## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program

Important: Read the instructions on pages 1-9.

	For Insurance Company Use:								
A1. Building Owner's Nam	Policy Number	.75% G.							
A2. Building Street Addres	Company NAIC Number								
1506 Daffodil Ave NE  City Orting State	WA ZIP Code	98360							
•	ot and Block Nu	mbers, Tax Parcel N	umber, Legal D	escription, etc.)					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Plat of River's Edge Phase 2B, Lot 159									
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential  A5. Latitude/Longitude: Lat. 47-7'6.69N Long. 122-13'20.73W 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 9  A8. For a building with a crawlspace or enclosure(s):  a) Square footage of crawlspace or enclosure(s) 1788 sq ft  b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 24 within 1.0 foot above adjacent grade 0  c) Total net area of flood openings? Nes No  d) Engineered flood openings? Yes No									
					IRM) INFORMATIO				
B1. NFIP Community Name Orting Town of/ 530138	e & Community N	lumber	B2. County Na Pierce	me		B3, State WA			
B4. Map/Panel Number 602/530138	B5. Suffix C	B6. FIRM Index Date 08-19-1987	Effective	FIRM Panel e/Revised Date 8-19-1987	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Z AO, use base flood depth) 142.2			
B10. Indicate the source of	the Base Flood E	levation (BFE) data	or base flood de	epth entered in It	em B9.				
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) <u>Asbuilt plans of River's Edge Phase 3B.</u>									
B11. Indicate elevation datu				☐ NAVD 1988					
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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.  Benchmark Utilized Pierce County #103-6T Vertical Datum NGVD29 Elevation=149.86  Conversion/Comments									
\					Check the measur				
<ul><li>a) Top of bottom floor</li><li>b) Top of the next high</li></ul>		nent, crawlspace, or	enclosure floor)		feet meters (Pue	• •			
, ,	ctural member (V Zo	nes only)	146,05						
d) Attached garage (t			144,55 ⊠ feet ☐ meters (Puerto Rico only)						
e) Lowest elevation o	f machinery or ed	uipment servicing the cation in Comments)	e building		feet meters (Pue				
		xt to building (LAG)		<u>143.4</u>	feet  meters (Pue	erto Rico onivi			
, ,		ext to building (HAG)			feet meters (Pue	**			
h) Lowest adjacent gr structural support	ade at lowest ele	vation of deck or sta	irs, including		feet  meters (Pue				
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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No  Certifier's Name David D. Salmon PLS.  License Number 35476  Title Owner Company Name NCS Surveying									
Certifier's Name David D. S			License Number 35476			.)			
Address 3930 South 352 <sup>nd</sup> Street City Auburn State WA ZIP Code 98001									
Signature	Se	Date 3	-17-2011	Telephone 25	3-835-4000	EXPIRES 'S S' [1]	2000		

	copy the corresponding inform		14,774	For Insurance Company Use:		
Building Street Address (including Ap 1506 Daffodil Ave NE	ot., Unit, Suite, and/or Bldg. No.) or P.O		100	licy Number		
City OrtingState WA ZIP Code 98	3360		[∍Co	mpany NAIC Number		
SECTIO	N D - SURVEYOR, ENGINEER, O	R ARCHITECT CERTIFIC	ATION (CONTIN	UED)		
	tificate for (1) community official, (2) in		<u> </u>			
Comments C2-e (hot water tank and	d furnace)					
Elevation of crawl space	3 ≈ 142.8					
Signature D. S.		Date 3-17-2011	AND A STATE OF THE	Check here if attachments		
	EVATION INFORMATION (SURV	EY NOT REQUIRED) FOR	ZONE AO AND			
and C. For Items E1-E4, use natura E1. Provide elevation information figrade (HAG) and the lowest ac a) Top of bottom floor (includin b) Top of bottom floor (includin E2. For Building Diagrams 6-9 with (elevation C2.b in the diagrams E3. Attached garage (top of slab) is E4. Top of platform of machinery a E5. Zone AO only: If no flood dept ordinance?  Yes No	g basement, crawlspace, or enclosure) g basement, crawlspace, or enclosure) permanent flood openings provided in s) of the building is □	ement used. In Puerto Rico of ate boxes to show whether the is feet is feet Section A Items 8 and/or 9 (seet meters above of below the is feet tottom floor elevated in accordant floor feetwated in Section in	only, enter meters. e elevation is above meters above meters above ee pages 8-9 of Ins he HAG. meters above of dance with the comon G.	e or below the highest adjacent we or ☐ below the HAG. we or ☐ below the LAG. tructions), the next higher floor G. r ☐ below the HAG. munity's floodplain management		
The property owner or owner's autho	rized representative who completes Se	ctions A, B, and E for Zone A	(without a FEMA-is			
or Zone AO must sign here. The star	tements in Sections A, B, and E are con	rect to the best of my knowle	dge.			
	zed Nepresentative s Ivanie		State			
Address		City		ZIP Code		
Signature		Date	Telephone			
Comments						
				☐ Check here if attachments		
	SECTION G - COMMUNI	Y INFORMATION (OPTIC	ONAL)			
	aw or ordinance to administer the community and sign	nunity's floodplain manageme	ent ordinance can c			
G1. The information in Section C	mplete the applicable item(s) and sign was taken from other documentation to elevation information. (Indicate the so	hat has been signed and seal	ed by a licensed su	rvevor, engineer, or architect who		
	ted Section E for a building located in Z			ued BFE) or Zone AO.		
	ems G4-G9) is provided for community			•		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certi	ficate Of Compliand	ce/Occupancy Issued		
G7. This permit has been issued for:	☐ New Construction ☐ Su	ostantial Improvement				
	including basement) of the building:		ers (PR) Datum			
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters (PR) Datum G10. Community's design flood elevation feet meters (PR) Datum						
G10. Community's design flood elevati		LI feet LI met	ais (PK) Datum	and a market		
Local Official's Name		Title				
Community Name		Telephone				
Signature		Date				
Comments						
				Check here if attachments		