

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>GARY DORNING</u>		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>1272 SW SYLVENUS ST.</u>		Policy Number
City <u>CHEHALIS</u> State <u>WA</u> ZIP Code <u>98532</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 20, BLOCK 6 RIVERSIDE ADDN. OF CHEHALIS SE 1/4 31-T14N, R2W W.M.</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>46°39'12.1"</u> Long. <u>122°58'37.8"</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u># 6</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>834_sq ft</u>		a) Square footage of attached garage <u>528</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>13</u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>2</u>
c) Total net area of flood openings in A8.b <u>2118</u> sq in		c) Total net area of flood openings in A9.b <u>346</u> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Chehalis 530104</u>		B2. County Name <u>Lewis</u>		B3. State <u>Washington</u>	
B4. Map/Panel Number <u>530104</u> <u>1363</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>5/1/1988</u> <u>7/17/2006</u>	B7. FIRM Panel Effective/Revised Date <u>5/1/1988</u> <u>7/17/2006</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>181.5</u>

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 (Describe) \_\_\_\_\_

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other (Describe) \_\_\_\_\_

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-g below according to the building diagram specified in Item A7.  
 Benchmark Utilized N532 Vertical Datum NAVD83  
 Conversion/Comments USED CORPSCON TO CONVERT TO NGVD Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>179.95</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>188.77</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>179.95</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>NA</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>176.27</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>179.17</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## 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.

Certifier's Name <u>Alan G Grant</u>	License Number <u>WA PLS 33129</u>
Title <u>Professional Land Surveyor</u>	Company Name <u>Grant &amp; Associates Surveying</u>
Address <u>P.O. Box 878</u>	City <u>Castle Rock</u> State <u>WA</u> ZIP Code <u>98611</u>
Signature <u>Alan G Grant</u>	Date <u>03/04/2008</u> Telephone <u>(360) 274-6842</u>



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	For Insurance Company Use:
Building-Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1272 SW Sylvanus St,	Policy Number
City Chehalis State WA ZIP Code 98532	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 Finished construction. Used WA DOT BM N532 with established NAVD83 elevation of 185.28 which was converted to NGVD29 using CORPSCON Software for an elevation of 181.88'. Site BM is top of 1" x 2" hub at grade near the electrical service pole at the Southeast corner of site painted orange. Elevation = 178.98 NGVD29. Base Flood elevation of 181.5' scaled from FIRM. Item A8c includes area of 2 large city required flood vents (area = 3460 sq. in.) Item A9(c) includes area of large city required flood vent ( area = 774 s. in.) No machinery, appliances or equipment at elevation of the enclosure floor.

Signature \_\_\_\_\_ Date 03/04/2008  Check here if attachments

**SECTION E - BUILDING ELEVATION 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 (HAG) and the lowest adjacent grade (LAG).  
 a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.  
 b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood 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, 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 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 item(s) and sign below. Check the measurement used in Items G8. and G9.

- 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 (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

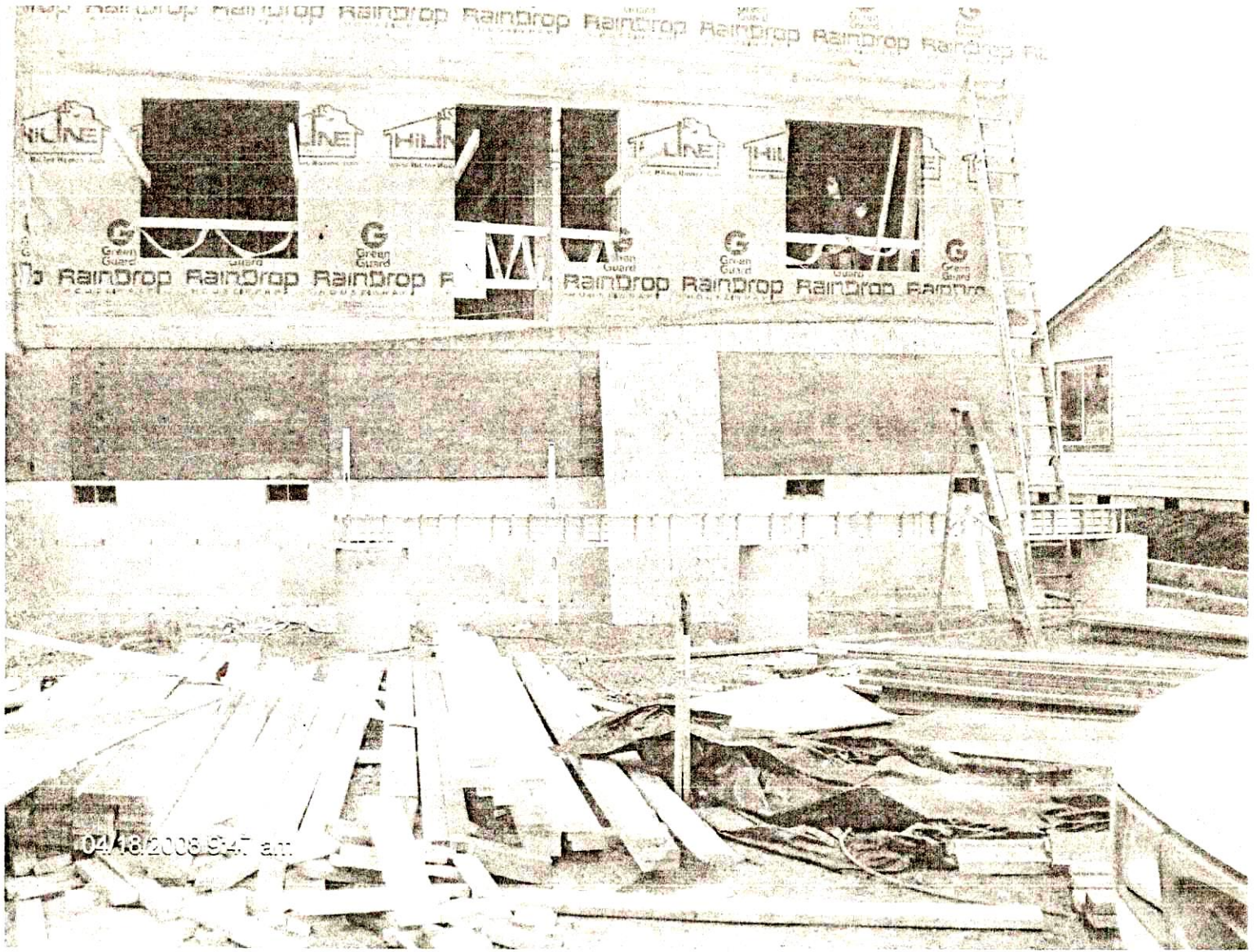
Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1272 SW SYLVENUS ST	For Insurance Company Use:
City CHEHALIS State WA ZIP Code 98532	Policy Number
Company NAIC Number	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



