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.

		TION A - PROPERTY	INFO	RMATION			URANCE COMPANY USE
A1. Building Owner's Name						Policy Nu	
LGI Homes							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Company	NAIC Number:		
	2 Gorge Ct.						
•	City State Woodland Washington				ZIP Code		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
Lot 6, Meriwethe	r Hilltop PH.	1, Ph. 1B (Vol. 14, Pg.	118	, _ogu	addition, ctc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Long	A5. Latitude/Longitude: Lat. 45°55'33.68"						1927 × NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certifi	cate is being used			A W.D 1000
A7. Building Diagr		9					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		1,124 sq ft			
b) Number of	permanent flo	ood openings in the cra	wispa	ce or enclosure(s) v	vithin 1.0 foot above	adiacent o	rade 15
c) Total net a	rea of flood o	penings in A8.b1,1		sq in		,	
d) Engineered	flood openin	gs? ☐ Yes ⊠ N	0				
A9. For a building	with an attach	ned garage:					
a) Square foo		-		sq ft			
		ood openings in the atta		•	-1 -1		
c) Total net an			_	AND THE RESERVE OF THE PARTY OF	ot above adjacent gi	ade	0
			0	sqin			
d) Engineered	ilood openin	gs? ☐ Yes ⊠ No	D				
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communi	ty Name & C	ommunity Number		B2. County Name		1014	B3. State
City of Woodland 530035			25. 68		Washington		
B4. Map/Panel	B5. Suffix	B6. FIRM Index	B7. FI	RM Panel	B8. Flood Zone(s)	B9 Bas	se Flood Elevation(s)
Number		Date	Ef	fective/ evised Date	20110(0)	(20)	ne AO, use Base
53015C0886	G	12/15/2016	12/15	/2016	AE	37.3	od Deptin)
B10 Indicate the se	ourse of the E	Issa Flood Flouria (F					
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 X 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							

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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. Policy Number: 402 Gorge Ct. City State ZIP Code Company NAIC Number Woodland Washington 98674 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* Building Under Construction* X 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/NOAA 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. 37 5 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) . × feet meters 41 2 b) Top of the next higher floor x feet meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) X feet meters 39 4 X feet d) Attached garage (top of slab) meters 40 9 e) Lowest elevation of machinery or equipment servicing the building X feet meters (Describe type of equipment and location in Comments) 39.4 f) Lowest adjacent (finished) grade next to building (LAG) x feet meters 39.8 g) Highest adjacent (finished) grade next to building (HAG) X feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including 40.0 x feet meters structural support 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 \(\simega\) Yes Check here if attachments. Certifier's Name License Number COTTRI 38485 Howard S. Richardson Title PLS Rlace Company Name Olson Engineering, Inc. Address 222 E. Evergreen Blvd. City State ZIP Code Washington 98660 Vancouver Date Telephone Signature (360) 695-1385 4-11-18 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) 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 in the garage. C2h is the bottom of the roof support pier on the east side of the structure.

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Building Street Address (including Apt., Unit, Suite, and/o 402 Gorge Ct.	r Bldg. No.) or P.O. R	oute and Box No.	Policy Number	
	shington 9	IP Code 8674	Company NA	IC Number
SECTION E - BUILDING ELEV FOR ZONE A	ATION INFORMATION AND ZONE A (W	ION (SURVEY NO	OT REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use natuenter meters.	E If the Continue to		t a LOMA or LOM rement used. In F	IR-F request, Puerto Rico only,
E1. Provide elevation information for the following and ch the highest adjacent grade (HAG) and the lowest adja	eck the appropriate bacent grade (LAG).	oxes to show wheth	her the elevation	is above or below
Top of bottom floor (including basement, crawlspace, or enclosure) is		feet met	ters above c	or Delow the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met		or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in	nings provided in Sect			-2 of Instructions),
the diagrams) of the building is		feet met	ers 🗌 above o	r below the HAG.
E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment		feet met	ers 🗌 above o	r Delow the HAG.
servicing the building is				r Delow the HAG.
E5. Zone AO only: If no flood depth number is available, is floodplain management ordinance? Yes No	the top of the bottom Unknown. Th	n floor elevated in a le local official musi	ccordance with the certify this information	ne community's nation in Section G.
SECTION F - PROPERTY OWNER	(OR OWNER'S REF	RESENTATIVE) C	ERTIFICATION	
The property owner or owner's authorized representative woommunity-issued BFE) or Zone AO must sign here. The sepreparty Owner or Owner's Authorized Representative's National Representative National Representative (1971).	toternemis in dections	is A, B, and E for Z A, B, and E are co	one A (without a prect to the best o	FEMA-issued or of my knowledge.
Address	City	S	tate	ZIP Code
Signature	Date	Te	elephone	
Comments				·
			Check h	ere if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre			FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St. 402 Gorge Ct.	uite, and/or Bldg. No.) or P.O.	. Route and Box No.	Policy Number:		
City		ZIP Code	Company NAIC Number		
Woodland	Washington	98674			
SECTIO	ON 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 take engineer, or architect who is authorize data in the Comments area below.)	ed by law to certify elevation i	information. (Indicate the	e source and date of the elevation		
G2. A community official completed Section or Zone AO.	on E for a building located in	Zone A (without a FEMA	4-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided for commun	ity floodplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subst	tantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	p basement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the	he building site:				
G10. Community's design flood elevation:		feet	meters Datum		
Local Official's Name	Title				
Community Name	Teleş	phone			
Signature	Date				
Comments (including type of equipment and local	ation, per C2(e), if applicable)			
	Section and the section of the secti	•			
			Check here if attachments.		

