DEPARTMENT OF HOMELAND SECURITY RAL SMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION					FOR INSURANCE COMPANY US	
A1. Building Owner's Name W.L. Moore Construction Inc.					Policy Number:	
A2. Building Street Address (including Ap 1436 N. Haskell Street	t., Unit, Suite, and/or Blo				Company NAIC Number:	
City Central Point		State OR	ZIP Code 975	02		
A3. Property Description (Lot and Block N Lot 30, The North Village at Twin Creeks F		mber, Legal Descri	ption, etc.)			
 A4. Building Use (e.g., Residential, Non-FA5. Latitude/Longitude: Lat. 42.385052 L A6. Attach at least 2 photographs of the b A7. Building Diagram Number 9 A8. For a building with a crawlspace or er a) Square footage of crawlspace or er b) Number of permanent flood opening or enclosure(s) within 1.0 foot abo c) Total net area of flood openings in d) Engineered flood openings? 	Long122.931683Horizionilding if the Certificate inclosure(s): enclosure(s) 15 enclosure(s)	contal Datum:	NAD 1927 NA tain flood insuran A9. For a buil a) Squar b) Numb within c) Total d) Engin	ce. ding with an attace re footage of attace rer of permanent 1.0 foot above a net area of flood eered flood open	iched garage <u>627</u> sq ft flood openings in the attached garage garaged	
SEC	CTION B - FLOOD IN	ISURANCE RAT	E MAP (FIRM)	INFORMATIO	N	
B1. NFIP Community Name & Community City of Central Point		32. County Name ackson			B3. State OR	
B4. Map/Panel Number B5. Suffix 41029C1768	B6. FIRM Index Date 05-03-11	e B7. FIRM Effective/Re 09-14-	vised Date	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zo AO, use base flood depth) 1241.6	
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/Source:						
SECTION)N C = BUILDING EL	-VAIRINI INI-LI				
		LVATION IN O	KINATION (30	NACI VEGOIV	(ED)	
C1. Building elevations are based on: *A new Elevation Certificate will be requ C2. Elevations ~ Zones A1–A30, AE, AH, A below according to the building diagram Benchmark Utilized: p 549 Indicate elevation datum used for the el Datum used for building elevations mus	Construction Draw uired when construction a (with BFE), VE, V1-V30 in specified in Item A7. In levations in Items a) thro	of the building is co 0, V (with BFE), AR n Puerto Rico only, Vertical Datum: No bugh h) below.	Building Under Complete. A AR/A, AR/AE, A enter meters. AVD 1988	onstruction* AR/A1-A30, AR/A AVD 1988 🗖 Ot	☑ Finished Construction AH, AR/AO. Complete Items C2.a-h	
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LEETATION VENTILIVATE; pa	yc 4						
IMPORTANT: In these spaces, co	opy the corresponding information from	n Section A.	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., 1436 N, Haskell Street	Unit, Suite, and/or Bldg. No.) or P.O. Route a	nd Box No.	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 C2(e). The lowest machine	ery servicing the building is the heat pump.						
Signature 7/17/2 Date 09-29-16							
	ATION 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 (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is							
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 Authorize	d Representative's Name						
Address	City	St	ate ZIP Code				
Signature	Date	Te	elephone				
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-G10. In Puerto Rico only, enter meters.							
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 (Item	ns G4–G10) is provided for community floodpla						
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of	Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction Substantial						
G8. Elevation of as-built lowest floor (in	cluding basement) of the building: 1244 . U		Datum NAV DSS				
G9. BFE or (in Zone AO) depth of flood		And the same of th	Datum NAV DRS				
G10. Community's design flood elevation	1142.6	Preet _ meters	Datum INAVDSS				
Local Official's Name	nie Holtey, CFM	Title Communi	ty Planner 1)				
Community Name City of Control Point Telephone 541. (ald 3321, Ext. 244)							
Signature State of Contraction Date 10/2/1/2							
reparte Hotter							
comments LAG 151.0-ft above BFE, & the top of bottom foor (C2a) is 0.3 ft							
unual chance flood eicuation & exceeds minimum Flood							
Samage Prevention regits in OPMC 8.24.							
The state of the s							

_EVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg 1436 N. Haskell Street	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 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.

Front View



Rear view

