

06/09/1995 05:55 3606948410

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3087-0077  
 Expires July 31, 2002

Alan  
 BOB

Building Dept Important: Read the instructions on pages 1-7.

**SECTION A - PROPERTY OWNER INFORMATION**

For Insurance Company Use:  
 Policy Number  
 Company NAIG Number

BUILDING OWNER'S NAME: Rockford Homes

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 1931 MEADOWOOD LOOP

CITY: WOODLAND STATE: WA ZIP CODE: 98674

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOT 12 "AMENDED PLAT OF MEADOWOOD"

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (MM° - SS' - DD" or DD.MMMMM°): \_\_\_\_\_ HORIZONTAL DATUM:  NAD 1927  NAD 1983

SOURCE:  GPS (Type): \_\_\_\_\_  USGS Quad Map  Other: \_\_\_\_\_

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

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: WOODLAND 530035 B2. COUNTY NAME: COWLITZ B3. STATE: WA

B4. MAP AND PANEL NUMBER: <u>0001</u>	B5. SUFFIX: <u>C</u>	B6. FIRM INDEX DATE: <u>NOV 2, 1973</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>SEPT 9, 1985</u>	B8. FLOOD ZONE(S): <u>A-15</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>33.70</u>
---------------------------------------	----------------------	---	--	--------------------------------	--

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)**

1. 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 6 (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 C3a-f 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 BM Does the elevation reference mark used appear on the FIRM?  Yes  No

a) Top of bottom floor (including basement or enclosure) 32.82 ft. (m)

b) Top of next higher floor \_\_\_\_\_ ft. (m)

c) Bottom of lowest horizontal structural member (V zones only) \_\_\_\_\_ ft. (m)

d) Attached garage (top of slab) 32.82 ft. (m)

e) Lowest elevation of machinery and/or equipment servicing the building 34.82 ft. (m)

f) Lowest adjacent grade (LAG) 31.1 ft. (m)

g) Highest adjacent grade (HAG) 31.6 ft. (m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4

i) Total area of all permanent openings (flood vents) in C3h 92 sq. ft. (8.5 sqm)



**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: BOLTON C. MINISTER LICENSE NUMBER: 12573 WASH

TITLE: PRESIDENT COMPANY NAME: MINISTER AND GLASSER SURVEYING INC.

ADDRESS: 2200 E. EVERGREEN BLVD CITY: YANVS. STATE: WA ZIP CODE: 98661

SIGNATURE: [Signature] DATE: 4/8/00 TELEPHONE: 360-694-3313

