

U.S. DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
 National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008
 Expiration: 11/30/2018

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				Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1735 Chinook Ave.				Company NAIC Number:		
City Woodland		State WA		Zip Code 98674		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 92, Meriwether PH2 (Vol. 14, Pg. 103)						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)						
A5. Latitude/Longitude: Lat. 45°55'29.49" Long. 122°44'14.58" Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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):				A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) 1485 sq ft		b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 2		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 2
c) Total net area of flood openings in A8.b 1485 sq in		d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		c) Total net area of flood openings in A9.b 400 sq in		d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> 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 53015C0886	B5. Suffix G	B6. FIRM Index Date Dec. 16, 2015	B7. FIRM Panel Effective/ Revised Date Dec. 15, 2015	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 37.1'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: <input checked="" type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input type="radio"/> 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: WSDOT			Vertical Datum: NAVD 1988			
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)	36.3			<input checked="" type="radio"/> feet	<input type="radio"/> meters	
b) Top of the next higher floor	38.1			<input checked="" type="radio"/> feet	<input type="radio"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	NA.			<input type="radio"/> feet	<input type="radio"/> meters	
d) Attached garage (top of slab)	NA.			<input type="radio"/> feet	<input type="radio"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	NA.			<input type="radio"/> feet	<input type="radio"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	37.8			<input checked="" type="radio"/> feet	<input type="radio"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	37.9			<input checked="" type="radio"/> feet	<input type="radio"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	NA.			<input type="radio"/> feet	<input type="radio"/> meters	

ELEVATION CERTIFICATE, page 2

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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. 1735 Chinook Ave.			Policy Number:		
City Woodland		State WA	Zip Code 98674		Company NAIC Number:
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>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.</i>					
<input type="checkbox"/> Check here if attachments.			Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No		
Certifier's Name Howard S. Richardson			License Number 38485		
Title PLS		Company Name Olson Engineering, Inc.			
Address 222 E. Evergreen Blvd		City Vancouver	State WA	Zip Code 98660	
Signature 		Date 7-22-16	Telephone 360-695-1385		
Copy all pages of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable) A5 was taken from Google Earth and field verified. C2-Elevations were determined from benchmarks establish by GPS observations using NOAA benchmarks and adjusted by OPUS. C2a was determined from information provided by the contractor. C2 f & g are the existing elevations on the lot.					
Signature 			Date 7-22-16		
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 _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.					
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.					
E2. For Building Diagrams 6-9 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 _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.					
E3. Attached garage (top of slab) is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.					
E4. Top of platform of machinery and /or equipment servicing the building is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> 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 or Owner's Authorized Representative's Name					
Address		City	State	ZIP Code	
Signature		Date	Telephone		
Comments					
<input type="checkbox"/> Check here if attachments.					

