

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

AUG 22 2016 *[Signature]*

OMB Control Number: 1660-0008
Expiration: 11/30/2018

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

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		FORM INSURANCE COMPANY USE
A1. Building Owner's Name BASS ENTERPRISES INC		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 620 NW ARKANSAS WAY		Company NAIC Number:
City CHEHALIS	State WA	Zip Code 98532
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LEWIS COUNTY PARC. NO. 005605826003-TRACT 6C OF BSP AFN 3426967		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		
A5. Latitude/Longitude: Lat. 46°40'41.52" Long. 122°58'27.02" Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 1-B _____		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) NA _____ sq ft		a) Square footage of attached garage NA _____ sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b NA _____ sq in		c) Total net area of flood openings in A9.b NA _____ sq in
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP Community Name & Community Number CHEHALIS -- 530104		B2. County Name LEWIS COUNTY
		B3. State WA
B4. Map/Panel Number 530104 1361	B5. Suffix C	B6. FIRM Index Date 07/17/2006
B7. FIRM Panel Effective/ Revised Date 07/17/2006	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth 179.7 (NAVD 88)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input checked="" type="radio"/> FIS Profile <input type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____		
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)		
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input checked="" type="radio"/> Building Under Construction* <input type="radio"/> Finished Construction		
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. In Puerto Rico only, enter meters. * A new Elevation Certificate will be required when construction of the building is complete.		
Benchmark Utilized: SC 2005		Vertical Datum: NAVD 88
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____		
Datum used for building elevations must be the same as that used for the BFE.		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	178 - 35	<input checked="" type="radio"/> feet <input type="radio"/> meters
b) Top of the next higher floor	NA -	<input checked="" type="radio"/> feet <input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	NA -	<input checked="" type="radio"/> feet <input type="radio"/> meters
d) Attached garage (top of slab)	NA -	<input checked="" type="radio"/> feet <input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	178 - 3	<input checked="" type="radio"/> feet <input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	177 - 2	<input checked="" type="radio"/> feet <input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	177 - 9	<input checked="" type="radio"/> feet <input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	NA -	<input checked="" type="radio"/> feet <input type="radio"/> meters

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620 NW ARKANSAS WAY

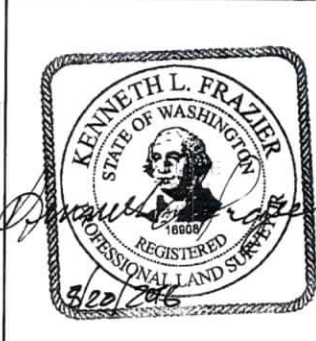
CHEHALIS

WA

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.

Were latitude and longitude in Section A provided by a licensed land surveyor?
 Yes No



Certifier's Name: KENNETH L. FRAZIER License Number: LS 16908
Title: PROFESSIONAL LAND SURVEYOR Company Name: FORESIGHT SURVEYING, INC
Address: 1583 N. NATIONAL AVE City: CHEHALIS State: WA Zip Code: 98532
Signature: [Signature] Date: 08/20/2016 Telephone: +1 (360) 748-4000

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable) THE BUILDING IS UNDER CONSTRUCTION SO THE OUTSIDE GRADES ARE NOT FINAL. THIS IS A SLAB ON GRADE WITH THE FLOOR LEVEL BEING ABOVE THE OUTSIDE GRADE ON ALL SIDES. THE CONSTRUCTION OF THE BUILDING IS FLOOD PROFFED AT OR ABOVE THE BASE FLOOD ELEVATION OF 179.7 FEET (NAVD 88 DATUM). THE STRUCTURE IS ON FILL MATERIAL THE ORIGINAL GRADE BEING APROXIMATELY 168 FEET (NAVD 88 DATUM).

Signature: [Signature] Date: 8/22/2016

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, crawlspace, or enclosure) is _____ - _____ feet meters above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ feet meters above or below the LAG.
E2. For Building Diagrams 6 -9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8 -9 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 or Owner's Authorized Representative's Name:
Address City State ZIP Code
Signature Date Telephone

Comments

Check here if attachments.

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BUILDING PHOTOGRAPHS

See instructions for Item A6

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IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 620 NW ARKANSAS WAY	Policy Number:
City CHEHALIS State WA Zip Code 98532	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 FROM SOUTHWEST



FRONT VIEW FROM SOUTHEAST



REAR VIEW FROM NORTHEAST