

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Jason and Bryanna White	For Insurance Company Use:
	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 631 Palo Verde Way	Company NAIC Number

City Central Point State OR ZIP Code 97502

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Tax Lot 1000, Map No. 372w10AB, Lot 10 Block 2 Flagstone Subdivision, City of Central Point, OR.

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 42°22'26.3" Long. 122°55'31.9"

Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 8

A8. For a building with a crawl space or enclosure(s), provide

- a) Square footage of crawl space or enclosure(s) 1554 sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 14
c) Total net area of flood openings in A8.b 1680 sq in

A9. For a building with an attached garage, provide:

- a) Square footage of attached garage 488 sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 0
c) Total net area of flood openings in A9.b 0 sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Central Point 410092		B2. County Name Jackson		B3. State OR	
B4. Map/Panel Number 001	B5. Suffix C	B6. FIRM Index Date 9/15/1993	B7. FIRM Panel Effective/Revised Date 1/19/1982	B8. Flood Zone(s) A-8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1265.5

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) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date _____ CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. 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 C2.a-g below according to the building diagram specified in Item A7.

Benchmark Utilized CP-2 Vertical Datum NGVD 1929

Conversion/Comments None

Check the measurement used.

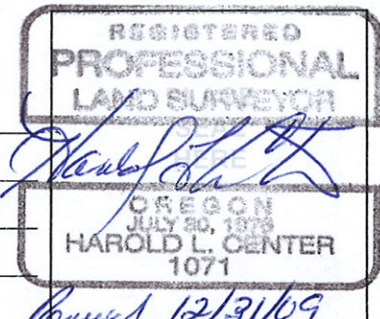
- a) Top of bottom floor (including basement, crawl space, or enclosure floor) 1263.2 feet meters (Puerto Rico only)
b) Top of the next higher floor 1267.0 feet meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters (Puerto Rico only)
d) Attached garage (top of slab) 1266.1 feet meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 1264.6 feet meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) 1265.7 feet meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) 1266.0 feet meters (Puerto Rico only)

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.

Check here if comments are provided on back of form.

Certifier's Name Harold L. Center License Number OR1071
Title Professional Land Surveyor Company Name Harold L. Center Land Surveys
Address 2604 David Lane City Medford State OR ZIP Code 97504
Signature *Harold L. Center* Date 2/19/09 Telephone 541-535-6108



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. 631 Palo Verde Way	Policy Number
City Central Point State OR ZIP Code 97502	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C-2, Elevation bench mark No. CP2-City of Central Point brass disc in N.E. corner of Jackson County Bridge No 116 on West Pine Street
C-2 e) HVAC ducting in subarea, Air Conditioner unit on east side of residence is at elevation 1266.3.

*****NOTE***** Landowner has installed additional permanent flood openings since Elevation Certificate dated 2/5/08.

A8 b) Additional permanent flood openings increased to 14

A8 c) Total net area of flood openings increased to 1680 square inches

Signature [Handwritten Signature] Date 2/19/09 Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO 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 LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.

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 the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) 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 _____

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>N/A</u>	G5. Date Permit Issued <u>N/A</u>	G6. Date Certificate Of Compliance/Occupancy Issued <u>N/A</u>
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: 1267.0 feet meters (PR) Datum NGVD 1989

G9. BFE or (in Zone AO) depth of flooding at the building site: 1265.5 feet meters (PR) Datum NGVD 1929

Local Official's Name Stephanie Woolett, CFM Title Floodplain Specialist

Community Name City of Central Point Telephone 541.664.7602, Ext. 244

Signature Stephanie M. Woolett Date 2/26/2009

Comments This Elevation Certificate has been prepared for insurance purposes.

Crawlspace is sub-grade. Line C2a is the dirt floor of crawlspace; Line C2b is the lowest floor.

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. <i>631 PALO VERDE</i>	For Insurance Company Use: Policy Number
City State ZIP Code <i>CENTRAL POINT OR. 97502</i>	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 OF RESIDENCE @ 631 PALO VERDE, C.P.

PHOTO BY HAROLD L. CENTER, P.L.S. 2/5/08

*No change 2/19/09
Harold L. Center
P.L.S.*

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <i>631 PALO VERDE</i>	For Insurance Company Use: Policy Number
City State ZIP Code <i>CENTRAL POINT OR. 97502</i>	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 VIEW OF RESIDENCE @ 631 PALO VERDE, C.P.

PHOTO BY: HAROLD L. CENTER, P.L.S. 2/5/08

NO CHANGE 2/19/09
Harold L. Center
P.L.S.