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.

SECTION A - PROPERTY INFORMATION					FOR INSU	JRANCE COMPANY USE	
A1. Building Owner's Name TWIN CREEKS DEVELOPMENT CO LLC				Policy Nur	mber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 450 EAGLE ROCK DRIVE						Company	NAIC Number:
	CENTRAL POINT Oregon 975						
A3. Property Des	cription (Lot a RTH VILLAGE	ind Block Numbers, Ta E AT TWIN CREEKS, F	x Parc PHASE	el Number, Legal D V	escription, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Long	itude: Lat. 4	2.385372	Long	-122,931314	Horizontal Datum	☐ NAD	1927 × NAD 1983
A6 Attach at leas	t 2 photograp	hs of the building if the	Certifi	icate is being used	to obtain flood insura	nce	
A7 Building Diagr	am Number	9					
A8. For a building	with a crawls	pace or enclosure(s)					
a) Square foo	tage of crawl	space or enclosure(s)		1,329 sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspa	ce or enclosure(s) v	vithin 1,0 foot above a	adjacent gr	ade 11
c) Total net ar	rea of flood or	penings in A8.b 1,4	63	sq in			
d) Engineered	l flood openin	gs? 🗌 Yes 🗵 No)				
A9. For a building	with an attach	ed garage:					
a) Square foo	tage of attach	ed garage 564		sq ft			
		od openings in the atta	ached o	garage within 1.0 fo	ot above adjacent or	ade	0
)	sq in	or above adjacent gri		
d) Engineered				- 39 111			
dy Engineered	nood opening	39, 1 1 62 X M	,				1
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communi City of Central Poin		ommunity Number		B2. County Name JACKSON			B3. State Oregon
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/	B8. Flood Zone(s)	(Zor	e Flood Elevation(s) ne AO, use Base
41029C1768	F	01/19/2018	09/14	evised Date /2016	AE	1240.5	d Depth)
		ase Flood Elevation (E			pth entered in Item B	9:	
B11. Indicate eleva	tion datum us	ed 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 Protecte	ed Area (O	PA)? Tyes X No
Designation Date: CBRS OPA							
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ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					EOD INCLIDANCE COMPANY LICE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				FOR INSURANCE COMPANY USE Policy Number:			
450 EAGLE ROCK DRIVE				•			
OFNITOAL BOILE		P Code	Cor	npany NAIC	Number		
		502					
SECTION C - BUILDING EL	EVATION INFORMA	ATION (SURV	EY REQUI	RED)			
C1. Building elevations are based on: Constructi		uilding Under C		* 🗵 Finis	hed Construction		
*A new Elevation Certificate will be required when o							
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the buil	ding diagram specified	d in Item A7. In	A, AR/AE, A Puerto Ric	AR/A1–A30, . o only, enter	AR/AH, AR/AO. meters.		
Benchmark Utilized: P-549	Vertical Datum						
Indicate elevation datum used for the elevations in i		OW.					
☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/							
Datum used for building elevations must be the sam	le as that used for the	BFE.	C	heck the me	easurement used.		
 a) Top of bottom floor (including basement, crawls) 	pace, or enclosure floo	r)1239		⊠ feet	meters		
b) Top of the next higher floor		1242	3	⊠ feet	☐ meters		
c) Bottom of the lowest horizontal structural member	er (V Zones only)	 N/A		_	_		
d) Attached garage (top of slab)	si (V Zories diliy)	1241	9	x feet	☐ meters		
e) Lowest elevation of machinery or equipment ser	viaina tha huildina	1242		⊠ feet	meters		
(Describe type of equipment and location in Corr	iments)	·		X feet	meters		
f) Lowest adjacent (finished) grade next to building	(LAG)	1241	1	x feet	meters meters		
g) Highest adjacent (finished) grade next to building	(HAG)	1241	2	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 CEI	RTIFICATI	ON			
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	veyor, engineer, or are	chitect authoriz	ed by law to	certify plays	ation information.		
Were latitude and longitude in Section A provided by a lice			No [Check here	if attachments.		
Certifier's Name	License Number	-		PEGI	STERED		
RICHARD E STEIN	49593PLS				SSIONAL		
Title SURVEYOR					URVEYOR		
			7	1 6	-1		
Company Name FARBER & SONS INC.			1	Icks !	ce		
Address					EGON		
431 OAK ST					RY 8, 2000 D E. STEIN		
CITY CENTRAL POINT	State Oregon	ZIP Code 97502		495	93PLS		
