

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 SBI Leasing Inc.				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 700 E. Broadway				Company NAIC Number:	
City Missoula		State Montana		ZIP Code 59802	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) MCWHIRK ADDITION, S22, T13 N, R19 W, BLOCK 18, Lot 6 - 10, W2 OF ALL & VAC ALLEY ADJ					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Non-Residential</u>					
A5. Latitude/Longitude: Lat. <u>46°52'11.70"N</u> Long. <u>113°59'6.38"W</u> 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 <u>5</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>254.10</u> sq ft					
b) Number 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 <u>N/A</u> sq in					
d) Engineered flood openings? ☐ Yes ☒ No					
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 _____ sq in					
d) Engineered flood openings? ☐ Yes ☐ No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number City of Missoula 300049			B2. County Name Missoula		B3. State Montana
B4. Map/Panel Number 30063C1480	B5. Suffix E	B6. FIRM Index Date 07-06-2015	B7. FIRM Panel Effective/ Revised Date 07-06-2015	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 3195.6'
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 ☐ OPA					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 700 E. Broadway			Policy Number:
City Missoula	State Montana	ZIP Code 59802	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: WGM TBM Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

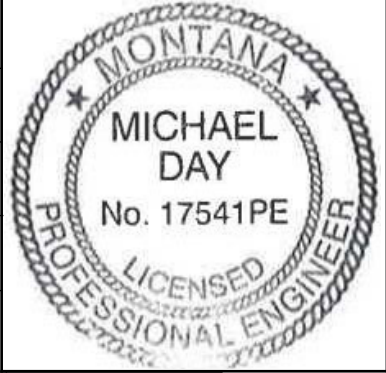
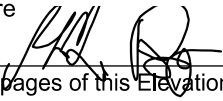
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3197.9</u>	☒ feet	☐ meters
b) Top of the next higher floor	<u>3201.9</u>	☒ feet	☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	☐ feet	☐ meters
d) Attached garage (top of slab)	<u>N/A</u>	☐ feet	☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3196.9</u>	☒ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3195.1</u>	☒ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3202.0</u>	☒ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>3192.4</u>	☒ feet	☐ 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No ☐ Check here if attachments.

Certifier's Name Mike Day, P.E.		License Number 17541PE		
Title Project Engineer				
Company Name WGM Group, Inc.				
Address 1111 East Broadway				
City Missoula	State Montana	ZIP Code 59802		
Signature 	Date 01/14/21	Telephone (406) 728-4611	Ext. N/A	
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) C2. e) Machinery Type - Compressor				

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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700 E. Broadway

City
Missoula

State
Montana

ZIP Code
59802

FOR INSURANCE COMPANY USE

Policy Number:

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.



Photo One Caption West Side Main Building Entrance

Clear Photo One



Photo Two Caption East Side of Building with Equipment Location in Cropout

Clear Photo Two

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BUILDING PHOTOGRAPHS

Continuation Page

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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.
700 E. Broadway

Policy Number:

City
Missoula

State
Montana

ZIP Code
59802

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 Caption South Side of Building showing Rattlesnake Creek

Clear Photo Three



Photo Four Caption LAG at Southeast Pier

Clear Photo Four