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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Building Street Address (including 402 Gorge Ct.	Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Woodland	State Washington	ZIP Code 98674	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 Front (west) view 04/11/18



Photo Two Caption :Rear (east) view 04/11/18

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 disclosed as a bit formation of information unless a valid OMB control number is disclosed as a bit formation or retain

Ill the accounter of the burden estimate and any suggestions	for reducing this burden to: Information Collections Manageme Street, Arlington, VA 20598-3005, Paperwork Reduction Projections	ant December of City
This form must be completed for requests involving the ex remove a property from the SFHA which was previously lo	cisting or proposed placement of fill (complete Section A) OR to cated 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 sided below. Incomplete submissions will result in processing	ix digit NFIP community number and the delays. Please refer to the MT-1 instructions
Community Number: 530035	Lot 6, Meriwether Meriv Property Name or Address: <u>402 Gorge Ct. Woodlar</u>	wether Hilltop 1B (Vol.14, Pg.118) ad. WA 98674
A. REQUESTS INVOLVING THE PLACEMENT OF FILL		
meets or is designed to meet all of the community floregulatory floodway, and that all necessary Federal, Sero Conditional LOMR-F requests, the applicant has of 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 be Section 7(a)(2) of the ESA will be submitted. In addition the SFHA are or will be reasonably safe from floregular to the section floregular	management, I hereby acknowledge that we have receit R-F request. Based upon the community's review, we fir coodplain management requirements, including the requistance and local permits have been, or in the case of a Coor will document Endangered Species Act (ESA) compliancests, I acknowledge that compliance with Sections 9 and SA prohibits anyone from "taking" or harming an endang S. Fish and Wildlife Service or National Marine Fisheries by Federal or State agencies, documentation from the agon, we have determined that the land and any existing coding as defined in 44CFR 65.2(c), and that we have avairnination. For LOMR-F requests, we understand that the	and the completed or proposed project pirement that no fill be placed in the conditional LOMR-F, will be obtained. Ince to FEMA prior to issuance of the id 10 of the ESA has been achieved gered species. If an action might harm Service under Section 10 of the ESA. gency showing its compliance with or proposed structures to be removed ailable upon request by DHS-FEMA, all is request is being forwarded to DHS-
Community Official's Name and Title: (Please Print or COM. Dev Community Name:	Director	Telephone No.: 360-225-7299
City of Woodland 530035	Community Official's Signature: (required)	Date: 4/20/18
B. PROPERTY LOCATED WITHIN THE REGULATORY FL	OODWAY	
As the community official responsible for floodplain m LOMA. We understand that this request is being forwaregulatory floodway. We acknowledge that no fill on t that the completed or proposed project meets or is decommunity Comments:	arded to DHS-FEMA to determine if this property has be this property has been or will be placed within the design is great to meet all of the community floodplain manage	een inadvertently included in the
Community Official's Name and Title: (Please Print or 1	Гуре)	Telephone No.:
Community Name: City of Woodland 533035	Community Official's Signature (required):	Date: