

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires December 31, 2005

### ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Woodland Meadows Housing Partners LLC			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 140 Mustang Drive			Company NAIC Number	
CITY Woodland	STATE WA	ZIP CODE 98574		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 1, Short Plat 5-273 Building A				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##" or ##.###)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type) _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other _____

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIRM COMMUNITY NAME & COMMUNITY NUMBER 53005		B2. COUNTY NAME Cowlitz		B3. STATE WA	
B4. MAP AND PANEL NUMBER 0001	B5. SUFFIX C	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9/04/03	B8. FLOOD ZONE(S) A15	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 32.7

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929

NAVD 1988  Other (Describe): \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No Designation Date: \_\_\_\_\_

### 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.

C2. Building Diagram Number 7 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3-94 below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum: \_\_\_\_\_ Conversion/Comments: \_\_\_\_\_

Elevation reference mark used R44 Does the elevation reference mark used appear on the FIRM?  Yes  No

- a) Top of bottom floor (including basement or enclosure) ~~29.3 ft (m)~~
- b) Top of next higher floor ~~34.2 ft (m)~~
- c) Bottom of lowest horizontal structural member (V zones only) ~~X. X ft (m)~~
- d) Attached garage (top of slab) ~~29.1 ft (m)~~
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) ~~29.1 ft (m)~~
- f) Lowest adjacent (finished) grade (LAG) ~~29.0 ft (m)~~
- g) Highest adjacent (finished) grade (HAG) ~~32.2 ft (m)~~
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade g
- i) Total area of all permanent openings (flood vents) in C3.h ~~21202 sq. in. (sq. cm)~~

License Number, Expiration Date, Signature, and Date



12/28/05

### 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 in Sections A, B, and C 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.

CERTIFIER'S NAME Kurt F. Stoner

LICENSE NUMBER 26352

TITLE PLS	COMPANY NAME Olson Engineering, Inc.		
ADDRESS 1111 Broadway	CITY Vancouver	STATE WA	ZIP CODE 98580
SIGNATURE 	DATE 12/28/05	TELEPHONE (360) 695-1385	

**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.

140 Hillshire Drive

For insurance Company Use

Policy Number

CITY

Woodland

STATE

WA

ZIP CODE

98674

Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

**COMMENTS**

This building has a lower level with parking, a crawl space and a machinery room (C3a). All of the living space is above C3b.

The vents are as follows: 2/ 18"x18", 1/100"x87" and 1/93"x129"

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is \_\_\_ ft.(m) \_\_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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 verify 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, C (items C3.b and C3.i only), 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, C, 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.

G1.  The information in Section C was taken from other documentation that has been signed and (embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement.

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments