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 Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SEC	TION A - PROPERTY	INFO	RMATION		FOR INSU	RANCE COMPANY USE
A1. Building Owne WL Moore Constru						Policy Nun	nber:
A2. Building Stree Box No. 1501 Blackberry R		cluding Apt., Unit, Suite	e, and/o	or Bldg. No.) or P.O	. Route and	Company I	NAIC Number:
City Central Point	State Oregon					ZIP Code 97502	
		nd Block Numbers, Tax TL ; The North Village					
A4. Building Use (e.g., Residen	tial, Non-Residential, A	dditior	ı, Accessory, etc.)	Residential		
A5. Latitude/Longi	tude: Lat. 42	2.385000	ong	122.930308	Horizontal Datum	NAD	1927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	Certific	cate is being used t	o obtain flood insura	nce.	
A7. Building Diagra	am Number	9					
A8. For a building	with a crawls	pace or enclosure(s)					
a) Square foot	age of crawls	space or enclosure(s)		1,991 sq ft			
b) Number of	permanent flo	ood openings in the cra	wispac	e or enclosure(s) w	rithin 1.0 foot above a	adjacent gr	ade 15
c) Total net are	ea of flood op	penings in A8.b1,99	95 s	sq in			-
d) Engineered	flood openin	gs? 🗌 Yes 🕱 No)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	a) Square footage of attached garage 527 sq ft						
b) Number of p	ermanent flo	ood openings in the atta	 iched d	arage within 1.0 fo	ot above adiacent or	ade	0
		enings in A9.b		sq in	g.		
		2		- Oq 111			
d) Engineered flood openings? ☐ Yes ☒ No							
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communit City of Central Point		ommunity Number		B2. County Name			B3. State
City of Central Point	., 410092	1		Jackson			Oregon
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		RM Panel fective/	B8. Flood Zone(s)		e Flood Elevation(s) ne AO, use Base
41029C1768	F	01/19/2018		evised Date	AE		od Depth)
						12-40.0	
B10. Indicate the so	ource of the E	Base Flood Elevation (E	BFE) da	ata or base flood de	pth entered in Item E	39:	
▼ FIS Profile	FIRM [Community Determi	ned [Other/Source:			
B11. Indicate elevat	ion datum us	sed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988 🔲 Othe	r/Source:	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protect	ed Area (C	PA)? Tyes 🖾 No
Designation D				☐ OPA		,	
				_			

ELEVATION CERTIFICATE

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

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE		
uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 501 Blackberry Run Street			Policy Number:		
City Sta Central Point Ore		Code 502	Company NAIC Number		
SECTION C - BUILDING EL	EVATION INFORMA	TION (SURVEY RE	EQUIRED)		
	EVATION INFORMA on Drawings* Build onstruction of the build VE, V1–V30, V (with Eding diagram specified Vertical Datum tems a) through h) belowed by the season of the se	TION (SURVEY RE ilding Under Construing is complete. BFE), AR, AR/A, AR/A, in Item A7. In Puerto NAVD 88 NAVD 88 NAVD 88 N/A 1241 8 N/A 1241 5 1241 8 1241 6 CHITECT CERTIFIC hitect authorized by	Check the measurement used Check the measurement used Check the measurement used Feet meters Feet meters		
Farber and Son's Inc Address 431 Oak St City Central Point	State Oregon	ZIP Code 97502	OREGON FEBRUARY 8, 2000 RICHARD E. STEIN 49593PLS RENEWAL DATE: 06/30/2020		
Signature E	Date 10/05/2018	Telephone (541) 664-5599	NEREWAL DATE: 00/30/2020		
Copy all pages of this Elevation Certificate and all attachmen		ficial, (2) insurance ag	gent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e) - Heat Pump is lowest equipment servicing the struc					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspon			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, at 1501 Blackberry Run Street	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Central Point	State Oregon	ZIP Code 97502	Company NAIC Number
SECTION E – BUILDING E FOR ZOI	LEVATION INFO	RMATION (SURVEY NOT E A (WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certification	cate is intended to support a vailable. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1: Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest	d check the approp adjacent grade (L	oriate boxes to show whethe AG)	r the elevation is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet	s above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet meter	s above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided		
the diagrams) of the building is E3. Attached garage (top of slab) is			
E4. Top of platform of machinery and/or equipment			
servicing the building is E5. Zone AO only: If no flood depth number is available.	ble, is the top of the	e bottom floor elevated in acc	
			certify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER	R'S REPRESENTATIVE) CE	RTIFICATION
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ive who completes the statements in S	Sections A, B, and E for Zo Sections A, B, and E are corr	ne A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	's Name	11	
Address	С	ity Sta	ite ZIP Code
Signature	D	ate Tel	ephone
Comments			
			Check here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, St 1501 Blackberry Run Street	uite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City Central Point	State Oregon	ZIP Code 97502	Company NAIC Number	
SECTIO	N G - COMMUNITY INF	ORMATION (OPTIONAL	.)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the	e community's floodplain ne e applicable item(s) and s	nanagement ordinance can complete ign below. Check the measurement	
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	en from other documenta ad by law to certify elevat	tion that has been signed tion information. (Indicate	and sealed by a licensed surveyor, the source and date of the elevation	
G2. A community official completed Section or Zone AO.	on E for a building located	d in Zone A (without a FE	MA-issued or community-issued BFE)	
G3. The following information (Items G4-	G10) is provided for com	munity floodplain manage	ment purposes.	
G4. Permit Number	G5, Date Permit Issued		Date Certificate of Compliance/Occupancy Issued	
175-18-000161-DWL	05/23/	2018	101	
G7. This permit has been issued for:	New Construction S	ubstantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: 1241 8 The feet meters Datum MAVI 88				
G9. BFE or (in Zone AO) depth of flooding at ti	ne building site: 1240	5	et meters Datum WAVS 88	
G10. Community's design flood elevation:	124	<u>l 5</u> ⊠ fe	et meters Datum WAV D SS	
Local Official's Name		Title Tommunity F	Vanner II	
Justin Gindlesperger, Cl Community Name	1	Telephone	ITHICK III	
City of Central Point				
Signature	C	Date		
10/17/2018				
Comments (including type of equipment and location, per C2(e), if applicable)				
The structure complies with CPMC 8.24				
Flood Damage Prevention requirements.				
			Check here if attachments.	

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 1501 Blackberry Run Street	pt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City Central Point	State Oregon	ZIP Code 97502	Company NAIC Number

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

ELEVATION CERTIFICATE



Photo Two

Photo Two Caption Front/Right

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018 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. Policy Number: 1501 Blackberry Run Street

City State ZIP Code Company NAIC Number Central Point Oregon 97502

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption Front/Left



Photo Two

Photo Two Caption Rear