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

7-77					iolal, (2) ilisurance a		any, and (3) building owne
A P TI O I II				FOR INSURANCE COMPANY US			
A1. Building Owner's Name LGI Homes					Policy Nur	mber:	
A2. Building Street Address (including Apt. Unit. Suite, and/or Bldg, No.) or P.O. Boute and				Company NAIC Number:			
City				State		ZIP Code	
Woodland				Washington		98674	
A3. Property Des	cription (Lot a	and Block Numbers, Ta	x Parc	el Number, Legal D	escription, etc.)		
Lot 12, Meriweth	er Hilltop PH.	1, Ph. 1B (Vol. 14, Pg	. 118				
A4. Building Use	(e.g., Resider	ntial, Non-Residential,	Additio	n, Accessory, etc.)	Residential		
A5. Latitude/Long	itude: Lat. 4	5°55'32.82"	Long.	-122°44'18.31"	Horizontal Datum	: NAD	1927 × NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	ance.	
A7. Building Diagr		9					
A8. For a building	with a crawls	space or enclosure(s):					
W 1877		space or enclosure(s)		1,124 sq ft			
					ishin 4 O for at all a		
		ood openings in the cra			vitnin 1.0 foot above	adjacent gi	rade15
			55	sq in			
d) Engineered	flood openin	ngs? 🗌 Yes 🗵 N	0				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garage 400		sq ft			
		ood openings in the att			at about adianati		
			acrieu	garage within 1.0 to	ot above adjacent g	rade	0
c) Total net ar	ea of flood op	penings in A9.b	0	sq in			
d) Engineered	flood openin	gs? ☐ Yes ⊠ N	0				
	95	CTION B - EL OOD IN	ICIDA	NCE DATE MAD	(FIDM) INFORMA	TION!	
B1. NFIP Communi		CTION B - FLOOD IN	VOURA	T		ION	
City of Woodland 5		ommunity Number		B2. County Name			B3. State Washington
		Г	1	Cowlitz			vvasnington
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		IRM Panel ffective/	B8. Flood Zone(s)		se Flood Elevation(s) ne AO, use Base
				evised Date	A.E.	Floo	od Depth)
53015C0886	G	12/15/2016	12/15	5/2016	AE	37.1'	
B10. Indicate the se	ource of the E	Base Flood Elevation (I	BFE) da	ata or base flood de	nth entered in Item	RO:	
		Community Determ			par ontoroa in non	50.	
				_	VD 4000	10	
DIT. IIIdicate eleva	tion datum us	sed for BFE in Item B9:	IN	GAD 1958 X MY	VD 1988 Othe	er/Source:	
B12. Is the building	located in a	Coastal Barrier Resour	rces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	PA)? ☐ Yes ⊠ No
Designation D				OPA			

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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. 1711 Blacktail Lane			Policy Number:				
	Table	Code 674		Company	NAIC	Number	
SECTION C - BUILDING E	LEVATION INFORMA	TION (SURV	EY RE	EQUIRED)			
C1. Building elevations are based on: *A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the building televation with the complete Items C2.b (WSDOT/NOAA) Indicate elevation datum used for the elevations in MGVD 1929 NAVD 1988 Othe Datum used for building elevations must be the satisfied as a) Top of bottom floor (including basement, crawled) Top of the next higher floor C) Bottom of the lowest horizontal structural memical care in the complete in the complet	ction Drawings*	Iding Under Cong is completed FE), AR, AR/A in Item A7. In NAVD 1988 w. BFE. 38. 41. N/A	e. A, AR/A Puerto	/AE, AR/A1 o Rico only	A30, /, enter the me	hed Construction AR/AH, AR/AO. meters. easurement used. meters meters meters meters	
d) Attached garage (top of slab)		38.	9	X	feet	meters	
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co 	ervicing the building omments)	40		X	feet	meters meters	
 f) Lowest adjacent (finished) grade next to buildir 	ng (LAG)	38.	9	X	feet	meters	
g) Highest adjacent (finished) grade next to buildi	ng (HAG)	39.	2	X	feet	meters	
Lowest adjacent grade at lowest elevation of destructural support	eck or stairs, including	39.	8	X	feet	meters	
SECTION D - SURVEYOR							
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen statement may be punishable by fine or imprisonment to Were latitude and longitude in Section A provided by a	its my best efforts to inter under 18 U.S. Code, Sec	pret the data tion 1001.	availat	ble. I under	stand t	ation information. hat any false if attachments.	
Certifier's Name	License Number					1 v 2	
Howard S. Richardson Title PLS Company Name Olson Engineering, Inc. Address	38485				Pla Se	ce al re	
222 E. Evergreen Blvd.			_	1	9.6		
City Vancouver	State Washington	ZIP Code 98660			A	11-18	
Signature	Date 4-11-18	Telephone (360) 695-13	885				
Copy all pages of this Elevation Certificate and all attachm	ents for (1) community off	icial, (2) insura	ance ag	gent/compa	ny, and	(3) building owner.	
Comments (including type of equipment and location, pe A5 was taken from GoogleEarth and field verified. C2-el on WSDOT and NOAA benchmarks and balanced using bottom of the roof support pier on the west side of the st	evations were established OPUS. C2e is to the both	d from bench tom of the wa	marks iter hea	set by fast ater in the	static	GPS observations . C2h is the	

