#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

**Important:** Follow the instructions on pages 1–9.

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	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name	Policy Number:					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and						
I BOY NO	Company NAIC Number:					
103 Sount thoy 101						
City WARRENTON OREGON []	ZIP Code 97146					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PORTION of BLOCKS 2,344" MERIWETHER" TON, ROW, SEC 23 CB WIN						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)いいっこう	SIDENTIAL					
A5. Latitude/Longitude: Lat. 46.162259 Long123.398047 Horizontal Datu	m: ☐ NAD 1927 🛛 NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance.					
A7. Building Diagram Number <u>I A</u>						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abov	e adjacent grade					
c) Total net area of flood openings in A8.b sq in						
d) Engineered flood openings?						
A9. For a building with an attached garage:						
a) Square footage of attached garage sq ft						
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 A9.b						
d) Engineered flood openings? Yes No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number  B2. County Name	B3. State					
40033 CAYOF WARRENTON CLATSOP	OR 9					
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood B9. Number Date Effective/ Zone(s)	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)					
Revised Date						
41007 90217 3/17/2010 9/17/2010 AE	12.00					
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:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 💢 No						
Designation Date: CBRS DPA						

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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.	Policy Number:						
103 SOUTH HWY 101							
City State ZIP Code WARRENTOOL 97146	Company NAIC Number						
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. In Puerto Rico only, enter meters.  Benchmark Utilized: O4O 01466 Vertical Datum: 13.64							
Indicate elevation datum used for the elevations in items a) through h) below.							
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)して、こち	\( \sum_{\text{feet}} \) meters						
b) Top of the next higher floor							
c) Bottom of the lowest horizontal structural member (V Zones only)	feet meters						
d) Attached garage (top of slab)							
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	feet meters						
f) Lowest adjacent (finished) grade next to building (LAG)	feet						
g) Highest adjacent (finished) grade next to building (HAG)	[X] feet						
h) Lowest adjacent grade at lowest elevation of deck or stairs, including     structural support	feet meters						
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIF	ICATION						
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 1,001.							
Were latitude and longitude in Section A provided by a licensed land surveyor? XYes \( \subseteq \text{No} \)	Check here if attachments.						
Certifier's Name  License Number  DAVID A. FOSKER OPUS 1934	REGISTERED						
Title OWNER / PRESIDENT	PROFESSIONAL LAND SURVEYOR						
Company Name / FOSTER SUWEYING INC	Jon Coff 1142						
Address 3517 5= 1937 Ave  City State ZIP Code	OREGON DECEMBER 16, 1980 DAVID A. FOSTER 1934						
CAMAS 1 WA. 5 48607	RENEWS: 12-31-21						
Signature Date Telephone Ext. 1/12/20 S03-997-1100							
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments (including type of equipment and location, per C2(e), if applicable)							

## **BUILDING PHOTOGRAPHS**

ELEVATION CERTIFICATE See Instructions for Item A6.

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186000					
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.					Policy Number:
City	03 Sount Huy	V			
City	1110 000	Stat	te ZIP (	Code	Company NAIC Number
	WARRENTON	OL	Y G	7146	

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.



Photo One

Photo One Caption LOOKING SOUTHWESTARLY - NE SIDE BUILD ING

Clear Photo One



Photo Two

Photo Two Caption

LOOKING NORTHEASTERLY

Sountwasterly TAGE B

Clear Photo Two

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Replaces all previous editions.

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## **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City

State

ZIP Code

Q 7 1 46

FOR INSURANCE COMPANY USE

FOR INSURANCE COMPANY USE

FOR INSURANCE COMPANY USE

FOR INSURANCE COMPANY USE

Policy Number:

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption LOOKING

LOOKING EASTERLY - NORTHWESTERLY FACE BUILD

Clear Photo Three

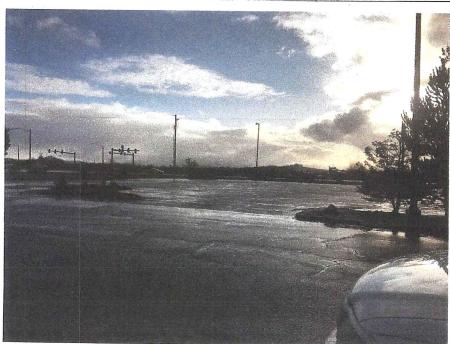


Photo Four

Photo Four Caption

NORTHE ASTERLY PARLING

ING LOT - LOCATION PROPOSED NEW

SMUCTURE

Clear Photo Four

Replaces all previous editions.

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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.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

103 Sound Huy 101

City State ZIP Code 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.



FUE

Photo One

Photo One Caption LOOKING NORTHWES

**ELEVATION CERTIFICATE** 

SOUTHEASTERLY CORNER BUND.

Clear Photo One



Photo Two

Photo Two Caption

LOOKING NORTHWESTERLY-

Replaces all previous editions.

Clear Photo Two

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