Stgnature CLAR ST	Date 01/11/2019	Telephone (541) 664-55	99	RENEWALD	ATE: 08/30/2020		
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community of			ompony and	(2) building augus		
Comments (including type of equipment and location, per		noiai, (2) maura	nce agenire	ompany, and	(3) building owner.		
C2(e) Heat pump is lowest equipment serving house.	Oz(e), ii applicable)						
, , , , , , , , , , , , , , , , , , , ,							
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ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suit 450 EAGLE ROCK DRIVE	Policy Number:		
CENTRAL POINT	Oregon 9	ZIP Code 97502	Company NAIC Number
SECTION E – BUILDIN FOR	IG ELEVATION INFORMA ZONE AO AND ZONE A (\	TION (SURVEY NOT WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Iter complete Sections A, B,and C. For Items E1–E4, enter meters.	ms E1-E5. If the Certificate is	s intended to support a	a LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1_ Provide elevation information for the following the highest adjacent grade (HAG) and the logary a). Top of bottom floor (including basement,	g and check the appropriate livest adjacent grade (LAG).	boxes to show whethe	r the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet meter	rs above or below the HAG.
crawlspace, or enclosure) is		feet meter	
E2. For Building Diagrams 6–9 with permanent fluther next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided in Sec	ction A Items 8 and/or	
E3. Attached garage (top of slab) is			
E4. Top of platform of machinery and/or equipme servicing the building is	ent	_	_
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	railable, is the top of the botto s	m floor elevated in acc he local official must o	cordance with the community's
	OWNER (OR OWNER'S RE		
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign her	entative who completes Sections. The statements in Section	ons A, B, and E for Zons 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 Representa			
Address	City	Sta	ate ZIP Code
Signature	Date	Tel	ephone
Comments		110	
4			
			Check here if attachments
			Check here if attachments.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 450 EAGLE ROCK DRIVE	uite, and/or Bldg. N	No.) or P.O. Route and B	ox No.	Policy Number:		
City CENTRAL POINT	State Oregon	ZIP Code 97502		Company NAIC Number		
SECTION	ON G - COMMUNI	TY INFORMATION (OP	TIONAL)			
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, er	i Certificate. Compl	ster the community's floo lete the applicable item(s	dplain mana s) and sign t	agement ordinance can complete pelow. 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 Zone AO.	on E for a building	located in Zone A (witho	ut a FEMA-	issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided fo	or community floodplain r	nanagemer	nt purposes.		
G4. Permit Number 175-18-000260-DWL	G5. Date Permit 09/05/2		G6 Da	te Certificate of mpliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction	ı	ement	lie de la companya de		
G8. Elevation of as-built lowest floor (including of the building:	basement)	1242 3	⊠ feet [meters Datum NAVD 88		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	1240 5	⊠ feet [meters Datum NAVD 88		
G10. Community's design flood elevation:	(-	12415	X feet	meters Datum KAV) 88		
Local Official's Name Title Tustin Gindlesparger, CFM Community Planner II						
Community Name City of Central Point Telephone 541.664.3321, x 245						
Signatu/re Date						
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

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apdress Control of the Approximation of the Building Approximation of the Appro	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 View 1/10/2019



Photo Two

Photo Two Caption Rear View 1/10/2019

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.				
Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:		
State	ZIP Code	Company NAIC Number		
Oregon	97502			
	Unit, Suite, and/or Bldg. No.) State	Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code		

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 Right Side View 1/10/2019



Photo Two Caption Left Side View 1/10/2019