

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Dave &amp; Pam Smith</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>Angelina Way</u>		Policy Number
City <u>Missoula</u>	State <u>MT</u>	ZIP Code <u>59808</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 1, Riverwalk Estates</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 46d53'02"</u> Long. <u>W 114d05'21"</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): a) Square footage of crawlspace or enclosure(s) <u>2760</u> sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>n/a</u> c) Total net area of flood openings in A8.b _____ sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		A9. For a building with an attached garage: a) Square footage of attached garage <u>814</u> sq ft b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>n/a</u> c) Total net area of flood openings in A9.b _____ sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

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

B1. NFIP Community Name & Community Number <u>Missoula County 300048</u>		B2. County Name <u>Missoula</u>	B3. State <u>MT</u>		
B4. Map/Panel Number <u>30063C1190</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>Aug 16 1988</u>	B7. FIRM Panel Effective/Revised Date <u>Aug 16, 1988</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>3138.0 DNRC STUDY</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe) <u>DNRC Study for Grant Creek</u>					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> 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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.  
Benchmark Utilized MSOL Vertical Datum NAVD88  
Conversion/Comments GPS Observation

	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>3142.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>3148.5</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>3147.3</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 and location in Comments) <u>3142.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>3146.5</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>3147.3</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>3146.5</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

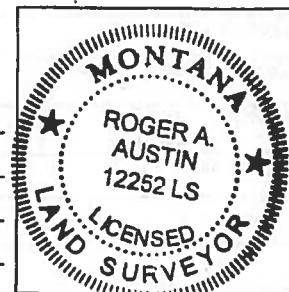
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.

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

Certifier's Name <u>Roger A. Austin</u>		License Number <u>12252 S</u>	
Title <u>Professional Land Surveyor</u>		Company Name <u>Professional Consultants Inc.</u>	
Address <u>3115 Russell St.</u>		City <u>Missoula</u>	
State <u>MT</u>		ZIP Code <u>59806</u>	
Signature <u>[Signature]</u>		Date <u>7-02-09</u>	
		Telephone <u>406-728-1880</u>	



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>For Insurance Company Use:</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Angelina Way			Policy Number
City Missoula	State MT	ZIP Code 59808	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

Elevation data show hereon is from information provided by owner and is not surveyed asbuilt information. BFE show are Community determined not from the 1988 FIS.

Signature

Date

7-02-09

☐ 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, 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'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 \_\_\_\_\_

G10. Community's design flood elevation \_\_\_\_\_ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>Travis Walker</u>	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>Angelina Way</u>	Company NAIC Number	
City <u>Missoula</u>	State <u>MT</u>	ZIP Code <u>59808</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 2, Riverwalk Estates</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 46d53'03"</u> Long. <u>W 114d05'19"</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):		
a) Square footage of crawlspace or enclosure(s) <u>2095</u> sq ft		
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>n/a</u>		
c) Total net area of flood openings in A8.b _____ sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage <u>1204</u> sq ft		
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>n/a</u>		
c) Total net area of flood openings in A9.b _____ sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

B1. NFIP Community Name & Community Number <u>Missoula County 300048</u>		B2. County Name <u>Missoula</u>		B3. State <u>MT</u>	
B4. Map/Panel Number <u>30063C1190</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>Aug 16 1988</u>	B7. FIRM Panel Effective/Revised Date <u>Aug 16, 1988</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>3138.2 DNRC STUDY</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe) <u>DNRC Study for Grant Creek</u>					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> 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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.  
Benchmark Utilized MSOL Vertical Datum NAVD88  
Conversion/Comments GPS Observation

		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3143.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>3148.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>3148.0</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 and location in Comments)	<u>3143.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3147.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>3148.0</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>3147.7</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

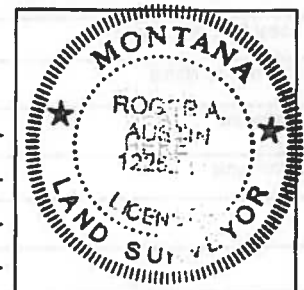
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.

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

Certifier's Name <u>Roger A. Austin</u>		License Number <u>12252 S</u>	
Title <u>Professional Land Surveyor</u>		Company Name <u>Professional Consultants Inc.</u>	
Address <u>3115 Russell St.</u>		City <u>Missoula</u>	State <u>MT</u>
Signature		ZIP Code <u>59806</u>	Telephone <u>406-728-1880</u>
Date <u>4-24-09</u>			



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>For Insurance Company Use:</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			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

Elevation data show hereon is from information provided by owner and is not surveyed asbuilt information. BFE show are Community determined not from the 1988 FIS.

Signature

Date

4-24-09

☐ 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, 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 8-9 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'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 \_\_\_\_\_

G10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments



# 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 <b>TRAVIS WALKER</b>	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1609 ANGELINA WAY</b>	Policy Number
City <b>MISSOULA</b> State <b>MT</b> ZIP Code <b>59808</b>	Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

**LOT 3 RIVERWALK ESTATES, T13N R20W SECTION 14 MISSOULA COUNTY, MT**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **46 53 03.371** Long. **114 05 20.388**

Horizontal Datum: ☐ NAD 1927 ☒ 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 **8**

A8. For a building with a crawl space or enclosure(s), provide

- a) Square footage of crawl space or enclosure(s) **1500** sq ft  
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade **0**  
c) Total net area of flood openings in A8.b **0** sq in

A9. For a building with an attached garage, provide:

- a) Square footage of attached garage **462** sq ft  
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade **0**  
c) Total net area of flood openings in A9.b **0** sq in

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

B1. NFIP Community Name & Community Number <b>UNINCORPORATED AREAS 300048</b>		B2. County Name <b>MISSOULA</b>		B3. State <b>MT</b>	
B4. Map/Panel Number <b>30063C1190</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>AUGUST 16, 1988</b>	B7. FIRM Panel Effective/Revised Date <b>AUGUST 16, 1988</b>	B8. Flood Zone(s) <b>X</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>3137.4</b>

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) **100-year flood elevation of Grant Creek by DNRC**

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 **PID-DE8232(MISSOULA CORS)** Vertical Datum **NAVD88**  
Conversion/Comments \_\_\_\_\_

Check the measurement used.

- a) Top of bottom floor (including basement, crawl space, or enclosure floor) **3142.97** ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor **3147.37** ☒ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) \_\_\_\_\_ ☐ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) **3146.20** ☒ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) **3146.20** ☒ feet ☐ meters (Puerto Rico only)  
f) Lowest adjacent (finished) grade (LAG) \_\_\_\_\_ ☐ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade (HAG) \_\_\_\_\_ ☐ feet ☐ 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.

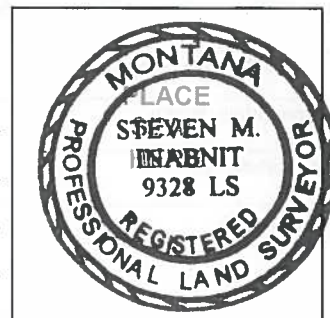
☒ Check here if comments are provided on back of form.

Certifier's Name **Steven M. Inabnit** License Number **MT 9328LS**

Professional Land Surveyor Company Name **Eli & Associates, Inc.**

Address **5475 Alloy South** City **Missoula** State **MT** ZIP Code **54808**

Signature **Steven M. Inabnit** Date **3/7/2008** Telephone **406-549-5022**



**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.  
1609 ANGELINA WAY

City MISSOULA State MT ZIP Code 59808

For Insurance Company Use:

Policy Number

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 Elevations for C2.a-e obtained from Architectural plans



Signature

3/7/2008

Date

☐ 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

Steven M. Inabnit

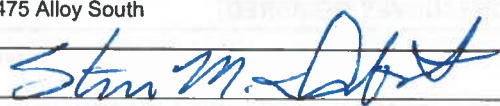
Address 5475 Alloy South

City Missoula

State MT

ZIP Code 59808

Signature



Date

3/7/2008

Telephone 406-549-5022

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

G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. 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