U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Flevation Certificate and all attachments for (1) community official (2) insurance agent/company, and (3) building owner

Copy an pages of this					oldi, (2) modranoe d		RANCE COMPANY USE
SECTION A – PROPERTY INFORMATION A1. Building Owner's Name					Policy Nun		
ELITE DEVELOPERS						r oney rear	1001.
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 425 BRIDGE CREEK DRIVE					Company I	NAIC Number:	
City							
CENTRAL POINT Oregon 97502							
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 37S-2W-03BC - TAX LOT# 113						
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5, Latitude/Longit	ude: Lat. 42	2.384761	Long	122.930185	Horizontal Datun	n: NAD	1927 × NAD 1983
A6. Attach at least	2 photograpl	ns of the building if the	Certific	cate is being used t	o obtain flood insur	ance.	
A7. Building Diagra	m Number	9					
A8. For a building v	vith a crawls	pace or enclosure(s):					
a) Square foot	age of crawls	space or enclosure(s)		1,919 sq ft			
b) Number of p	ermanent flo	ood openings in the cra	wlspac	e or enclosure(s) w	vithin 1.0 foot above	adjacent gr	rade 18
c) Total net are	ea of flood op	enings in A8.b 2,3	04 s	sq in			,
d) Engineered	flood openin	gs? ☐ Yes ⊠ No					
A9. For a building w	ith an attach	ed darage:					
				ng #			
	_	ed garage511					_
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade0						
c) Total net are	a of flood op	enings in A9.b	0	sq in			
d) Engineered flood openings? Yes No							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Communit	y Name & C	ommunity Number		B2. County Name			B3. State
City of Central Point	410092			JACKSON			Oregon
B4 Map/Panel Number	B5 Suffix	B6, FIRM Index Date	E1	IRM Panel ffective/ evised Date	B8 Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
41029C1768	F	05/03/2011		/2016	AE	1242.7	Jan 2004,
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Strict FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No							
Designation Date: CBRS OPA							

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 425 BRIDGE CREEK DRIVE	Policy Number:					
City		^o Code	Company NAIC Number			
CENTRAL POINT Ore	gon 97:	502				
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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.						
Benchmark Utilized: SEE REMARKS Vertical Datum: NAVD 1988						
Indicate elevation datum used for the elevations in ite	ems a) through h) bel	ow.				
☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/S	Source:					
Datum used for building elevations must be the same	e as that used for the	BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floo	r) 1241 _. 6				
b) Top of the next higher floor	400, 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	1244 5				
c) Bottom of the lowest horizontal structural membe	r (V Zones only)	 n/a	X feet meters			
d) Attached garage (top of slab)	r (v Zonos omy)	1243 9	X feet meters			
e) Lowest elevation of machinery or equipment serv	vicina the buildina	1244_0	X feet meters			
(Describe type of equipment and location in Com	ments)	1242 5				
f) Lowest adjacent (finished) grade next to building			x feet meters			
g) Highest adjacent (finished) grade next to building		<u>1243</u> . <u>7</u> n/a	X feet meters			
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including	n/a	X feet meters			
SECTION D - SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIF	ICATION			
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un	my best efforts to inte	erpret the data availa	law to certify elevation information. ble. I understand that any false			
Were latitude and longitude in Section A provided by a lic	ensed land surveyor?	Yes □ No	Check here if attachments.			
Certifier's Name	License Number		REGISTERED			
HERBERT A. FARBER	PLS 2189		PROFESSIONAL			
Title PRESIDENT			LAND SURVEYOR			
Company Name			Place			
FARBER & SONS INC.			Jean C			
Address 431 OAK ST			OREGON JULY 26, 19 85			
City	State	ZIP Code	HERBERT A. FARBER			
CENTRAL POINT	Oregon	97502	RENEWS: 12/31/2017			
Signature 747	Date 03/23/2017	Telephone (541) 664-5599	- NEWENO. 123112011			
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community of	official, (2) insurance	agent/company, and (3) building owner,			
Comments (including type of equipment and location, per C2(e), if applicable) C2. Multiple Benchmarks used, tied in a GPS survey network constrained to NAVD 1988. C2e. The lowest machinery servicing the building is the heat pump.						
			:			

