

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

C.M.B. No. 3057-0077
Expires December 31, 2005

ORIGINAL

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME SCOTT AND BECCA MARTINSON		Policy Number
BUILDING STREET ADDRESS (including Apt. Unit, Sub, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 112 BEVER AVENUE NORTH EAST		Company Name/Num.
CITY GEE	STATE VA	ZIP CODE 26360

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

81976, 7074
Block(s) used (e.g., Residential, Non-Residential, Accessory, etc. Use a Comments area, if necessary.)

LATITUDE/LONGITUDE (OPTIONAL)
(lat. and long. of structure)

HORIZONTAL DATUM:
___ NAD 1987 ___ NAD 1983 SOURCE: ___ GPS (Type) ___ I/GSS Quad Map ___ Other

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

81. FIRM COMMUNITY NAME & COMMUNITY NUMBER CITY OF GEE, 530143	82. COUNTY NAME Gee	83. STATE Washington
84. MAP AND PANEL NUMBER 5301 13001 8	85. SURF-X DATE 9/27/1985	86. FIRM PANEL EFFECTIVE/REVISED DATE 9/27/1985
87. FIRM PANEL NUMBER 142	88. FLOOD ZONE(S) A2	89. BASE FLOOD ELEVATION(S) (Zone AC, use depth of flooding) 142

910. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in 89

B11. F10 Profile FIRM Community Determined Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No

Designation Date: _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

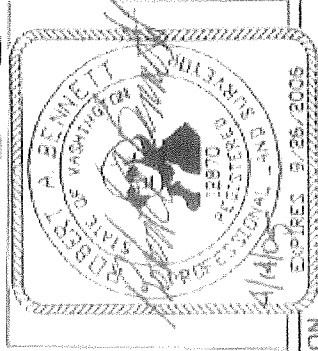
C1. Building elevations are based on: Construction Drawings Building Under Construction Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number: _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 5 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AF, ARA, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete items C3.a-i below according to the building diagram specified in item C2. State the datum used, if the datum is different from the datum used for the BFE in Section B. Convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided on the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum: _____ Conversion/Comments: _____

Elevation reference mark used: _____ Does the elevation reference mark used appear on the FIRM? Yes No

	a)	b)	c)	d)	e)	f)	g)	h)	i)
Top of bottom floor (including basement or enclosure)	173	79	ft. (m)						
Top of next higher floor	184	93	ft. (m)						
Bottom of lowest horizontal structural member (V zones only)	187	97	ft. (m)						
Attached garage (top of slab)									
Lowest elevation of machinery and/or equipment serving the building (Describe in a Comments area.)									
Low adjacent (finished) grade (LAD)	176	84	ft. (m)						
Highest adjacent (finished) grade (HAG)	187	97	ft. (m)						
No. or permanent openings (flood vents) within 1 ft. above adjacent grade									
Total area of all permanent openings (flood vents) in C3.h, 350 sq. in. (sq. cm)									



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certificate 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 in Sections A, B, and C 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

CERTIFIER'S NAME: ROBERT A. BENNETT
 TITLE: PROFESSIONAL ENGINEER
 COMPANY NAME: BENNETT P.S. & E. INC.
 ADDRESS: 12907 - 16TH STREET EAST
 CITY: STAUNTON VA STATE: VA ZIP CODE: 22630
 SIGNATURE: *Robert A. Bennett* DATE: 11-13-2005 TELEPHONE: 551-826-2286
 LICENSE NUMBER: 10870

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

For Insurance/Company Use

Policy Number

CITY

STATE

ZIP CODE

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

RM 1 - CHISELED "X" ON NORTHWESTERLY BOLT OF THE FIRE HYDRANT AT NORTHWEST CORNER OF MILL STREET AND BRIDGE STREET INTERSECTION, ESTABLISHED BY WESTERN AERIAL SURVEYS, INC. ELEVATION 197.45 - ALL HEATING IS FORCED AIR FROM THE CHIMNEY CLIENT STATES THE FURNACE IS IN THE ATTIC

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete items E1, through E5, if the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F. Section C must be completed.

E1. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed -- see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below

the top of the platform of machinery and/or equipment servicing the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below

(check one) the highest adjacent grade. (Use natural grade, if available.)

E5. For Zone AO only: If no floor depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? [Yes] [No] [Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of _____ knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

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 items) and sign below.

G1. _____ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of this 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 (Items G4-G6) is provided for community floodplain management purposes.

G4. PERMIT NUMBER _____ G5. DATE PERMIT ISSUED _____

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED _____

G7. This certificate has been issued for: _____ New Construction _____ Substantial Improvement

G8. Elevation of finished lowest floor (including basement) of the building is: _____

G9. BFE (or Zone AO) depth of flooding at the building site is: _____

_____ ft. (m)

_____ ft. (m)

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY

TELEPHONE

SIGNATURE

DATE

COMMENTS

_____ [Check here if attachments

FEMA F 3-1 January 2003

Replaces all previous editions