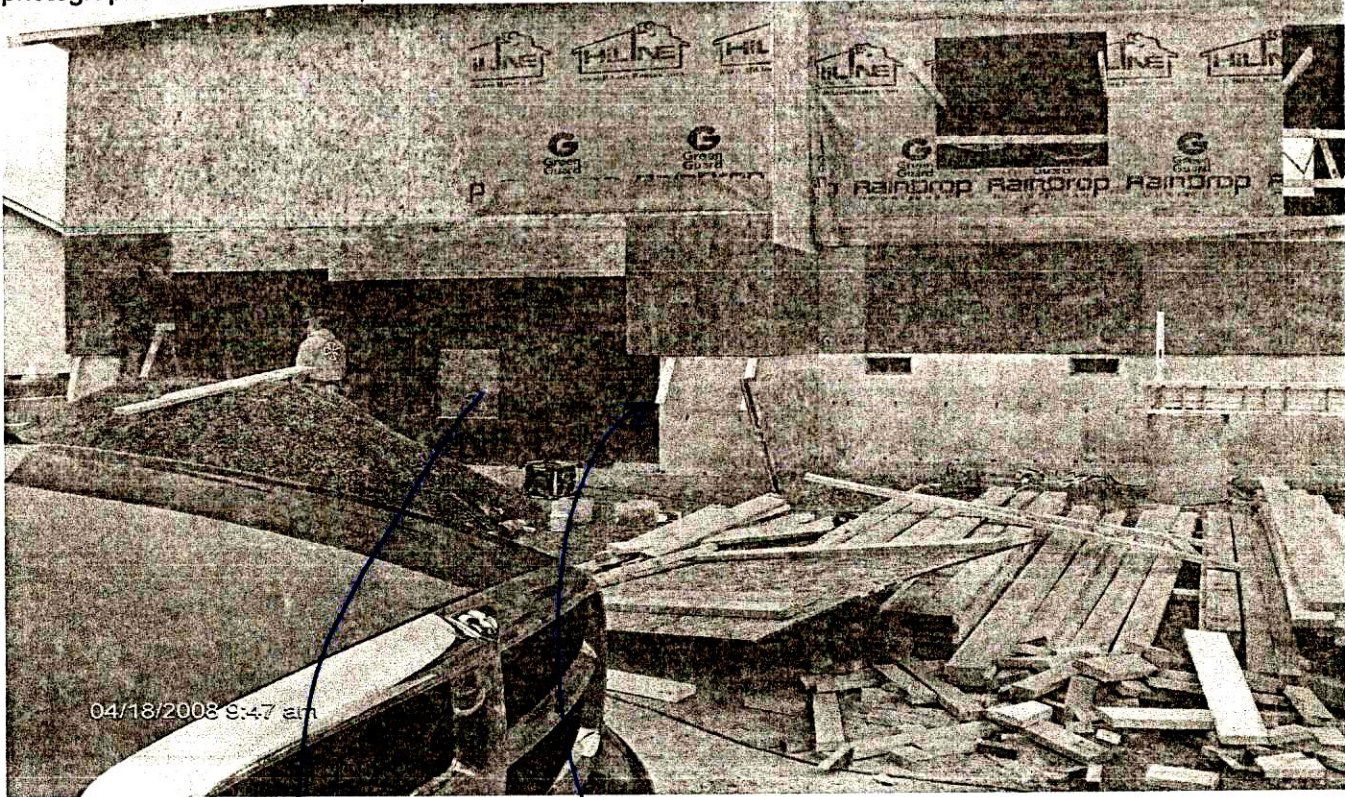
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# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1272 SW SYLVENUS ST	For Insurance Company Use: Policy Number
City CHEHALSI State WA ZIP Code 98532	Company NAIC Number

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."



Front

37" x 42"  
Back #1

INSIDE WALL  
34" x 40"

BACK = 37" x 42"  
#2

Garage = 528<sup>sq ft</sup>

2914 sq. in openings  
(Back #1 + inside wall)

House = 884

2914 sq in openings  
(Back #2 + inside wall)