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY US	šΕ	
Building Street Address (including Apt., Unit, Suite, and 425 BRIDGE CREEK DRIVE	d/or Bldg, No.)	or P.O. Rou	ite and Bo	ox No	Policy Number:	
	State Oregon	ZIP 9750	Code 02		Company NAIC Number	
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,						
crawlspace, or enclosure) is b) Top of bottom floor (including basement,			eet [meters	s above or below the HAG) _
crawlspace, or enclosure) is			feet	meters	s above or below the LAG	i_
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provid	led in Sectio	n A Items	3 8 and/or	9 (see pages 1–2 of Instructions),	
the diagrams) of the building is			_	meters		
E3. Attached garage (top of slab) is	·		feet	meters	s above or below the HAG	i.
E4. Top of platform of machinery and/or equipment servicing the building is			feet	meters	above or below the HAG	i,
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	le, is the top of No Unk	the bottom to nown. The	floor eleva local offi	ated in acc cial must c	cordance with the community's certify this information in Section G.	
SECTION F - PROPERTY OW	NER (OR OWN	IER'S REPF	RESENT/	ATIVE) CE	RTIFICATION	
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. The property owner is authorized to the property owner or owner's authorized representation.	ve who comple he statements i	tes Sections in Sections /	A, B, an A, B, and	d E for Zor E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative	's Name					
Address		City		Sta	ite ZIP Code	
Signature		Date		Tel	ephone	
Comments						
e.					Check here if attachments.	

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) c 425 BRIDGE CREEK DRIVE		Policy Number:			
City State	ZIP Code 97502	Company NAIC Number			
CENTRAL POINT Oregon					
SECTION G COMMUNITY II					
The local official who is authorized by law or ordinance to administer to Sections A, B, C (or E), and G of this Elevation Certificate. Complete to used in Items G8-G10. In Puerto Rico only, enter meters.	he community's floodplain ma the applicable item(s) and sign	nagement ordinance can complete n below. Check the measurement			
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 loca or Zone AO.	ted in Zone A (without a FEM	A-issued or community-issued BFE)			
G3. The following information (Items G4–G10) is provided for co	mmunity floodplain managem	ent purposes,			
G4. Permit Number G5. Date Permit Issu	ed G6.	Date Certificate of Compliance/Occupancy Issued			
175-16-000349-DWL 11/30/201	6	TBD			
G7. This permit has been issued for:	Substantial Improvement				
G8. Elevation of as-built lowest floor (including basement) of the building:	<u>4</u> 5 ⊠ feet	meters Datum NAVD88			
G9. BFE or (in Zone AO) depth of flooding at the building site: 24	.2	meters Datum NAVD88			
G10. Community's design flood elevation:	3 7 × fee	meters Datum NAVD88			
Stermane Holtey CFM	Title Commi	unity Planner II			
Community Name	Telephone 541.00	04.3321, Ext. 244			
Signature Date 3/n2/17					
Comments (including type of equipment and location, per C2(e), if applicable)					
The Structure complies with CPMC 8,24					
Frood Damage Prevention requirements.					
		75.			
		Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

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City	State	ZIP Code	Company NAIC Number
CENTRAL POINT	Oregon	97502	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8, If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front



Photo Two Caption Rear

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Uni 425 BRIDGE CREEK DRIVE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
CENTRAL POINT	Oregon	97502	
If submitting more photographs than will with: date taken; "Front View" and "Re photographs must show the foundation with	fit on the preceding page, ear View"; and, if required th representative examples	affix the additional photogr I, "Right Side View" and of the flood openings or ver	raphs below. Identify all photographs "Left Side View." When applicable, ats, as indicated in Section A8,
	Photo	One	
Photo One Caption	Photo 0	One	
	Photo	Two	
F 1 1 - Table	1 11010		
	Photo	Two	
Photo Two Caption			