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 owner.

						3	my, and (o) ballang awrich
					RANCE COMPANY USE		
A1. Building Owner's Name				Policy Nur	nber:		
LGI Homes				***************************************			
 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 				Company	NAIC Number:		
1775 Chinook Ave.							
City	City State				ZIP Code		
Woodland Washington					98674		
A3. Property Des		nd Block Numbers, Ta	x Parce	el Number, Legal De	escription, etc.)		
		itial, Non-Residential, A	\ dditio	Accessory eta \	Residential		
A5. Latitude/Long			-	·122°44'10.07"			1927 X NAD 1983
		hs of the building if the	Certifi	cate is being used t	o obtain flood insura	ance.	
A7. Building Diagr	am Number	9					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		1,037 sq ft			
b) Number of	permanent flo	ood openings in the cra	wispad	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	ade 15
c) Total net ar	ea of flood or	penings in A8.b 1,1	55	sq in			***************************************
100.10		***************************************	THE RESIDENCE OF THE PERSON OF	-4			
d) Engineered	noou openin	gs? ☐ Yes ⊠ No)				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ed garage 390		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	garage within 1.0 fo	ot above adjacent g	rade	0
c) Total net are	c) Total net area of flood openings in A9.b 0 sq in						
d) Engineered		***************************************		_			
d) Engineered	nood openin	gs: [res [N	,				
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi	ty Name & C	ommunity Number		B2. County Name			B3. State
City of Woodland 5	30035			Cowlitz			Washington
B4. Map/Panel	B5. Suffix	B6. FIRM Index	B7. F	IRM Panel	B8. Flood Zone(s)	B9 Bas	e Flood Elevation(s)
Number		Date	E	ffective/	20111000 20110(0)	(Zor	ne AO, use Base
53015C0886	G	12/16/2016		evised Date /2016	AE	37.3	od Depth)
Mentinas da aminina con calina des destantes de impara e con don con cales de canado de entre en de constante					***************************************		
B10. Indicate the se	ource of the E	Base Flood Elevation (E	BFE) da	ata or base flood de	pth entered in Item	B9:	
							AND SAFET AND MACHINE WAS CONTRACTED BY CONTRACTED BY STATE OF THE SAFE OF THE
BTT. Indicate eleva	tion datum us	sed for BFE in Item B9:		GVD 1929 X NA	AD 1800 Ottu	er/Source:	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	PA)? ☐ Yes ⊠ No
Designation D	ate:	Пс	BRS	□ OPA			_
-	***************************************		0.000000000000000000000000000000000000				

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding informa	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No 1775 Chinook Ave.	Policy Number:				
City State Woodland Washington	Company NAIC Number				
SECTION C - BUILDING ELEVATION	NINFORMATION (SURVEY RE	EQUIRED)			
C1. Building elevations are based on: Construction Drawin *A new Elevation Certificate will be required when constructio C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V Complete Items C2.a–h below according to the building diagr	gs* Building Under Construent of the building is complete. /30, V (with BFE), AR, AR/A, AR/am specified in Item A7. In Puert ertical Datum: NAVD 1988 rough h) below. used for the BFE. Inclosure floor) 37. 9 40. 2 s only) N/A. 38. 3	uction*			
g) Highest adjacent (finished) grade next to building (HAG)	37. 8	x feet meters			
h) Lowest adjacent grade at lowest elevation of deck or stairs structural support	, including <u>38</u> . <u>5</u>	x feet meters			
SECTION D ~ SURVEYOR, ENGINE	ER, OR ARCHITECT CERTIFI	CATION			
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 License	Number	A commence of the second second			
Howard S. Richardson 38485 Title PLS Company Name Olson Engineering, Inc. Address 222 E. Evergreen Blvd.		WAS) Place Seal			
City State Vancouver Washing	ZIP Code ton 98660	01-85-11			
Signature Date 11-28	Telephone (360) 695-1385	_			
Copy all pages of this Elevation Certificate and all attachments for (1)	community official, (2) insurance a	gent/company, and (3) building owner.			
Comments (including type of equipment and location, per C2(e), if applicable) A5 was taken from GoogleEarth and field verified. C2-elevations were established from bench marks set by fast static GPS observations on WSDOT and NOAA benchmarks and balanced using OPUS. C2e is to the bottom of the water heater located in the garage. Ch is to the bottom of a roof support pier.					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURAN	CE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1775 Chinook Ave.				Policy Number:	
City Woodland	State Washington	ZIP Code 98674		Company NAIC	Number
SECTION E – BUILDING E FOR ZO	ELEVATION INFO			REQUIRED)	
For Zones AO and A (without BFE), complete Items I complete Sections A, B,and C. For Items E1–E4, use enter meters.					
E1. Provide elevation information for the following ar the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement,	nd check the appro it adjacent grade (I	priate boxes to s .AG).	show whether	r the elevation is	above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	40004-00-00-00-00-00-00-00-00-00-00-00-0	fe	et 🗌 meter	s above or	below the HAG.
crawlspace, or enclosure) is		[] fe			below the LAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided	d in Section A Ite	_		of Instructions), below the HAG.
E3. Attached garage (top of slab) is		[] fee	et meters	s above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	and the contract of the contra	[] fee	et 🗌 meters	above or	below the HAG.
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes [ble, is the top of th	e bottom floor ele own. The local o	evated in acc official must c	cordance with the ertify this informa	community's ition in Section G.
SECTION F - PROPERTY OV	VNER (OR OWNE	R'S REPRESEN	TATIVE) CE	RTIFICATION	
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	tive who completes The statements in	Sections A, B, a Sections A, B, a	and E for Zor nd E are corr	ne A (without a Fl ect to the best of	EMA-issued or my knowledge.
Property Owner or Owner's Authorized Representativ	e's Name				
Address	C	City	Sta	te	ZIP Code
Signature	E	Date	Tele	ephone	
Comments					
				Check her	re if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, 1775 Chinook Ave.	Policy Number:				
City Woodland	State Washington	ZIP Code 98674	Company NAIC Number		
SECT	ION G - COMMUNITY INFOR	MATION (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 ta engineer, or architect who is author data in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation				
G2. A community official completed Second Zone AO.	ction E for a building located in	Zone A (without a FEMA	A-issued or community-issued BFE)		
G3. The following information (Items G4	-G10) is provided for commur	nity floodplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		late Certificate of ompliance/Occupancy Issued		
G7. This permit has been issued for: [☐ New Construction ☐ Subs	tantial Improvement			
G8. Elevation of as-built lowest floor (includir of the building:	ng basement)	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 (including type of equipment and lo	cation, 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

MPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1775 Chinook Ave.			
City	State	ZIP Code	Company NAIC Number
Woodland	Washington	98674	

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

Photo One Caption Front (south) view 11/23/2016



Photo Two

Photo Two Caption :Rear (North) view 11/23/2016

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 the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0015). NOTE: Do not send your completed form to this address.

Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0015). NOTE: Do not send your completed form to this address.			
	xisting or proposed placement of fill (complete Section A) OR to pocated within the regulatory floodway (complete Section B).	provide acknowledgment of this request to	
This form must be completed and signed by the official res subject property address must appear in the spaces provi for additional information about this form.	sponsible for floodplain management in the community. The six vided below. Incomplete submissions will result in processing d	delays. Please refer to the MT-1 instructions	
Community Number: 530035	Lot 89, Meriwether Ph2, (Property Name or Address: 1775 Chinook Ave. Wood		
A. REQUESTS INVOLVING THE PLACEMENT OF FILL			
Revision Based on Fill (LOMR-F) or Conditional LOMR meets or is designed to meet all of the community for regulatory floodway, and that all necessary Federal, Sero Conditional LOMR-F requests, the applicant has conditional LOMR-F determination. For LOMR-F requindependently of FEMA's process. Section 9 of the ES an endangered species, a permit is required from U.S. For actions authorized, funded, or being carried out to Section 7(a)(2) of the ESA will be submitted. In addition the SFHA are or will be reasonably safe from floanalyses and documentation used to make this determinant to the section of the section. Community Comments:	management, I hereby acknowledge that we have received. R-F request. Based upon the community's review, we find toodplain management requirements, including the requirements, and local permits have been, or in the case of a Coror will document Endangered Species Act (ESA) compliance usets, I acknowledge that compliance with Sections 9 and SA prohibits anyone from "taking" or harming an endanges. Fish and Wildlife Service or National Marine Fisheries So by Federal or State agencies, documentation from the again, we have determined that the land and any existing or boding as defined in 44CFR 65.2(c), and that we have avail remination. For LOMR-F requests, we understand that this	nd the completed or proposed project direment that no fill be placed in the conditional LOMR-F, will be obtained once to FEMA prior to issuance of the d 10 of the ESA has been achieved greed species. If an action might harm Service under Section 10 of the ESA, gency showing its compliance with proposed structures to be removed illable upon request by DHS-FEMA, all its request is being forwarded to DHS-	
Community Official's Name and Title: (Please Print or		Telephone No.:	
Community Name:	Imgardner, Building Official Community Official's Signature: (required)	360-225-7299 Date:	
City of Woodland 530035	Wedly & Saungal	12-12-16	
B. PROPERTY LOCATED WITHIN THE REGULATORY FL	0	12-12-10	
LOMA. We understand that this request is being forware regulatory floodway. We acknowledge that no fill on t	nanagement, I hereby acknowledge that we have received varded to DHS-FEMA to determine if this property has bee this property has been or will be placed within the design esigned to meet all of the community floodplain managen	en inadvertently included in the nated regulatory floodway. We find	
Community Official's Name and Title: (Please Print or)	Гуре)	Telephone No.:	
Community Name: City of Woodland 533035	Community Official's Signature (required);	Date:	