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IMPORTANT: In these spaces, copy the corres			FOR INSL	JRANCE COMPANY USE
Building Street Address (including Apt., Unit, Suit 1711 Blacktail Lane	te, and/or Bldg. No.) o	or P.O. Route and Box N	lo. Policy Nur	mber:
City	State	ZIP Code	Company	NAIC Number
Woodland	Washington	98674		
SECTION E - BUILDIN FOR	G ELEVATION INFO	ORMATION (SURVEY NE A (WITHOUT BFE)	NOT REQUIRE	D)
For Zones AO and A (without BFE), complete Iter complete Sections A, B,and C. For Items E1–E4, enter meters.	ms E1–E5. If the Cert use natural grade, if	ificate is intended to sup available. Check the me	port a LOMA or L asurement used.	OMR-F request, In Puerto Rico only,
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the local transfer of the transfer of	g and check the appro west adjacent grade (opriate boxes to show w LAG).	hether the elevati	on is above or below
Top of bottom floor (including basement, crawlspace, or enclosure) is		[feet [meters 🔲 abov	ve or _ below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet []	meters 🗌 abov	re or _ below the LAG.
E2. For Building Diagrams 6–9 with permanent fluthe next higher floor (elevation C2.b in	ood openings provide	d in Section A Items 8 a		
the diagrams) of the building is		feet []	meters 🗌 abov	e or below the HAG.
E3. Attached garage (top of slab) is		feet []	meters 🗌 abov	e or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is		feetr	meters abov	e or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ailable, is the top of th	ne bottom floor elevated own. The local official n	in accordance wit	h the community's
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE	E) CERTIFICATION	DN .
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign her	re. The statements in	s Sections A, B, and E for Sections A, B, and E are	or Zone A (without e correct to the be	t a FEMA-issued or est of my knowledge.
Property Owner or Owner's Authorized Represent				
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
			Chec	k here if attachments.
				k riere if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre	esponding information from Section A.		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 1711 Blacktail Lane	Policy Number:				
City Woodland	State ZIP Code Washington 98674		Company NAIC Number		
SECTIO	N G - COMMUNITY INFORMATION (OPTIC	ONAL)			
The local official who is authorized by law or on Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the applicable item(s) ter meters.	and sign t	pelow. Check the measurement		
engineer, or architect who is authorize data in the Comments area below.)	en from other documentation that has been s ed by law to certify elevation information. (Inc	dicate the	source and date of the elevation		
or Zone AO.	on E for a building located in Zone A (without		•		
G3. The following information (Items G4–	G10) is provided for community floodplain ma	anagemer	nt purposes.		
G4. Permit Number	G5. Date Permit Issued		ate Certificate of empliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Substantial Improven	nent			
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet [meters		
G9. BFE or (in Zone AO) depth of flooding at t	he 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 (including type of equipment and location, per C2(e), if applicable)					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

			- Principor Date: November 30, 2010	
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. 1711 Blacktail Lane			FOR INSURANCE COMPANY USE Policy 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 Front (east) view 04/02/2018



Photo Two Caption :Rear (west) view 04/02/2018

DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY COMMUNITY ACKNOWLEDGMENT FORM

O.M.B. NO. 1660-0015 Expires February 28, 2014

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 1.38 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting the form. This collection is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding

s for reducing this burden to: Information Collections Mai Il Street, Arlington, VA 20598-3005, Paperwork Reduction	nagement, Department of Homeland Security, n Project (1660-0015). NOTE: Do not send your
existing or proposed placement of fill (complete Section A ocated within the regulatory floodway (complete Section	A) OR to provide acknowledgment of this request to 18).
esponsible for floodplain management in the community. vided below. Incomplete submissions will result in proc	essing delays. Please refer to the MT-1 instruction
Lot 12, Meriwethe Property Name or Address: <u>1711 Blacklail Lar</u>	er Meriwether Hilltop 1B (Vol.14, Pg.118) ne, Woodland, WA 98674
floodplain management requirements, including the State, and local permits have been, or in the case or will document Endangered Species Act (ESA) concests, I acknowledge that compliance with Section (ESA) prohibits anyone from "taking" or harming an example of the section of	the requirement that no fill be placed in the of a Conditional LOMR-F, will be obtained. It is substituted by the conditional LOMR-F, will be obtained by the conditional LOMR-F, will be obtained by the conditional that is 9 and 10 of the ESA has been achieved and angered species. If an action might harm neries Service under Section 10 of the ESA the agency showing its compliance with isting or proposed structures to be removed the available upon request by ONS-SERMA, all
r Type)	Telephone No.:
Community Official's Signature: (required)	Date:
nanagement, I hereby acknowledge that we have re varded to DHS-FEMA to determine if this property has been or will be placed within the esigned to meet all of the community floodplain manager.	has been inadvertently included in the designated regulatory floodway. We find
L not	xisting or proposed placement of fill (complete Section A pocated within the regulatory floodway (complete Section A property Name or Address: Lot 12, Meriwethe

Community Official's Name and Tit	le: (Please Print or Type) COM. Dev. Virector	Telephone No.: 360-225-7299
Community Name: City of Woodland 533035	Complanity Official's Signature (required):	Date: 4/18/18