ELEVATION CERTIFICATE

Important: Read the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION

A1. Building Owner’s Name

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
338 Lolo Trail Avenue

City Woodland State WA ZIP Code 98674

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 14, Mewherter Subdivision, (Vol. 14, Pg. 54)

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

A5. Latitude/Longitude: Lat. 45° 55’ 27.19” Long. -122° 44’ 07.87”
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 9

A8. For a building with a crawlspace or enclosure(s):
   a) Square footage of crawlspace or enclosure(s) 1500 sq ft
   b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 22
   c) Total net area of flood openings in A8b 2512 sq in
   d) Engineered flood openings? ☐ Yes ☑ No

A9. For a building with an attached garage:
   a) Square footage of attached garage 400 sq ft
   b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
   c) Total net area of flood openings in A9b 0 sq in
   d) Engineered flood openings? ☐ Yes ☑ No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
City of Woodland 530035

B2. County Name
Cowlitz

B3. State
WA

B4. Map/Panel Number 001

B5. Suffix C

B6. FIRM Index Date Dec. 20, 2001

B7. FIRM Panel Effective/Revised Date Sept. 4, 1985

B8. Flood Zone(s) A15

B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 33.5

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

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.


Benchmark Utilized: RM4
Vertical Datum: NGVD 1929

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) 34.5 feet
b) Top of the next higher floor 37.2 feet
c) Bottom of the lowest horizontal structural member (V Zones only) NA
        feet
d) Attached garage (top of slab) NA
        feet
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) NA
        feet
f) Lowest adjacent (finished) grade next to building (LAG) 35.7 feet
g) Highest adjacent (finished) grade next to building (HAG) 38.1 feet
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support NA
        feet

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.C. 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
☒ Check here if attachments.

Certifier’s Name Howard S. Richardson License Number 38485

Title PLS Company Name Olson Engineering, Inc.
Address 1111 Broadway City Vancouver State WA ZIP Code 98660

Signature Date 05/14/13 Telephone 360-695-1385

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SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Comments: A5 was taken from GoogleEarth and field verified. The garage floor was not poured nor equipment servicing the structure in during the site visit.

Signature: ____________________________  Date: 05/14/13

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 building floor (including basement, crawl space, or enclosure) is ______ feet ______ meters ______ above or ______ below the HAG.
   b) Top of building floor (including basement, crawl space, 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 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–G10. In Puerto Rico only, enter meters.

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–G10) is provided for community floodplain management purposes.


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 Datum ______

G9. BFE or (in Zone AO) depth of flooding at the building site: ______ feet ______ meters Datum ______

G10. Community’s design flood elevation: ______ feet ______ meters Datum ______

Local Official’s Name: ____________________________  Title: ____________________________

Community Name: ____________________________  Telephone: ____________________________

Signature: ____________________________  Date: ____________________________

Comments: ____________________________  □ Check here if attachments

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