

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name Randolph Arnold		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1525 Angelina Way		Company NAIC Number:	
City Missoula		State MT	ZIP Code 59808
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax ID 0004311524; geocode 04-2199-14-4-03-28-0000, Lot 33, Riverwal Estates			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential			
A5. Latitude/Longitude: Lat. <u>46-53-02.8N</u> Long. <u>114-05-16.1W</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>9</u>			
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)	<u>1600</u> sq ft	a) Square footage of attached garage	<u>813</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>0</u>	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	<u>na</u>
c) Total net area of flood openings in A8.b	<u>0</u> sq in	c) Total net area of flood openings in A9.b	<u>na</u> sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Unincorporated 300048		B2. County Name Missoula		B3. State Montana	
B4. Map/Panel Number 1190	B5. Suffix D	B6. FIRM Index Date Aug 16, 1988	B7. FIRM Panel Effective/Revised Date Dec 2, 2011	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 3134.3

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: LOMR 11-08-0184P-HDR Study

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: _____

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: <input checked="" type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input type="checkbox"/> 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: <u>Msla CORS</u> Vertical Datum: <u>NAVD88 conv to NGVD29</u> Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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)	<u>3142.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>3145.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3144.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3142.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3143.2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3143.2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>3143.2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

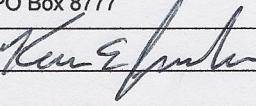
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. *I certify that the information on this Certificate represents my best efforts to interpret the data available.*
I understand that any false statement may be punishable 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
 Check here if attachments. licensed land surveyor? Yes No

Certifier's Name **Ken E Jenkins** License Number **9330LS**

Title **President** Company Name **Montana Northwest Company**

Address **PO Box 8777** City **Missoula** State **MT** ZIP Code **59807**

Signature  Date **5/8/2014** Telephone **406-721-4033**

