed by law or ordinance to administer the community's e. Complete the applicable item(s) and sign below. Stion C was taken from other documentation that has a certify elevation information. (Indicate the source a completed Section E for a building located in Zone A stion (Items G4G9.) is provided for community floods. | Check the measurement used in I s been signed and sealed by a licer and date of the elevation data in the (without a FEMA-issued or commu | tems G8. and G9. nsed surveyor, engineer, or architect who e Comments area below.) |
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certificate Of Co | empliance/Occupancy Issued |
| G7. This permit has been issued | | al Improvement | |
| | loor (including basement) of the building:1273.3 | | |
| naameroad f | Tall control along a distribution with the | Title | See Block treet some contraction of |
| | hanie Woolet, CFM | Floodplain. | Specialist |
| Community Name | Contral Point | Telephone 541. (0(04.7) | 602, ext. 244 |
| Comments | in what | 11/12/2008 | Transfer a set |
| Elevation Cert | gicate prepared for insi | wance purpose | Source of the |
| immunity Det | 1 | Flood Insurance Sh | dy Workmap Plepar |
| by NHC, inc. J | wy 2008. | | Check here if attachmen |
| FEMA Form 81-31, February | 2006 | | Replaces all previous edition |

Building Photographs See Instructions for Item A6.

| | For insurance Company Use. |
|---|----------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 113 GLENN WAY | Policy Number |
| 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.



FRONT VIEW: 113 GLENN WAY (11/10/08)



REAR VIEW: 113 GLENN WAY (11/10/08)